California Children’s Services (CCS) Provider Webinar

July 2020
CenCal Health Panel

- Ana Stenersen, Pediatric Clinical Manager
- Rea Goumas, M.D., Whole Child Medical Director
- Arianna Castellanos, Provider Relations Manager
- Dona Lopez, Senior Provider Services Representative
- Maria Hernandez, Cultural & Language Coordinator
- Lizette Forney, Member Services Supervisor
- Robyn Campitelli, Claims Services Supervisor
- Lucy Renteria, Claims Provider Data Configuration Analyst
- Stephanie Lem, PharmD, Pharmacy Service Clinical Manager
- Amanda Pyper, MA MPA LMFT, Behavioral Health Program Manager
Santa Barbara & San Louis Obispo County Panel

Santa Barbara County
• Dorothy Blasing, Supervising Public Health Nurse
• Tanesha Castaneda, Children’s Medical Services Manager

San Louis Obispo County
• Bridgette Hernandez, PHN, MSN, Supervising Public Health Nurse
• Francesca Peterson, Director, Children’s Medical Services
Agenda

• CCS Overview & Eligibility
• Referrals & Authorizations
• Pharmacy Services
• Claims Processing
• Case Management & Additional Services
  o Behavioral Health Benefit
  o Transportation Benefit
  o Language Interpreter Services
• Q&A Panel
The CCS program provides diagnostic and treatment services, medical case management, and physical and occupational therapy services to children under age 21 with CCS-eligible medical conditions.

CCS-eligible conditions include, but are not limited to:

• Chronic medical conditions (such as cystic fibrosis)
• Hemophilia
• Cerebral palsy
• Heart disease
• Cancer
• Traumatic Injuries
• Infectious diseases producing major sequelae.
The County’s Role

- The County…
  - Determines eligibility for the CCS Program
    - Medical, financial & residential
  - Administers the CCS Medical Therapy Program
    - Occupational Therapy, Physical Therapy and DME
  - Conducts Annual Eligibility Review
    - Medical, financial & residential
The County’s Role

- Referrals are made to CCS via the CenCal Provider Portal for Full Scope Medi-Cal clients…
- … or submitting a Service Authorization Request (SAR) form to County CCS for non-Full Scope Medi-Cal clients
  - CCS referrals should be made as early as possible
  - If the applicant does not have full scope Medi-Cal:
    - Timeliness of new referrals is critical for authorization of services
      - Referral must be received within 24 hours (or next business day if service spans a weekend or holiday).
      - If authorization is requested for a new condition of an existing client, submission must also be timely.
There are two types of SAR forms for non-Full Scope Medi-Cal CCS referrals:

- CCS/GHPP **New Referral SAR**
    - Refer a potential CCS client to the CCS program
    - Request authorization of an initial service

- CCS/GHPP **Established Client SAR**
    - Request authorization of services related to the CCS-eligible medical condition for an established CCS client.

**Information to include with SAR Request:**

- Complete client info – Name, DOB, address, phone
- ICD-10 Code(s)
- Available medical reports documenting suspicion or confirmation of a CCS eligible medical condition
- Copy of insurance card if private insurance/other healthcare coverage (OHC)
The County’s Role

- **MTU Referral Process**
  - RX from a CCS-paneled provider
  - CCS application
  - Medical reports from a CCS-paneled provider that supports the MTU eligible diagnosis
  - Residential eligibility
  - **Note:** Financial eligibility is not required for the CCS MTU program

- **For Non-Full Scope Medi-Cal clients**, once a SAR Request has been received and processed by the SB/SLO County CCS program, the provider will receive written notification from SB/SLO County CCS, typically within 5 business days regarding the status of the submitted SAR.
  - New referrals may be held in “pending” status while undergoing client’s eligibility process (medical, financial & residential), which can extend beyond 5 days
  - Non-Full Scope Medi-Cal clients must submit an **Application to Determine CCS Program Eligibility**
CenCal Health’s Role

• CenCal Health is responsible for the care coordination of CenCal Health eligible CCS members
• Responsible for reviewing and determination of authorizations and for durable medical equipment (DME)
• Processing all eligible CCS claims for both counties
• Managing a provider network for CCS-Paneled Providers
Data Requirements:
1. Member ID# or Last 4 of Member’s SSN
2. Members Date of Birth or First/Last Name
3. Date of Service (DOS)

How to verify CenCal Health CCS Eligibility
Referrals & Authorizations

Ana Stenersen
Clinical Manager - Pediatrics
## Authorizations

<table>
<thead>
<tr>
<th>SAR (Service Auth Request)</th>
<th>PAST PROCESS PRE-WCM</th>
<th>CURRENT PROCESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>RAF (Referrals)</td>
<td>RAF not required</td>
<td>RAF required by CenCal&lt;br&gt;  - For additional services please reference our ‘RAF Exceptions’ list online <a href="http://www.cencalhealth.org/providers/authorizations/referrals/">www.cencalhealth.org/providers/authorizations/referrals/</a></td>
</tr>
<tr>
<td>TAR (Treatment Auth Request)</td>
<td>TAR required by CenCal for non-CCS related services</td>
<td>TAR required by CenCal Health for all CCS related and non-CCS related services</td>
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[https://www.cencalhealth.org/providers/authorizations/](https://www.cencalhealth.org/providers/authorizations/)
Referring New CCS Cases

- Refer to CCS County for eligibility determination
- Refer to CenCal Health for NICU and HRIF (high risk infant follow-up)
- Refer to CCS Paneled Providers within the CenCal Heath Provider Network
- Documentation needed:
  Prescription, recent medical reports, recent clinic visit notes, Inpatient notes, any other relevant reports

Please remember, refer, refer, refer!

https://www.cencalhealth.org/providers/ccs-whole-child-model/
Here is a list of CCS program providers located within CenCal Health’s service area of Santa Barbara and San Luis Obispo County.

All providers that give services to our CenCal Health CCS eligible members are required to be CCS-paneled.

These providers are trained health care staff who know how to care for our CCS members with special health care needs.

https://www.cencalhealth.org/providers/ccs-whole-child-model/

https://www.dhcs.ca.gov/services/ccs/Pages/ProviderEnroll.aspx
Pending Authorizations need supporting documentation for medical justification:

- Fax Pediatric (0-20yrs) documentation (805) 692-5140
- Secure File Drop [https://transfer.cencalhealth.org/filedrop/hs](https://transfer.cencalhealth.org/filedrop/hs)

Additional Requirements:

- Add a cover page
- Phone/Email Contact Information
- Direct phone line
- Department
- Number of pages you are faxing over
- Reference the TAR# on the top of every document

Authorization Assistance
call (805) 562-1082
Referring NICU (Neonatal Intensive Care Unit)

- Refer NICU members to CenCal Health and we will determine medical acuity for NICU

- NICU Acuity Criteria – CCS Numbered Letter 05-0502
  [https://www.dhcs.ca.gov/services/ccs/Pages/CCSNL.aspx](https://www.dhcs.ca.gov/services/ccs/Pages/CCSNL.aspx)

- CenCal Health will process claims for all NICU services for CenCal Health CCS eligible members
HRIF (High risk infant follow-up program)

Identifies infants who might develop CCS-eligible conditions after discharge from a ccs-approved NICU. The baby must be CCS eligible during the NICU stay to be considered for HRIF follow-up.

HRIF provides the following reimbursable diagnostic services:

- Comprehensive history and physical examination with neurologic assessment
- Developmental assessment (Bayley Scales of Infant Development [BSID] or an equivalent test)
- Family psychosocial assessment
- Hearing assessment
- Ophthalmologic assessment
- Coordinator services (including assisting families in accessing identified, needed interventions and facilitating linkages to other agencies and services)

https://www.dhcs.ca.gov/services/ccs/pages/HRIF.Aspx
The Special Care Center (SCC) provides comprehensive, coordinated health care to CCS and Genetically Handicapped Persons Program (GHPP) for clients with specific medical conditions. SCCs are located in tertiary hospitals.

Organized around a specific condition or system and are comprised of multi-disciplinary, multi-specialty providers who evaluate the member’s medical condition and develop a family-centered health care plan to facilitate the provision of timely, coordinated treatment.

Examples: Communication disorder center, HEM-ONC SCC, Endocrine SCC, pulmo and respiratory SCC, etc.

https://www.dhcs.ca.gov/services/nhsp/Pages/NHSPSCC.aspx
Extension of Authorizations for Follow-Up Care

- County CCS will review a member’s continued eligibility (Annual case reviews) for CCS

- Documentation needed: recent medical reports, recent clinic visit notes, Inpatient notes, any other relevant reports

- CenCal Health will extend authorizations for follow-up care with CCS paneled providers and SCCs for the annual CCS eligibility period

- Continuity of care requests will be reviewed on an as needed basis
Authorization Reminders

• Providers can access the CenCal Health Provider Portal to submit Referrals and Authorizations at cencalhealth.org/providers/provider-portal/

• All request for authorizations for children with a CCS eligible condition will be reviewed by CenCal Health

• If the authorized services are related to the CCS condition, CenCal Health will require the child to be seen by a CCS Paneled provider
Pharmacy Services

Stephanie Lem, PharmD
Clinical Manager of Pharmacy Services
Pharmacy Services

Formulary Medications:
• No prior authorization required
• Requests exceeding quantity limits and most specialty medications will require prior authorization
• Formulary can be accessed on CenCal Health’s website https://www.cencalhealth.org/providers/pharmacy/formulary/

Non-Formulary Medications:
• Medical Request Form (MRF) required for approval
  https://www.cencalhealth.org/providers/pharmacy/forms-downloads-fax/

Specialty Medications:
• Diplomat Pharmacy- comprehensive specialty pharmacy services
Pharmacy Services Contact Information

• CenCal Health’s pharmacy benefit manager (PBM) is MedImpact.
  o For questions regarding pharmacy authorizations or claims, you may contact MedImpact directly at (800) 788-2949.

• CenCal Health’s Specialty Pharmacy vendor is Diplomat Specialty Pharmacy.
  o For specialty medications processing contact Diplomat: Diplomat Specialty directly at (877) 319-6337

• Our Pharmacy Team is committed to providing consistent, compassionate, local support.
Pharmacy Services Changes in 2021

Effective **January 1, 2021**, Medi-Cal Pharmacy benefits will be transitioned from CenCal Health to Medi-Cal fee-for-service under the name Medi-Cal Rx

- **What’s changing?**
  - All pharmacy benefits billed by a pharmacy on a pharmacy claim will be carved out of CenCal Health and be the responsibility of the state and their pharmacy benefit administrator, Magellan

- **What’s remaining the same?**
  - All pharmacy benefits billed on a medical or institutional claim by a pharmacy or any provider (i.e. Physician-Administered-Drugs) will be the responsibility of CenCal Health

[https://www.dhcs.ca.gov/provgovpart/pharmacy/Pages/Medi-CalRx.aspx](https://www.dhcs.ca.gov/provgovpart/pharmacy/Pages/Medi-CalRx.aspx)
Medi-Cal RX in 2021

• Medi-Cal Rx website: https://medi-calrx.dhcs.ca.gov/home/

• Additional information and guidance will be released from the state and CenCal Health in the coming months

• CenCal Health Pharmacy Team is available to answer any questions to assist our providers during this transition
Claims Processing

Robyn Campitelli
Claims Services Supervisor
Claims for CCS Newborns

Services rendered to an infant in the month of birth and the month following birth are defined as mom/baby claims

Billing during mom/baby timeframe:
- Use the mother’s CenCal Health ID number
- Follow Medi-Cal’s mom/baby guidelines

Billing after the mom/baby timeframe:
- Use infant CenCal Health ID number
- Authorized Referral required
Tips for billing Newborn Claims

Claims received for baby under mom’s ID for the month of birth and the month after only (for the first 60 days).

- Use mother’s ID number
- Place babies name and DOB in remarks field
- CMS 1500 (box 19 babies name and DOB)
- UB04-Field 8B-enter infants name
  Field 10-enter infant’s DOB
  Field 11-enter Infants gender (sex)
  Field 58-if the mother’ name is entered here, then:
  Field 59-”19” (child), and
  Field 60-Mother’s CenCal Health ID number
CCS claims should be billed to CenCal Health not the County for all CenCal Health eligible members.

- Our Provider Web portal www.cencalhealth.org is available for:
  - Claim Submission
  - Claim Corrections
  - Checking status of your claim
  - Timely filing guidelines and follow-up periods

- Hard copy claims should be mailed to:
  - PO Box 948
  - Goleta, CA 93116

https://www.cencalhealth.org/providers/claims/
Case Management & Additional Service

Ana Stenersen
Clinical Manager - Pediatrics
CenCal covers the following outpatient services for members under the age of 21:

- Counseling (individual and family) and psychiatry services for members presenting with mild mental health symptoms (i.e. ADHD, depression, anxiety).
- Counseling, psychiatry and ABA services for members with developmental delays and behaviors due to a neurological or cognitive condition i.e. Autism, Intellectual Disability
- Psychological or neuropsychological testing for diagnostic purposes.

These services are managed by The Holman Group

Mental Health Inpatient & Intensive out-patient services for severe mental health conditions are covered and provided by Santa Barbara and San Luis Obispo County Mental Health Services.
Behavioral Health Treatment (BHT)

- Services are usually provided in the member’s home

- Members may be receiving services from Regional Center and/or CCS, but these services are not a pre-requisite for BHT services

- BHT requires a pre-service authorization to The Holman Group from a member’s PCP

https://www.cencalhealth.org/providers/behavioral-health/
CenCal Health’s Case Management (CM) Program is a comprehensive, member-centric program, which consists of complex case management, care coordination, and care transition.

It is a collaborative process of assessment, planning, facilitation, care coordination, evaluation and advocacy for options and services to meet an individual’s and family’s comprehensive health needs through communication and available resources to promote patient safety, quality of care, and cost effective outcomes.

CM services are provided by social workers, nurses and clerical support.

For referrals https://www.cencalhealth.org/providers/case-management/ or call (805) 681-8260
Case Management Referrals

- Frequent ED/Hospital admissions or readmissions
  - Finding a PCP and/or Urgent Care use
- Untreated behavioral health needs
  - Those that need linkage to Holman or County Mental Health
- Recent hospitalizations due to Substance use disorder
  - Need linkage to SUD services
- Identification of family struggling with new diagnosis
  - Need on-going health education or support
- Disease management
  - Struggling with new diagnosis or documented poor/uncontrolled medication management history
Case Management Referrals (Continued)

- Support with establishing ADL assistance
  - i.e. IHSS, Home Health
- Coordination of Care for support within health plan
  - Coordinating appointments, transplants, out of network to in-network
- Coordination of care for members to receive medically necessary services outside the health plan’s
  - Local Education Agency, Regional centers
- Care Transition Need
  - Hospital to Community, Facility to Facility, Community to Facility, Hospital to Facility
- Social Determinants of Health
  - Language barrier support, homelessness/housing support, nutrition/food support, financial support resources
Medical Transportation Services

Provided by CenCal Health’s benefit manager, Ventura Transit Systems (VTS)
• NON-Medical Transportation (NMT)
• Non-Emergency Medical Transportation (NEMT)

Members and/or Providers may contact VTS at (855) 659-4600

CenCal Health has Maintenance and Transportation benefits for CCS members
• Mileage
• Lodging
• Meals
• Parking fees

Contact CenCal health for CCS M&T services at (805) 364-9304

https://www.cencalhealth.org/providers/authorizations/
CenCal Health ensures interpreting services to all eligible CenCal Health members:

• Interpreting is available in over 200 languages free of charge
• Phone/Video interpreting is not required. Face-to-Face is available for ASL members
• Phone Interpreters are available 24 hours a day, 7 days a week
• CenCal Health recognizes that face-to-face interpreting is an important option for interaction and understanding complex situations
General guidelines for CenCal Health’s Interpreting Services:

- It’s the responsibility of the provider to request interpreter services, **not the Member** and appointments should remain scheduled.

- Providers should continue to use “Voice-only” Interpreting (telephone service) whenever possible.

- PCPs should continue to staff their own Spanish Interpreters (except if they do not offer it for urgent care services).

- Video and phone interpreting is available in a variety of languages.

- Video for American Sign Language (ASL) is available anytime for all provider types.

- All providers will need to supply their own device (laptop, tablet, phone etc.) for these services. CenCal Health will not provide these devices.

- Do not use a member’s phone for video or phone interpreting services.

- Do not give members your provider login or password for this service.

- Do not pre-schedule video interpreting services in advance as appointments may change.
From the moment you place a request with Certified Language Interpreter (CLI) operator, you are immediately connected to a professional interpreter.

Follow these easy steps to connect to a telephonic interpreter in more than 200 languages:

**Step 1. DIAL:**
1.800.CALL.CLI or 1.800.225.5254

**Step 2. Choose Language**
Provide customer code 48CEN
Provide Provider NPI and Member ID#

**Step 3. Connect**
The operator will connect you promptly.
Video Remote Interpreting (VRI)

VRI Web Address: cencalhp.cli-video.com
VRI Access Code: 48cencalhp
Or call Member Services 1 (877) 814-1861
Questions for our Panel?
ADDITIONAL RESOURCES

- CenCal Health Website [www.cencalhealth.org](http://www.cencalhealth.org)
  - Provider Portal
  - Provider Manual
  - Quick Reference Guide

- Contract your Provider Services Representative for additional training or resources

Still have questions about CCS and the Whole Child Model?

[https://www.dhcs.ca.gov/services/ccs/Pages/CCSWholeChildModel.aspx](https://www.dhcs.ca.gov/services/ccs/Pages/CCSWholeChildModel.aspx)
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