

# CUSTODIAL CARE GUIDELINE

#### **Definition**

Custodial care is primarily for the purpose of assisting an individual in the activities of daily living or in meeting personal, rather than medical, needs, which is not specific therapy for an illness or injury and is not skilled care.

Custodial care serves to assist an individual in the activities of daily living, such as help in walking, getting out of bed, bathing, dressing, feeding, using the toilet, food preparation, and supervision of medication that usually can be self-administered.

Custodial care essentially is personal care that does not require the continuing attention or supervision of trained, medical, or paramedical personnel.

Custodial care is maintenance care provided by family members, health aides or other unlicensed individuals after an acute medical event when an individual has reached the maximum level of physical or mental function.

In determining whether an individual is receiving custodial care, the factors considered are the level of care and medical supervision required and furnished. The decision is not based on diagnosis, type of condition, degree of functional limitation or rehabilitation potential.

### **Examples of custodial care:**

- Assistance in dressing, eating, and toileting.
- Positioning in bed.
- Prophylactic and palliative skin care, including bathing and application of creams, or treatment of minor skin problems.
- Stable bolus feeding by nasogastric, gastrostomy or jejunostomy tube (Note: skilled care, supervision or observation may be required if feedings
  are not stable).
- Routine care of the incontinent individual, including use of diapers and protective sheets.
- Routine services to maintain satisfactory functioning of indwelling bladder catheters (this would include emptying containers and cleaning them and clamping tubing).
- General maintenance care of colostomy and ileostomy.
- General supervision of exercise which does not require skilled rehabilitation personnel.

## **Examples of exercise supervision may include:**

- Repetitive exercises to maintain function, improve gait, or maintain strength or endurance, passive exercises to maintain range of motion in paralyzed extremities, or assisted walking.
- Dressing changes for non-infected postoperative or chronic conditions.
- General maintenance care in connection with a plaster cast (skilled supervision or observation may be required where the individual has preexisting skin or circulatory conditions or needs to have traction adjusted).
- Routine care in connection with braces and similar devices.
- Use of heat as a palliative and comfort measure, such as whirlpool or steam pack.
- Routine administration of medical gases after a regimen of therapy has been established (i.e., administration of medical gases after the
  individual has been taught how to institute therapy).
- Administration of routine oral medications, eye drops, self-injectable medications and ointments (the fact that an individual cannot be relied
  upon to take such medications themselves or that state law requires all medications be dispensed by a nurse to those individuals in an
  institution would not change this service to a skilled service).
- Chronic uncomplicated oral or tracheal suctioning (Note: skilled care, supervision or observation may be required if suctioning is complicated).

## **Benefits statement**

Custodial care is not a covered benefit by Gold Coast Health Plan (GCHP). Custodial care is a covered benefit for the Medi-Cal Fee-For-Service program through IHSS.



### References

Centers for Medicare and Medicaid Services. Medicare Benefit Policy Manual. Chapter 16. General Exclusions from Coverage. Rev.122, 04-09-10. Available at: <a href="https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c16.pdf">https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c16.pdf</a>. Accessed: September 18, 2024.

Centers for Medicare and Medicaid Services. Medicare Benefit Policy Manual. Chapter 7. Home Health Services. Rev. 144, 05-06-11. Available at: <a href="http://www.cms.hhs.gov/manuals/Downloads/bp102c07.pdf">http://www.cms.hhs.gov/manuals/Downloads/bp102c07.pdf</a>. Accessed: September 18, 2024.

Gold Coast Health Plan 2022 Member Handbook, page 47. Services you cannot get through GCHP or Medi-Cal. Available at: <a href="https://res.cloudinary.com/dpmykpsih/raw/upload/gold-coast-site-258/media/r/d1d15d607f13484eb91bedb2b00c57ce/gchp-memberhandbookeng">https://res.cloudinary.com/dpmykpsih/raw/upload/gold-coast-site-258/media/r/d1d15d607f13484eb91bedb2b00c57ce/gchp-memberhandbookeng 2022 digital v4-finalp.pdf</a>. Accessed: September 18, 2024.

MEDICAL ADVISORY COMMITTEE GUIDELINE HISTORY			
Adopted By MAC	Reapproved	Revised	Retired
October 17, 2013			
	October 16, 2014		
	October 29, 2015		
	October 27, 2016		
	October 26, 2017		
	October 25, 2018		
	October 24, 2019		
	October 22, 2020		
	October 21, 2021		
	October 20, 2022		
		October 19, 2023	
MAC Sunset on July 18, 2024			
CREDENTIALING PEER REVIEW COMMITTEE (C/PRC) GUIDELINE HISTORY			
Adopted By CPRC	Reapproved	Revised	Retired
		March 6, 2025	