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**POSITION STATEMENT – RELATIONSHIP BETWEEN THE GENERAL PROGRAM (GP)
AND THE MEDICAL THERAPY PROGRAM (MTP)**

Purpose

We respectfully submit to the Department of Healthcare Services Director and the CCS Stakeholders work group that any changes made to the General Program (GP) will have a significant impact on the Medical Therapy Program (MTP) and should therefore be taken into consideration while planning this re-design. The MTP assists in the provision of many other services in addition to occupational therapy (OT) and physical therapy (PT). These services are often closely integrated with those provided by the CCS General Program. Renaissance

Medical Care Coordination

The MTP is a component of the GP and the medical conditions that qualify a patient for the MTP are included in the California Code of Regulations, Title 22, which specifies CCS medically eligible conditions. The MTP provides occupational and physical therapy services at Medical Therapy Units (MTUs) located in local public schools, a natural community environment for our patients and their families. The MTP also provides care coordination via Medical Therapy Conferences (MTCs) in pediatrics and orthopedics, durable medical equipment (DME), and orthotics and prosthetics (O&P). This coordination involves a team that includes the patient and family, therapists, physicians, orthotists, and durable medical equipment vendors, as well as resources from the GP including medical consultants, public health nurses, dietitians or nutritionists, and social workers. These teams coordinate the patient's needs for referrals to medical specialists, rehabilitation therapy, durable medical equipment, orthotic and prosthetic services, and community resources.

The Medical Therapy Conference assists with the overall management of the CCS MTP eligible conditions. The therapists and conference physicians identify the need for equipment and orthotics, provide the specifications and justifications, and do the follow-up with measuring and ordering the equipment and orthotics. The orthopedic conference physician makes orthopedic surgical referrals and referrals for medical procedures, e.g., Botox, baclofen, x-rays. The pediatric conference physician makes

referrals for various appropriate medical specialists needed for the care of the individual patient, e.g., neurology, endocrinology, cardiology. This care coordination promotes access to specialized pediatric medical services, prevents medical complications that might result from unaddressed concerns, assists in the prevention of costly duplication, prevents unnecessary delays, and avoids inappropriate provision of equipment and orthotics. The MTC also prevents the fragmentation that may occur if the family had to travel to different locations requiring them to navigate through multiple complex systems. This care coordination is further facilitated by visits to the patient's home by the MTP therapists and other members of the care coordination team. During the home visits, the MTP staff can assure appropriate use of the equipment and orthotics in the patient's natural environment, assess for safety, determine medical necessity, promote continuation of care, and seek out opportunities for greater independence for the patient.

When orthopedic surgery or spasticity management interventions are recommended, the MTP therapists and other members of the team are instrumental in coordinating with the provider in regards to the family's ability to successfully manage post-intervention activities, establishing the rehabilitation program, reporting back to the provider on the rehabilitation status and follow-up recommendations for further interventions.

MTP/General Program Coordination

The vast majority of MTP patients are also CCS financially eligible so the needed equipment, orthotics, and specialty care is reviewed and authorized by the general program. Coordinated and effective medical care for the MTP eligible diagnoses, such as cerebral palsy, spina bifida, and muscle disease depends largely on the patient receiving the most appropriate medical care such as orthopedic surgery, wheelchair, walker, and orthotics in a timely manner. Having direct access to the patient's financial information allows the CCS MTP team to provide families with clear instructions for how to follow through on the recommendations being made by the team

Interagency Coordination

In addition to the medical care coordination, the MTP has established relationships with regional centers, school districts, and other community resources for our patients with physical disabilities. A far-reaching and established infrastructure of local therapy units exists across the state. The majority of MTUs are certified by Medi-Cal as Outpatient Rehabilitation Centers (OPRCs). Should the CCS program evolve into one serving the "whole child" these MTUs have the potential for consideration of expansion as specialized medical homes for patients (birth to 21 years of age) with cerebral palsy and other complex physical disorders who are not already served by Special Care Centers (SCCs). The MTUs at the present time essentially serve as special care centers for infants, children, and youth with cerebral palsy.

Conclusion

Collaboration between the CCS General Program and the Medical Therapy Program is essential in order to ensure that the patients continue to receive the high quality of care and case management that is needed. The patients that are served by the CCS MTP have complex and chronic physical disabilities and, in many instances, the provision of appropriate and timely medical specialist's services, surgery, equipment, and orthotics is as important to the well-being of the patient as occupational and physical therapy services. The ability of MTP therapists to be involved in medical care coordination is pivotal to providing comprehensive CCS MTP services.

Supported by the following Medical Therapy Program Administrators:

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Position statement edited by Elizabeth Russel, PhD, OTR/L. Comments and or questions are welcome and can be submitted via e-mail to erussel@ph.lacounty.gov