



Adult Residential Care in Community Facilities

Effective Date: December 11, 2012

Purpose

This policy provides direction on the continuation of [adult residential care \(ARC\)](#) to clients in community facilities after June 30, 1993, under the [Veterans Health Care Regulations](#).

Policy

General

1. ARC in community facilities was provided as a Veterans Independence Program (VIP) service to eligible clients until June 30, 1993. Effective July 1, 1993, ARC was removed as a VIP service. Clients who were approved for ARC prior to its termination, July 1, 1993, were grandfathered for this care.
2. This policy also provides direction on how the grandfather provision applies not only to clients receiving ARC service on June 30, 1993, but also to clients receiving [intermediate care service](#) on June 30, 1993, who might later require ARC in a community facility, as they were already in receipt of the basic elements of ARC service as part of their intermediate care service.

Eligible Clients

3. The following clients may receive ARC in community facilities after June 30, 1993:
 - a. clients with contribution arrangements in effect on June 30, 1993, authorizing the provision of ARC;
 - b. clients whose applications for ARC in community facilities, received as of June 30, 1993, were subsequently approved;
 - c. clients receiving Intermediate Care Service on June 30, 1993, if:
 - i. an assessment indicates that the provision of ARC would be a more appropriate response to their health needs; and
 - ii. they meet the approval conditions as outlined in paragraph 4; and
 - d. clients in receipt of ARC in community facilities on June 30, 1993, who, after that date, require Intermediate Care Service and who subsequently improve to the point that:
 - i. an assessment indicates the provision of ARC is once again the most appropriate response to their health needs; and
 - ii. they meet the approval conditions outlined in paragraph 4.

Approval Conditions

4. The clients noted in paragraph 3 may receive ARC in community facilities after June 30, 1993, if:
 - a. they continue without interruption to require and receive this care, and
 - b. they continue to meet VIP eligibility criteria.
5. ARC cannot be provided to clients after June 30, 1993, if, after that date:
 - a. they lose the eligibility through which they initially gained access to the provision of this care in a



community facility, and they do not meet the eligibility criteria of any other VIP eligible client group; or

- b. there is an interruption in the provision of the care (e.g. client discharges from the facility). A client who transfers from one facility to another is not considered to have an interruption of care.

Rate

6. The maximum rate payable for the continuation of ARC in community facilities after June 30, 1993, is provided in Maximum Rates Payable for Veterans Independence Program and Long Term Care Program Services.

Accommodations and Meals

7. Clients who are eligible to continue receiving ARC in community facilities after June 30, 1993, must continue to pay up to the maximum [accommodation and meal rate](#) (see [Accommodation and Meals Contribution](#) policy).

Miscellaneous

8. Clients who are eligible to continue receiving ARC in community facilities are eligible to receive the costs of transportation incurred in Canada if transferred from one health care facility to another for medical reasons. (See [Health-related Travel](#) policy.)

References

Veterans Health Care Regulations

[Accommodation and Meals Contribution](#)

[Health-related Travel](#)