## CCS Special Care Center High Risk Infant Follow-Up (HRIF) Program Directory

То:	Provider Services Unit Children's Medical Services Branch		<b>Return completed form to:</b> Department of Health Care Services Children's Medical Services Branch Provider Services Unit
Return o Fax:	completed form by (916) 322-8798	<u>or</u>	MS 8100 P.O. Box 997413 Sacramento, CA 95899-7413
Date:			(916) 322-8702
Prin	ted Name of Medical Director		Signature of Medical Director

Bolded categories are mandatory. This information must be completed.

Check this box if you do not provide HRIF services. Proceed to Item 3 and identify your Neonatal Intensive Care Unit (NICU). Then proceed to Item 4 and indicate who you have arranged to provide the HRIF services.

- 1. Name of HRIF Program: \_\_\_\_\_
- 2. Facility Outpatient Provider Number that is linked or associated to the HRIF Program: \_\_\_\_\_
- 3. Name and address of your NICU and CCS NICU Special Care Center (SCC) directory number:

Name of NICU*:	CCS NICU SCC Directory Number:
Street Address:	
City, State, Zip code:	

\* Note: Your NICU SCC Directory number can be located at <u>www.dhcs.ca.gov/services/ccs</u>. Locate and click on "Neonatal Intensive Care Units", then locate and click on Approved Neonatal Intensive Care Units and High Risk Infant Follow-Up Programs.

## 4. HRIF Program Name and Address:

HRIF Program Name:	
Street Address:	
City, State, Zip code:	

5. County the HRIF Program is located: \_\_\_\_\_

## 6. For Appointments Contact:

Name of contact person for HRIF Appointments:	
Title (i.e HRIF Coordinator):	
Street Address:	

City, State, Zip code:	
Telephone Number:	
Fax Number and Email Address:	

## 7. For Authorizations Contact:

Name of contact person for HRIF Authorizations:	
Title (i.e HRIF Coordinator):	
Street Address:	
City, State, Zip code:	
Telephone Number:	
Fax Number and Email Address:	

**8. HRIF Required Staff:** All HRIF required staff, with the exception of a pediatric nurse practitioner (PNP), when functioning as a HRIF Coordinator, must be CCS-approved (also known as CCS-paneled) to be listed\*\*. Physicians must indicate their individual Provider number. Non-physician providers, without an individual Provider number must list their professional license number. An individual team member may simultaneously serve in more than one role. Specialty must be indicated (e.g. ophthalmologist, pediatrician, psychologist, etc.).

Names of HRIF Required Staff	Specialty	Individual Provider Number	Professional License Number	Telephone Number
Program Medical Director (Pediatrician/Neonatologist)				
HRIF Coordinator***				
Individual(s) performing developmental assessment****				
Ophthalmologist(s)				
Audiologist(s)				
Psychologist(s)				
Social Worker(s)				

\*\* To obtain a CCS Panel application, go to <u>www.dhcs.ca.gov/services/ccs</u>. Locate and click on the "Provider Forms" link, then click on the "CCS Individual Provider Paneling Application - - Physicians and Podiatrists" form <u>DHCS 4514</u>. For non-physician providers, click on "CCS Individual Provider Paneling Application - - Allied Health Care Professionals" form <u>DHCS 4515</u>.

\*\*\* The HRIF Coordinator must be one of the following: CCS-approved pediatrician or neonatologist, registered nurse (nurse specialist [a Bachelor's of Science Degree in Nursing (BSN) prepared RN] or Pediatric Nurse Practitioner [PNP]), social worker (SW), occupational therapist (OT), physical therapist (PT) or a psychologist. The PNP can only be CCS-approved when functioning in the CCS HRIF Program as a HRIF Coordinator.

\*\*\*\* Individual performing developmental assessment can be any of the following: Pediatrician, neonatologist, PNP, nurse specialist, OT, PT, SW, or psychologist. With the exception of the PNP, all providers must be CCS-approved. The individual performing developmental assessments has training in the evaluation of motor and sensory development of high risk infants. *If a PNP does not function as a HRIF Coordinator, he/she does not need to be CCS-approved.* 

9. Other HRIF Specialists: These providers may already be listed above (i.e. the individual performing developmental assessment or HRIF Coordinator) and may be simultaneously listed in this table, as Other HRIF Specialists. Physicians must indicate their individual Provider number. Non-physician providers, without an individual Provider number must list their professional license number. Speciality must be indicated (e.g. ophthalmologist, pediatrician, psychologist, etc.).

Names of Other HRIF Specialists	Specialty	Individual Provider Number	Professional License Number	Telephone Number
Pediatrician(s)/Neonatologist(s)				
Nurse Practitioner(s)				
Nurse Specialist(s)				
Individual(s) performing developmental assessment				
Occupational Therapist(s)				
Physical Therapist(s)				
Psychologist(s)				

To update this CCS HRIF SCC Directory information use form <u>DHCS 4507</u> Special Care Center Directory Update Fax Cover Sheet.