

**Quick Reference**  
**The CCS Program Medical Eligibility and Medical Necessity**

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**CMS/CCS policy and letters can be found in the following Website Links:**

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**AUDIOLOGY – HEARING SERVICES and COCHLEAR IMPLANTS**

NUMBER	TYPE	TITLE
<a href="#">01-0513</a>	NL	Bone Anchored Hearing Aids (BAHA) (Supersedes 03-0207) - 060413
<a href="#">11-1211</a>	NL	Authorization of Diagnostic Audiology and Treatment Services for Child with Hearing Loss. Note: this letter <b>supersedes</b> 21-1299
<a href="#">10-1211</a>	NL	Cochlear Implant Updated Candidacy Criteria and Authorization Procedures. Note: this letter <b>supplements</b> 03-0411 Note: 10-1211 <b>supersedes</b> 09-1208
<a href="#">09-1011</a>	NL	Cochlear Implant Post Surgery Services. Note: this letter <b>supplements</b> 09-1208
<a href="#">08-1011</a>	NL	Genetics Evaluation for Children with Hearing Loss
<a href="#">07-1011</a>	NL	Hearing Aids. Note: this letter <b>supplements</b> 12-0605 Note: 07-1011 <b>supersedes</b> 30-1205
<a href="#">03-0411</a>	NL	Cochlear Implants. Note: this letter <b>supplements</b> 09-1208) Note: this letter <b>supersedes</b> 02-0796
<a href="#">02-0411</a>	NL	Cochlear Implant Batteries & Parts (Supplements 13-1106) Note: this letter <b>supersedes</b> 12-1007 & 09-0900
<a href="#">10-1208</a>	NL	Update and Clarification of Policy related to the Authorization of Frequency Modulation ( <b>FM</b> ) Systems or Assistive Learning Devices Note: this letter <b>supplements</b> 13-0605
<a href="#">09-1208</a>	NL	Cochlear Implants. Note: this letter <b>supplements</b> 03-0411 Note: this letter <b>supersedes</b> 09-0900 & 02-0796
<a href="#">07-08</a>	CMS IN	Reporting to the New Hearing Coordination Center Contractor for the NHSP in the Northeastern and Central California Region
<a href="#">12-1007</a>	NL	Cochlear Implant Batteries & Parts (includes CI Replacement Parts & Batteries Request Form). Note: this letter <b>supplements</b> 09-0900.
<a href="#">11-0807</a>	NL	Hearing Aid Supplies and Maintenance
<a href="#">03-0207</a>	NL	Bone Anchored Hearing Aids (BAHA) and BAHA Request Form
<a href="#">13-1106</a>	NL	Cochlear Implant Speech Processor Upgrades
<a href="#">02-0106</a>	NL	Update to Medi-Cal Approved Centers of Excellence for Cochlear Implants Providing Services for CCS Eligible Beneficiaries Note: see also 14-1003
<a href="#">30-1205</a>	NL	Benefits for Hearing Aid Maintenance: Batteries, Accessories, Earmolds, Repair/Modifications. Note: this letter <b>supplements</b> 10-1208 Note: this letter <b>supersedes</b> 13-0497
<a href="#">13-0605</a>	NL	Delegation of Authority for Authorization of Assistive Listening Devices to County CCS Programs & CMS Regional Offices & Request for Hearing Aids & Assistive Listening Devices
<a href="#">12-0605</a>	NL	Delegation of Authority for Authorization of Hearing Aids Previously Reviewed as “Non-Conventional Hearing Aids” to County CCS Programs and CMS Regional Offices and Request for Hearing Aids and Assistive Learning Devices
<a href="#">11-0605</a>	NL	Delegation of Authority for Authorization for Aural Rehabilitation Services to County CCS Programs and CMS Regional Offices & Medi-Cal Certified Outpatient Rehabilitation Centers.
<a href="#">02-0104</a>	NL	Purchase and Utilization of Loss and Damage (L&D) Insurance for Hearing Aids, Cochlear Implants Processors, or Alternative Listening Devices for CCS Case-Managed Beneficiaries
<a href="#">14-1003</a>	NL	Additional M/C Approved Center of Excellence for Cochlear Implant Providing Services for CCS Eligible Beneficiaries. Note: this letter <b>supplements</b> 09-0900
<a href="#">10-1300</a>	NL	Authorization of Audiology Services
<a href="#">10-1200</a>	NL	Non-Conventional Hearing Aids Note: this letter <b>superseded</b> by 12-0605 and 07-1011
<a href="#">09-0900</a>	NL	<b>SUPERSEDED</b> by 02-0411 Cochlear Implants (09-0900 <b>superseded</b> 02-0796)
<a href="#">21-1299</a>	NL	<b>SUPERSEDED</b> by 11-1211 Authorization of Services for Children with Hearing Loss
<a href="#">12-0999</a>	NL	Request for Audiology Services
<a href="#">10-0899</a>	NL	Communication Disorder Center Standards
<a href="#">20-0594</a>	NL	CCS Audiology Program Consultant
<a href="#">08-0291</a>	NL	Communication Devices. Note: this letter <b>revised</b> 14-0590 and 40-1290
<a href="#">36-1285</a>	NL	Otology and Audiology Services

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## DENTAL and ORTHODONTIA

NUMBER	TYPE	TITLE
<a href="#">04-0613</a>	NL	Dental Implant Requests (Supersedes 16-0899) - 093013
<a href="#">06-1004</a>	NL	Changes in CCS Dental and Orthodontic Service Authorizations and Claims Processing (addresses CCS/HF only and full scope M/C no SOC) Note: this letter <b>supersedes</b> 07-0395
<a href="#">12-1700</a>	NL	CCS/GHPP Rate Increase for Dental Services Note: this letter is the corrected version
<a href="#">07-0700</a>	NL	By-Report Dental Procedures Reimbursement Fees Note: this letter <b>supersedes</b> 11-0291
<a href="#">16-1099</a>	NL	Dental Benefits for CCS Clients Note: the enclosures are not available online
<a href="#">03-0299</a>	NL	Denti-Cal Bulletin and Processing of Denti-Cal Claims for CCS/Full Scope, No Share of Cost Medi-Cal Beneficiaries Case Managed and Services Authorized by the CCS Program
28-6804	NL*	Malocclusion
10-0494	NL*	Case Management & Payment for Orthodontic Care of Cleft Palate Patients who Lose M/C Elig
02-0294	NL*	CCS Orthodontic Program
34-1192	NL*	Increase in Dental Rates
44-1091	NL*	CCS Advisory Orthodontic Committee
24-0791	NL*	Orthodontia
12-0288	NL*	Extended Treatment Visits for Orthodontic Care
31-1085	NL*	Orthodontic Services and additional information
17-0483	NL*	Dental Services SMA

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## DURABLE MEDICAL EQUIPMENT & accessories; and MEDICAL SUPPLIES

NUMBER	TYPE	TITLE
<a href="#">01-0111</a>	NL	Authorization of Insulin Infusion Pumps Note: this letter <b>supersedes</b> N.L. 08-0799 Continuous Insulin Pump Therapy
07-09	NL	Replacement Page for 2003 CCS Guidelines for Recommendation and Authorization for Rental or Purchases of DME-R and Replacement for Page 10
<a href="#">05-09</a>	CCS IN	Addition to DME-Rehabilitation (DME-R) Guidelines & Criteria for Basic W/C (Manual & Power)
<a href="#">10-0707</a>	NL	Revised Guidelines for Authorization of Oxygen, O2 Delivery Equipment, & Related Supplies Noted: this letter <b>supersedes</b> 01-0107 and 47-1191; (12-0490?)
<a href="#">02-0107</a>	NL	Authorization of Rental of Portable Home Ventilators
<a href="#">18-0605</a>	NL	Nationwide Recall of VAIL Enclosed Bed Systems and FDA Notice to Public
<a href="#">03-12</a>	CCS IN	Incontinence Medical Supplies. <b>Note:</b> this IN <b>supplements</b> 08-0703
<a href="#">07-1004</a>	NL	HPCS Code Changes eff. 11/2004 for DME and Diabetic Supplies
<a href="#">09-0703</a>	NL	Revised CCS Guidelines for Recommendation and Authorization of Rental or Purchase of Medical Equipment-Rehabilitation (DME-R). <b>Note:</b> this letter <b>supersedes</b> N.L. 08-0291 and 23-0793
<a href="#">08-0703</a>	NL	Authorization for Purchase of Incontinent Medical Supplies (IMS) Note: this letter is the corrected version; this letter <b>supersedes</b> N.L. 06-0492
<a href="#">02-0102</a>	NL	Pulse Oximeters. <b>Note:</b> this letter <b>supersedes</b> N.L. 01-0191
<a href="#">14-0801</a>	NL	Synthesized Speech Augmentative Communication (SSAC) Devices (formerly known as ACCs) <b>Note:</b> this letter <b>supersedes</b> N.L. 05-0397
<a href="#">17-1199</a>	NL	Automobile Orthopedic Positioning Devices (AOPDS)
<a href="#">02-0197</a>	NL	Authorization of Flutter Valves and ThAIRapy Vests
06-0492	NL*	Medical Supplies
07-0291	NL*	Guidelines for Durable Medical Equipment Recommendations for Purchase
24-0788	NL*	Durable Medical Equipment (DME)
13-0788	NL*	Payment for Repairs to DME Not Originally Purchased by CCS Also see: 13-0388
13-0486	NL*	Continuous Passive Motion
40-1285	NL*	Durable Medical Equipment
47-1183	NL*	Rental vs. Purchase of Durable Medical Equipment
13-0483	NL*	Apnea Monitors and Pneumograms; Home Patient Monitoring Kit
06-0283	NL*	Update & Clarification of 39-1182: M/C Coverage of Cotton, Adhesive Tapes, Elastic Bandages

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## EARLY PERIODIC SCREENING, DIAGNOSIS and TREATMENT – SUPPLEMENTAL SERVICES

NUMBER	TYPE	TITLE
<a href="#">17-0605</a>	NL	Authorization of <b>Radiology Services</b> as Early Periodic Screening Diagnosis and Treatment – Supplemental Services (EPSDT-SS)
<a href="#">03-0205</a>	NL	Delegation of Authority to Authorize EPSDT-SS to County CCS Programs and CMS Regional Offices, EPSDT-SS Worksheet, EPSDT-SS Worksheet Instructions, and Notice of Action (NOA) and First Level Appeal Decision Letter

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## HOME HEALTH SERVICES and PALLIATIVE CARE OPTIONS

NUMBER	TYPE	TITLE
<a href="#">01-0114</a>	NL	Early and Periodic Screening, Diagnosis, and Treatment - Private Duty Nursing and Pediatric Day Health Care, Treatment Authorization Requests and Services Authorization Requests - 011514
<a href="#">12-04</a>	CMS IN	Transition of Children and Adolescents Who are Healthy Families Program Subscribers to Medi-Cal - 122012
<a href="#">12-B</a>	CHDP IN	New CHDP Program Resource: Pacific Islander Teen Health Spa Curriculum, Healthy Beautiful (an obesity prevention program for teen girls) - 040212
<a href="#">10-02</a>	CMS IN	Web Source for the Title V Children with Special Health Care Needs (CSHCN) Needs Assessment Report - 061513
<a href="#">09-03</a>	CCS IN	Updated List of Liaisons for Healthy Families (HF) Program Health Plans and Local CCS Programs
<a href="#">06-1011</a>	NL	Authorization of Medically Necessary Concurrent Treatment Services for CCS Clients who Elect Hospice Care
<a href="#">08-1109</a>	NL	Unique CCS Aid Codes for Children Participating in the Pediatric Palliative Care Waiver (PPCW)
<a href="#">07-1109</a>	NL	Policy Relating to CCS Nurse Liaison Position in Partners for Children (Pediatric Palliative Care Waiver Program)
<a href="#">05-0207</a>	NL	Authorization of Short-Term Shift Nursing Services and HCPCS Codes for Short-Term Shift Nursing Services
<a href="#">04-0207</a>	NL	Palliative Care Options for CCS Eligible Children and Codes Available for Authorization of Pediatric Palliative Care Services
<a href="#">07-0506</a>	NL	Intermittent Home Health Services Provided by a Home Health Agency (HHA) and Services Allowances (Time) per Visit List
11-0489	NL*	Supplemental Nursing Services. See also: 02-0189
02-0189	NL*	Nursing Services in the Home. See also: 11-0489
26-0788	NL*	Home Health Agency Services
29-0985	NL*	Home Care and Case Management Guidelines
26-0985	NL*	Respite Care and the Level of Care Providers Who May Be Authorized by CCS
25-0985	NL*	Medi-Cal In-Home Medical Care (IHMC) Program; CCS In-Home Nursing Program

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## MEDICAL ELIGIBILITY & MEDICAL NECESSITY for Diagnostic Evaluations, Treatments & Therapies

NUMBER	TYPE	TITLE
<a href="#">04-0511</a>	NL	Neonatal Intensive Care Unit (NICU) Authorizations Note: this letter <b>supersedes</b> 03-0206
02-0501	NL	Service Code Grouping (SCG) 51 Implementation
<a href="#">09-03</a>	CMS IN	<b>CCS, CHDP, NHSP and GHPP Laws</b> Note: <b>update</b> to set of laws previously provided in CMS I.N. 05-08, 01-07, 96-7. See also: <ul style="list-style-type: none"> <li>NL 50-1294* CCS Program Benefit Regulations</li> <li>NL 01-0194* CCS Laws</li> <li>NL 43-1091* CCS Laws, 1991 Legislative Session</li> <li>NL 27-0791* CCS Laws</li> <li>NL 23-0791* New State Laws</li> <li>NL 24-0889* CCS Laws</li> <li>NL 49-1184* Legislation</li> <li>NL 33-0883* CCS Laws</li> </ul>
<a href="#">09-02</a>	CMS IN	<b>Updated CCS Program Regulations</b> - Changes reflect <b>renumbering</b> of the regulations and non-substantive changes in language. Note: this letter <b>supplements</b> CCS Medical Eligibility Regulations: 05-0500, 06-0599
<a href="#">10-0707</a>	NL	Revised Guidelines for Authorization of Oxygen, O2 Delivery Equipment; Related Supplies Note: this letter <b>supersedes</b> 01-0107 and 47-1191
<a href="#">08-0507</a>	NL	Vagal Nerve Stimulator (VNS) Implantation

<a href="#">10-0806</a>	NL	Authorization of Emergency Services Related to Trauma Note: this letter details policy re: authorizations to non-paneled physicians
<a href="#">09-0606</a>	NL	High Risk Infant Follow-Up (HRIF) Program Services Note: this letter <b>supersedes</b> 06-0403 and 09-0902
<a href="#">03-0206</a>	NL	Neonatal Intensive Care Unit (NICU) Authorizations
<a href="#">15-0605</a>	NL	Speech Pathology Services & Medi-Cal Certified Outpatient Rehabilitation Centers
<a href="#">14-0605</a>	NL	Authorization of Occupational Therapy (OT) Services & Medi-Cal Certified OTPT Rehab Centers (OPRC)
<a href="#">13-0903</a>	NL	Medical Eligibility Nephrotic Syndrome
<a href="#">08-0703</a>	NL	Authorization for Purchase of Incontinent Medical Supplies (IMS) Note: this letter is the corrected version and <b>supersedes</b> 06-0492
<a href="#">07-0503</a>	NL	Injuries to Joints and Tendons Policy Clarification Note: this letter <b>supersedes</b> 08-0501
<a href="#">11-1002</a>	NL	Outpatient Mental Health Services as CCS Benefits
<a href="#">05-0502</a>	NL	Medical Eligibility for Care in a CCS-Approved Neonatal Intensive Care Unit (NICU) Note: this letter is the corrected version and <b>supersedes</b> N.L. 11-0999
<a href="#">12-0701</a>	NL	Children at Risk for Human Immunodeficiency Virus (HIV) Infection Note: this letter <b>supersedes</b> 01-0105 and 12-0701
<a href="#">10-0501</a>	NL	Kawasaki Disease
<a href="#">05-0500</a>	NL	<b>CCS Medical Eligibility Regulations</b> Note: this letter <b>supersedes</b> 06-0599. Note: this letter <b>supplemented</b> by CMS IN 09-02
01-0200	NL	Indicators for Social Work & Psychologists <b>Services</b> for CCS/GHPP Clients Note: this letter <b>supersedes</b> 14-1099 and 02-0299
<a href="#">09-0899</a>	NL	New Medical Treatment Modalities/Interventions which are <b>not</b> Established CCS Benefits
<a href="#">02-0197</a>	NL	Authorization of Flutter Valves and TheAIRpy Vests
33-0994	NL*	Medical Eligibility for the Children with Proven HIV Infection
23-0594	NL*	Organ Transplants – Heart, Liver, Bone Marrow, Lung and Heart-Lung Note: this letter <b>supersedes</b> 08-0394
22-0594	NL*	Lung and Heart-Lung Transplants
15-0494	NL*	Bone Marrow Transplants for Cancer, Section 273, H&SC
11-0393	NL*	Guidelines for Diagnosis and Treatment of Lead Poisoning Note: this letter <b>supersedes</b> 09-0592
<a href="#">37-1292</a>	NL*	Coverage of Experimental and/or Investigational Services
17-0992	NL*	Chronic Lung Disease of Infancy
33-0891	NL*	Luconex BAC Wheelchair/Mobile Stander
10-0291	NL*	DNA Probes for Hemophilia, Cystic Fibrosis, Sickle Cell, Phenylketonuria. See also: 32-0990. Note: this letter is regarding Genetic Testing (Carrier and Prenatal Testing)
31-0990	NL*	Heart Transplants
23-0790	NL*	CCS Program Coverage of Women for AFP Testing
10-0390	NL*	Emergency Regulations for HIV Screening
27-0890	NL*	Organ Transplants – Heart, Liver, Bone Marrow
06-0290	NL*	Liposuction
04-0290	NL*	Selective Posterior Rhizotomy (SPR)
19-0789	NL*	Occupational Therapy for Swallowing and/or Feeding Problems in Patients with CCS Eligible Conditions. Note: this letter <b>supersedes</b> 03-0189
04-0289	NL*	Liver Transplant: Global Physician Service Reimbursement
37-1288	NL*	Extracorporeal Membrane Oxygenation (ECMO)
01-0189	NL*	Magnetic Resonance Imaging (MRI)
29-0788	NL*	Epikeratophakia
07-0788	NL*	Magnetic Resonance Imaging (MRI) Update
07-0188	NL*	Magnetic Resonance Imaging (MRI)
05-0788	NL*	Clarification of CCS Eligibility for GE Reflux
05-0288	NL*	Clarification of CCS Eligibility for GE Reflux
02-0188	NL*	Eye Prostheses (eye appliances)
17-1087	NL*	CCS Services to Children Who Live In Intermediate Care Facilities for the Developmentally Disabled. Note: see also 32-0784
05-0587	NL*	AIDS
32-1286	NL*	Scoliosis: Lateral Electrical Surface Stimulation (LESS). Also see: 17-0785, 37-0983, 11-0383
20-0786	NL*	Diseases of the Newborn
19-0786	NL*	Angioplasty or Therapeutic Cardiac Catheterizations (TCC)
18-0786	NL*	Epilepsy
17-0786	NL*	Diabetes Mellitus
16-0786	NL*	Medical AIR Ambulance Transportation
05-0286	NL*	Eye

37-1285	NL*	Neural Tube Defects Compared with Other Birth Defects
10-0585	NL*	Heart Transplants
01-0185	NL*	Bone Marrow Transplantation for Cancer
52-1284	NL*	Liver Transplants
41-1083	NL*	Artificial Eyes: CCS Coverage and Maximum Allowances
26-0683	NL*	New Hemophilia Treatment Products
22-0583	NL*	CCS/GHPP Cystic Fibrosis Treatment Benefits
21-0583	NL*	Prenatal Diagnosis of Sickle Cell Disease
41-1182	NL*	Diagnostic Use of Pneumograms; Requirements for Approval of Apnea Monitors for Home Use

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**MEDICAL THERAPY PROGRAM (MTP) and Medical Therapy Unit (MTU)**

NUMBER	TYPE	TITLE
<a href="#">09-0514</a>	NL	Powered Mobility Devices (PMD)
<a href="#">02-0214</a>	NL	Implementation of Updated Tools for Classification of Function and Measurement of Functional Outcomes in the Medical Therapy Program
<a href="#">07-0612</a>	NL	Implementation of the Episodic Treatment Method (ETM) as an Alternative Therapy Provision Method (ATPM) in the Medical Therapy Program (MTP)
<a href="#">05-0811</a>	NL	Participation in the CCS Medical Therapy Program (MTP) Medical Therapy Conference (MTC) by CCS Program Medical Directors and Medical Consultants
<a href="#">06-07</a>	IN	Revised Implementation Plan for the Quarterly Time Study (QTS) for MTP for 100 Percent State-Funding to Comply with IA Regulations (AB 3632)
<a href="#">02-0205</a>	NL	Functional Outcome Measurement for the MTP
<a href="#">01-0105</a>	NL	Dependent and Independent County CCS MTP Guidelines for Development of Policies and Procedures for Implementation of HIPPA
03-1004	NL	<b>RESCINDED</b> MTP Reimbursement for HF clients MTP OPRC
<a href="#">04-0403</a>	NL	Notice of Privacy Practices for CCS MTP; Compliance with HIPPA
<a href="#">18-0901</a>	NL	Reimbursement of LEA or SELPA for Provision of Medically Necessary Therapy Services to Children Medically Eligible for CCS/Medical Therapy Program (MTP)
<a href="#">14-0801</a>	NL	Synthesized Speech Augmentative Communication (SSAC) Devices (Formerly known as Augmentative/Alternative Communicatoin (AAC) Devices). Note: this letter <b>supersedes</b> 05-0397
<a href="#">13-0701</a>	NL	Revised Interagency Agreement (IAA) Between the CMS Branch and the California Department of Education (CDE), Special Education Division (SED)
<a href="#">01-0301</a>	NL	Instructions for Completion of the "State Approved 100% State Funded Staff Allocations for County MTP" form
<a href="#">11-1600</a>	NL	Duplication of Physician or Therapy Services provided through CCS/MTP Note: does this letter <b>supersede</b> 06-0600
06-0600	NL	Duplication of Physician or Therapy Services provided through CCS MTP
<a href="#">22-1299</a>	NL	CCS MTP List. (The enclosure is not available online.)
<a href="#">06-0397</a>	NL	The MTP: Dispute Resolution through "Expert " Physician
<a href="#">34-0994</a>	NL*	Designation of a New Identifier to <b>Capture Costs</b> Related to the MTP
21-0594	NL*	Vendored Therapy Sites
26-0793	NL*	Designation of Code 50 on Form MC 255B to Represent Vendored Therapy in Lieu of MTU
36-1292	NL*	<b>Determination of Medical Eligibility for the Medical Therapy Unit (MTU)</b>
30-1092	NL*	Vendored Physical Therapy and Occupational Therapy Rates
22-0992	NL*	MTUs and Due Process
02-0392	NL*	<b>Determination of Medical Eligibility for Medical Therapy Program Services.</b> See also: <ul style="list-style-type: none"> <li>• 39-1290 Medical Eligibility for the Medical Therapy Program</li> <li>• 03-0788 Medical Eligibility for MTP</li> <li>• 03-0288 Medical Eligibility for MTP</li> </ul>
38-0991	NL*	Program Advisory from Dept. of Education on Occupational Therapy and Physical Therapy
34-0891	NL*	Oregon Orthotic System
29-0891	NL*	Vendored Therapy Rates for Services in Lieu of MTU Services
28-0891	NL*	Notification of Due Process Hearings for Special Education
06-0391	NL*	Responsibility for Local MTU Services for Out-of-County Residents Enrolled in Public Schools
43-1290	NL*	County Responsibility for MTU Services for Children Enrolled in Public Schools in the County
34-1290	NL*	Payment for Occupational Therapy and Physical Therapy Services in Lieu of MTU Services
09-0389	NL*	Provision of Medical Therapy Unit (MTU) Services Including Physical Therapy/Occupational Therapy Consultation Outside the MTU Note: does this letter <b>supersede</b> 11-0288?
08-0389	NL*	Revised Procedure for Coding Cerebral Palsy on CCS Forms

09-0288	NL*	Revised Procedure for Coding Cerebral Palsy on CCS Form
04-0288	NL*	CCS Physical Therapy and Occupational Therapy Services to Home-Bound Children
24-0986	NL*	CCS-MTU (Therapy) Services to Children Residing in ICF-DDs
55-1284	NL*	Prosthetic and Orthotic SMA Effective 9/26/84
53-1284	NL*	Changes in Recording of PT and OT Services and Related Information
48-1184	NL*	ICF-DD and ICF-DD-H (MTU letter)
32-0784	NL*	CCS Services and Children who are covered by Medi-Cal and Live in ICF-DD Facilities
24-0984	NL*	CCS-MTU Services to Children Residing in ICF-DDs
49-1283	NL*	Payment for Contract Therapists at a Medical Therapy Unit (MTU)
23-0682	NL*	Additions to the Prosthetic and Orthotic Appliances SMA

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## PHARMACY – MEDICATIONS

NUMBER	TYPE	TITLE
<a href="#">14-04</a>	CCS IN	Drugs Classified Drug Efficacy Study Implementation – release date 031414
<a href="#">14-03</a>	CCS IN	Unauthorized Manufacturer Labeler Codes Not Payable - 031414
<a href="#">14-01</a>	CCS IN	Prescriptions Containing Acetaminophen Limited to 325MG Per Dosage Unit - 011714
<a href="#">13-06</a>	CCS IN	Diagnosis Related Group Inpatient Reimbursement and Hemophilia Factor Drugs - 111413
<a href="#">01-0113</a>	NL	Palivizumab (Synagis™) (Supersedes 04-0509) Note: Information Notice 13-05 is related - 011013
<a href="#">11/18/10</a>	CCS IN	Notice from CCS About Prescription Drug Coverage and Medicare (See other annual notices)
<a href="#">01-0510</a>	NL	<b>BOTOX</b> (Botulinum Toxin) Note: this letter <b>supersedes</b> N.L. 07-0407
<a href="#">09-05</a>	CMS IN	Contracting for <b>FACTOR</b> Products Begins July 1, 2009
04-0509	NL	<b>SYNAGIS</b> (Palivizumab) Note: this letter <b>supersedes</b> 04-0509; 11-1006; 27-1005; 05-0904; 01-0203; 13-0999
<a href="#">01-0109</a>	NL	<b>KUVAN</b> Sapropterin Dihydrochloride
<a href="#">5/3/07</a>	CMS IN	GHPP and CCS Become Title XIX Federal Medicaid Waiver Programs Note: letter sent to Hemophilia Treatment Centers re: purchase of outpatient pharmaceuticals, including blood products
<a href="#">06-0506</a>	NL	<b>GROWTH HORMONE</b> Note: this letter <b>supersedes</b> 25-0791, 20-0789, 43-1285
<a href="#">23-0905</a>	NL	Epoetin Alfa and Carnitine Removed from “Table of Drugs Requiring Separate Authorization” Note: this letter <b>supersedes</b> 20-0895; 12-0393; 15-0892 Carnitine; 01-0192; 27-0989
<a href="#">21-1101</a>	NL	<b>PULMOZYME</b> (Dornase Fulfate) Note: this letter <b>supersedes</b> N.L. 06-0195, 27-0694, 07-0394
<a href="#">05-18</a>	CCS IN	Medicare Part D Coverage – Important Notice from CCS
17-0494	NL*	Gonadotropin Releasing Hormone ( <b>GnRH</b> ) agonist Analogues. See also: 32-0891
16-0494	NL*	<b>NUTROPIN</b> (Growth Hormone)
12-0393	NL*	<b>EPOGEN</b> (Erythropoietin) Note: this letter <b>supersedes</b> 01-0192, 27-0989
05-0191	NL*	<b>Intravenous Immunoglobulin</b> Note: ?this letter <b>supersede</b> 25-0793 and 41-1290?
01-0190	NL*	Oral Zidovudine ( <b>AZT</b> )
16-0889	NL*	Antihemophilic <b>FACTOR</b> Criteria Also see: 19-0885

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## NUTRITION - Enteral Products and Medical Foods

NUMBER	TYPE	TITLE
<a href="#">14-02</a>	CCS IN	Updated Contracted Diabetic Enteral Nutrition Products List - 031414
<a href="#">14-15</a>	CCS IN	Over the Counter Fiber Supplements
<a href="#">22-0805</a>	NL	Enteral Nutrition Products as a CCS Benefits and Request for Enteral Nutrition Products From Note: this letter <b>supersedes</b> 04-0399, 04-0293, 38-1292, 29-0893, 10-0188 Note: 29-0893 provides guidelines for parenteral feeding equipment
<a href="#">20-0605</a>	NL	Non-Benefit Status of Regular Infant Formulas
16-0605	NL	Delegation of Authority to Authorize Medical Nutrition Therapy Services to County CCS Programs and CMS Regional Offices
<a href="#">03-08</a>	CMS IN	California WIC Supplemental Nutrition Program <b>Infant Formula Changes</b>
15-0801	NL	Medical Nutrition Assessment and Medical Nutrition Therapy for Children with CCS Medical Eligible Conditions Note: this letter <b>supersedes</b> 11-1100, 02-0200, 02-0299
10-1000	NL	Ketogenic Diet for Refractory Surgeries as a CCS Benefit Provided by Registered Dieticians

<a href="#">05-0399</a>	NL	Medical Foods as a CCS/GHPP Benefit
35-0888	NL*	Nutritional Supplements Note: this letter is <a href="#">revision</a> of 10-0788

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### SCREENINGS (Newborn) - Diagnostics Services for Infants

NUMBER	TYPE	TITLE
<a href="#">05-0314</a>	NL	The CCS Program Pediatric Intensive Care Unit Standards Update: Annual PICU Report Bottom of Form
<a href="#">03-0314</a>	NL	Standards for Neonatal Intensive Care Unit (NICU) Bottom of Form
<a href="#">02-0413</a>	NL	Neonatal Intensive Care Unit (NICU) Authorizations (Supersedes 04-0511) - 041213
<a href="#">06-1008</a>	NL	Authorization of Diagnostic Services for Infants Referred Through the NHSP Note: this letter <b>supersedes</b> N.L. 21-0705; <b>does this letter also supersede 20-1299?</b>
<a href="#">09-0607</a>	NL	Authorization of Diagnostic Services for Infants Referred Through the California Newborn Screening (NBS) Program for Cystic Fibrosis (CF) and Biotinidase Deficiency (BD)
21-0705	NL	Authorization of Diagnostic Services for Infants Referred Through the California NHSP and Newborn Hearing Screening Program (NHSP) Referral Form See also: 20-1299
<a href="#">08-0505</a>	NL	Authorization of Diagnostic & Treatment Services for Infants Referred by the California Newborn Screening (NBS) Program Including for Additional Metabolic Disorders & Congenital Adrenal Hyperplasia
<a href="#">05-0405</a>	NL	Authorization of Diagnostic and Treatment Services for Infants Referred by the California Newborn Screening Program and Overview of the Genetic Disease Branch Newborn Screening Program
<a href="#">08-0802</a>	NL	Two Additional CCS Approved Metabolic Centers Providing Diagnostic Services for Infants Referred from the Newborn Screening Program TM/SR Program. Note: this letter <b>supplements</b> 01-0102
<a href="#">01-0102</a>	NL	Authorization of Diagnostic Services for Infants Referred by Newborn Screening Program (Genetic Disease Branch) for Unusual Tests Results from the Supplemental Screening for Multiple Metabolic Disorders Tandem Mass Spectrometry (MS/MS) Research Project Note: CCS N.L. 08-0802 <b>supplements</b> this letter
<a href="#">20-1299</a>	NL	Authorization of Diagnostic Services for Infants Referred through the California Newborn Hearing Screening Program
<a href="#">07-2099</a>	NL	Newborn Hearing Screening Program – Infants Hearing Screening Provider Standards

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### PROVIDERS – Physicians, Special Care Centers, Hospitals

NUMBER	TYPE	TITLE
<a href="#">14-14</a>	CCS IN	The CCS Program Authorization of Physician Services Associated with a DRG Inpatient Episode for a Medi-Cal Beneficiary Who is Enrolled in a Medi-Cal Managed Care Plan With Carved Out CCS Program Services
<a href="#">14-A</a>	CHDP IN	New CHDP Provider Training, "Promoting Physical Activity at Well Child Visits - 020614
<a href="#">13-A</a>	CHDP IN	Revised CHDP Provider Training "How To Accurately Weigh and Measure Children For the CHDP Well-Child Exam - 042413
<a href="#">12-A</a>	CHDP IN	New CHDP Oral Health Provider Training, "Dental Training: Oral Health Assessment and Referral" - 051712
<a href="#">02-0510</a>	NL	Service Code Grouping (SCG) 51 Implementation
<a href="#">07-1109</a>	NL	Policy Relating to CCS Nurse Liaison Position in Partners for Children (Ped. Palliative Care Waiver)
<a href="#">10-01</a>	IN	Requirements for the Participation in the CCS Program by Family Practice Physicians
<a href="#">08-07</a>	CMS IN	California NHSP Legislation and Policy Update for Participating Hospitals
<a href="#">07-08</a>	CMS IN	Reporting to the New Hearing Coordination Center Contractor for the NHSP in the Northeastern and Central California Region
<a href="#">01-0108</a>	NL	CCS Outpatient Special Care Center Services. Note: this letter <b>supersedes</b> N.L. 08-0900
<a href="#">10-0806</a>	NL	Authorization of Emergency Services Related to Trauma Note: this letter details procedures re: auths to non-approved hospitals and physicians
<a href="#">09-0606</a>	NL	High Risk Infant Follow-Up (HRIF) Program. Note: this letter <b>supersedes</b> 06-0403
<a href="#">02-0106</a>	NL	Update to Medi-Cal Approved Centers of Excellence for Cochlear Implants Providing Services for CCS Eligible Beneficiaries Note: see also 14-1003
<a href="#">15-0605</a>	NL	Speech Pathology Services & Medi-Cal Certified Outpatient Rehab Centers

<a href="#">14-0605</a>	NL	Authorization of Occupational Therapy (OT) Services and Medi-Cal Certified Outpatient Rehabilitation Centers
<a href="#">05-12</a>	IN	Deactivation of "CGP" Prefix Inpatient Provider Numbers
<a href="#">06-0505</a>	NL	Intermediate Care Facility/Developmental Disabled-Nursing (ICF/DD-N) Statewide Facility List
<a href="#">03-20</a>	IN	Letter to CCS Panelled Providers Regarding Updating Paneling Listing
<a href="#">03-19</a>	IN	New CCS Hypertonicity Special Care Centers
<a href="#">14-1003</a>	NL	Additional Medi-Cal Approved Center of Excellence for Cochlear Implants Note: this letter <b>supplements</b> 09-0900
<a href="#">06-0403</a>	NL	High Risk Infant Follow-Up (HRIF) Services. Note: this letter <b>supersedes</b> 09-0902
<a href="#">08-0802</a>	NL	Two Additional CCS Approved Metabolic Centers Providing Diagnostic Services for Infants Referred from the NBSP Tandem Mass Spectrometry (MS/MS) Research Project. Note: this letter <b>supplements</b> 01-0102
<a href="#">06-0301</a>	NL	Revision of CCS/GHPP Program Panel Applications
10-1000	NL	Registered Dietitians: Ketogenic Diet for Refractory Surgeries as CCS Benefit Provided by RD
18-1199	NL	Presumptive Approval for Board Certified Physician Providers in MCMC or HF Plans
<a href="#">10-0899</a>	NL	Communication Disorder Center ( <b>CDC</b> ) Standards. Note: view online enclosure
<a href="#">07-2099</a>	NL	Infant Hearing Screening Program ( <b>NHSP</b> ) – Provider Standards
<a href="#">29-1298</a>	NL	CCS Pediatric Intensive Care Unit ( <b>PICU</b> ) Standards
<a href="#">28-1298</a>	NL	CCS Neonatal Intensive Care Unit ( <b>NICU</b> ) Standards
<a href="#">27-1298</a>	NL	CCS Hospital Standards
<a href="#">43-1194</a>	NL	Utilization Review for Outpatient Rehabilitation Center Certification
37-1094	NL	Implementation of Paneling Dietitians
28-0694	NL	Revised Panel Procedures
<a href="#">29-1092</a>	NL	Rehabilitation Facilities Admission Criteria
09-0191	NL	Pediatric Cardiac Transplants Note: this letter <b>replaced</b> 42-1290
36-1190	NL	Hospital - Length of Stay Guidelines
<a href="#">22-0805</a>	NL	Paneling CCS/GHPP Special Care Center Nurse Specialists
08-0900	NL	CCS Special Care Center (SCC) Services
33-0888	NL*	Medi-Cal In-Home Medical Care (IHMC) Program. See also: 14-0483
23-0688	NL*	Approved Transplant Centers (including those with provisional approval) Note: this letter references 25-1186, 01-0185, 10-0585, 52-1284
02-0185	NL*	Services by Family Practice Physicians and by Podiatrists
36-0884	NL*	Inpatient Transfer Policies for Medi-Cal Contract Hospitals. See also: clarification of <b>13-0484</b>
14-0284	NL*	Respite Care and the Level of Care Providers Who May Be Authorized by CCS. Note: does this letter <b>supersede</b> 09-0284
13-0484	NL*	Inpatient Transfer Policies for Medi-Cal Contract Hospitals. See also: <b>36-0884</b> for clarification.
14-0483	NL*	In-Home Medical Care (IHMC). See also: 33-0888
42-1282	NL*	Hospitals Contracting with Medi-Cal

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#### GENERAL CMS/CCS PROGRAM ADMINISTRATION and CASE MANAGEMENT POLICIES

NUMBER	TYPE	TITLE
<p><b>Memorandum of Understanding (MOU)</b> between CCS and Healthy Families Program (HFP) Note: MOU is located in Section 5 of the CMS Plan and Fiscal Guidelines Manual</p>		
<p><b>Delineation of Responsibilities</b> for CMS, Regional Offices, Independent &amp; Dependent Counties as they Relate to the HFP MOU. Note: MOU is located in Section 5 of the CMS Plan and Fiscal Guidelines Manual</p>		
<a href="#">10-0514</a>	NL	Ivacaftor (Kalydeco™)-Expanded Indication for Use
<a href="#">04-0314</a>	NL	Guidelines for Critical Congenital Heart Disease Screening Services
<a href="#">14-1213</a>	NL	Telehealth Services for CCS and GHPP Programs - 010614
<a href="#">12-1113</a>	NL	Optional Targeted Low Income Children's Program Aid Codes T1, T2, T3, T4, and T5 and Separate Children's Health Insurance Program Section 2101 (f) Aid Codes E2 and E5; Assignment of CCS Unique Aid Codes - 111213
<a href="#">10-1113</a>	NL	High Risk Infant Follow-Up (HRIF) Program Services (Supersedes 09-0606) - 012314
<a href="#">07-0612</a>	NL	Implementation of the Episodic Treatment Method (ETM) as an Alternative Therapy Provision Method (ATPM) in the Medical Therapy Program (MTP)
<a href="#">05-0612</a>	NL	Intrathecal Baclofen (ITB) Pumps for the Management of Spasticity and Dystonia

<a href="#">03-0512</a>	NL	IVACAFITOR (KALYDECO™)
<a href="#">02-0612</a>	NL	Providing Contact Information to the Newborn Hearing Screening Program
<a href="#">13-08</a>	CCS IN	Important Notice from CCS Program About Your Prescription Drug Coverage and Medicare - 011314
<a href="#">13-01</a>	CCS IN	Update of Table 1 (Family Size and Annual Income Level Chart) - MEDI-CAL Year 2012 Federal Poverty Level Chart; Effective Beginning January 26, 2012 - 011813
<a href="#">12-04</a>	CCS IN	Important Notice from CCS Program About Your Prescription Drug Coverage and Medicare - 101512
<a href="#">12-03</a>	CCS IN	California Children's Services (CCS) Fiscal Year 2012-2013 Diagnostic, Treatment, Vended Therapy, and Dental Funding Certifications California Children's Services (CCS) Fiscal Year 2012-2013 Diagnostic, Treatment, Vended Therapy, and Dental Funding Certifications Certification of County Appropriation - 070212
<a href="#">12-C</a>	CHDP IN	Revised Performance Measures - 122812
<a href="#">12-01</a>	CMS IN	Mandatory Enrollment of Seniors and Persons with Disabilities (SPDs) in Medi-Cal Managed Care - 041312
<a href="#">10-05</a>	CMS IN	Web Source for 2011 Title V Block Grant Applications and 2009 Annual Reports - 110110
<a href="#">10-04</a>	CMS IN	<b>CMS Branch Plan and Fiscal Guidelines (PFG)</b> Note: the <b>PFG is no longer posted by individual FY</b> . The PFG will be updated or revised for each upcoming FY as programmatic and budget changes occur.
<a href="#">05-1009</a>	N.L.	Revised MR-O-940 Reports – Procedures for Error Corrections Note: this letter <b>supersedes</b> N.L. 08-1208
<a href="#">02-0209</a>	NL	Update of Table 1 (Family Size and Annual Income Level Chart) – Medi-Cal Year 2008 Federal Poverty Level Chart; Effective April 1, 2009. To reference prior years Table 1 Updates - see: <b>2008:</b> 02-0308; <b>2007:</b> 06-0307; <b>2006:</b> 04-0306; <b>2005:</b> 04-0305; <b>2004:</b> 04-07; <b>2003:</b> 03-0301
<a href="#">08-08</a>	CCS IN	GHPP Forms
<a href="#">01-0108</a>	NL	CCS Outpatient Special Care Centers. Note: this letter supersedes 08-0900
<a href="#">5/3/07</a>	CMS IN	GHPP and CCS Become Title XIX Federal Medicaid Waiver Programs
<a href="#">13-1007</a>	NL	Implementation of Assembly Bill (AB) 1642
<a href="#">06-07</a>	CCS IN	Revised Implementation Plan for the Quarterly Time Study (QTS) for MTP for 100 Percent State-Funding to Comply with IA Regulations (AB 3632)
<a href="#">05-0406</a>	NL	Directions for Completion of the Quarterly Time Study (QTS) for MTP for 100 Percent State-Funding to Comply with IAA (AB 3632)
<a href="#">01-0106</a>	NL	CCS Expenditure Reporting to the California's Department of Finance (DOF) for the Purpose of Calculation of Realignment Caseload Growth
<a href="#">29-1105</a>	NL	Changes to the CCS Notices of Privacy Practices, Spanish Version and English Version
<a href="#">28-1105</a>	NL	Instructions for Certification of Funding Under H&SC Section 123945
<a href="#">26-0905</a>	NL	Newborn Referral to the Medi-Cal Program and Newborn Referral Form
<a href="#">25-0905</a>	NL	Hurricane Katrina
<a href="#">24-0905</a>	NL	CCS Services for Infants Born to Mothers Participating in the Access to Infants and Mothers (AIM) Program Subsequent to Birth are Enrolled in the Healthy Families (HF) Program
<a href="#">18-0605</a>	NL	CCS/HF Subscribers Deemed Financially Eligible for CCS and Correction of Errors in Monthly County Expenditure Reports
<a href="#">10-0605</a>	NL	Medical Therapy Unit (MTU) Medi-Cal Reimbursement State County Cost Sharing and Reconciliation
<a href="#">06-0505</a>	NL	ICF/DD-Nursing Statewide Facility Listing
<a href="#">01-0105</a>	NL	Dependent and Independent County CCS MTP Guidelines for Development for Policies and Procedures for Implementation of the HIPPA
<a href="#">9/17/04</a>	CCS IN	Direct Electronic Submission of Patient Therapy Record Data (PTR) Batches via CMS Net for MTU Services
<a href="#">07-1004</a>	NL	Health Care Financing Administration Common Procedural Coding System (HCPCS) Code Changes Effective 11/1/04 for DME and Diabetic Supplies
03-1004	NL	<b>RESCINDED</b> MTP billing, reimbursement, reconciliation
<a href="#">04-14</a>	CCS IN	CMS Net System Availability
<a href="#">04-13</a>	CCS IN	Implementation of the CMS Network Enhancement 47 (E 47) Project
<a href="#">04-03</a>	CMS IN	Five % Rate Reduction from Non-Medical CCS & GHPP Services & Exemptions from the Reduction
<a href="#">04-01</a>	CMS IN	New CMS Branch Mailing Address Note: includes list of Mail Stop Codes
<a href="#">03-18</a>	CCS IN	Elimination of All CGP Provider Numbers
<a href="#">03-17</a>	CCS IN	Revision and Translation of CCS Materials
<a href="#">15-1103</a>	NL	Request for Pilot Project Application; Medical Therapy Program
<a href="#">12-0803</a>	IN	Implementation of Assembly Bill (AB) 495; Expansion of Children's Health Insurance Coverage
<a href="#">11-0703</a>	NL	Notice of Privacy Practices for CCS Clients; Compliance with Health Insurance Portability Note: this letter <b>supersedes</b> 05-0403
<a href="#">10-0703</a>	NL	Child Health and Disability Prevention (CHDP) Program Gateway
<a href="#">12-1202</a>	NL	CCS Financial Eligibility Policy Regarding Native American Indians

<a href="#">10-1002</a>	NL	Designation of CCS Staff for Obtaining Healthy Families Eligibility Information from the Managed Risk Medical Insurance Board (MRMIB)
<a href="#">04-0402</a>	NL	CCS Policy Related to the Implementation of SB 344; Posting of the CCS Application on the DHS Website
<a href="#">20-1101</a>	NL	CCS Financial Policy Regarding Clients whose Annual Adjusted Gross Income is Below 200 Percent of the Federal Income Guidelines but the Current Enrollment Fee Scale Indicates a Fee is to be Charged
<a href="#">19-0901</a>	NL	CCS Residential Policy regarding Persons Here on a Visa or Other Temporary Entry Permit
<a href="#">18-0901</a>	NL	Reimbursement of LEA or SELPA for Provision of Medically Necessary Therapy Services to Children Medically Eligible for CCS/Medical Therapy Program (MTP)
<a href="#">17-0901</a>	NL	Policy for Identifying, Documenting, Claiming, and Reporting HF Subscribers Cases when the Family's Annual Adjusted Gross Income is Greater than \$40,000
<a href="#">13-0701</a>	NL	Revised Interagency Agreement (IAA) Between the CMS Branch and the California Department of Education (CDE), Special Education Division (SED)
<a href="#">11-0601</a>	NL	CCS Policy re: the Requirement that all CCS Applicants Shall Make Application to the Medi-Cal Program; H&SC Section 123995 Note: this letter <b>supersedes</b> 03-0300; 19-1299
<a href="#">09-0501</a>	NL	Electronic Billing
<a href="#">07-0401</a>	NL	Criteria for Assignment of Unique Aid Codes to CCS Eligible Children
<a href="#">04-0301</a>	NL	Electronic Claiming
<a href="#">02-0301</a>	NL	Implementation of Section 14133.05 of the Welfare & Institutions Code re: Treatment Authorizations
<a href="#">01-0301</a>	NL	Instructions for Completion of the "State-Approved 100 Percent State-Funded Staff Allocation for County Medical Therapy Programs" Form Note: this letter <b>supersedes</b> 20-0898
<a href="#">12-1700</a>	NL	CCS/GHPP Rate Increases for Dental Services
<a href="#">11-1500</a>	NL	Verifying Residential Eligibility for Children who are Medi-Cal Full Scope or Healthy Families Eligible
<a href="#">10-1400</a>	NL	CCS Rate Increases for Medical Services
<a href="#">04-0400</a>	NL	Case Management of Medi-Cal Eligible Beneficiaries with CCS Eligible Condition in a MMCP
15-1099	NL	Funding for Social Work and Psychologists Services for CCS and GHPP clients
<a href="#">20-0997</a>	NL	Case Management Timelines
<a href="#">16-0597</a>	NL	Medical Therapy Program (MTP) Clerical Support Staffing
45-1194	NL*	Definition of "Family"
41-1094	NL	CCS Automation Project
39-1094	NL*	Billing Procedure: CCS County Administrators, Medical Consultants, Chief/Supervising Therapists and State Regional Office Administrators, Medical and Therapy Consultants
<a href="#">35-0994</a>	NL	Revised Diagnostic, Treatment and Therapy Expenditure Claim Forms for Counties Using the DHCS Fiscal Intermediary. Note: see CCS IN 05-14 for current forms
<a href="#">34-0994</a>	NL	Designation of a New Identifier to Capture Costs Related to the MTP
19-0594	NL*	Instructions for Certification of Funding Under H&SC Section 266
<a href="#">18-0594</a>	NL	Appeal Guidelines
<a href="#">06-0394</a>	NL	Required Use of Health Insurance
<a href="#">33-1293</a>	NL	Revised Diagnostic, Treatment & Therapy Expenditure Claim Forms for Independent Counties Note: see CCS IN 05-14 for current forms
26-0793	NL*	Designation of Code 50 on Form MC 255B to Represent Vended Therapy in Lieu of MTU
19-0591	NL*	Assignment of Analysts for Hospital Reimbursement Rates
18-0591	NL*	Out of State Reimbursement Rates and Corresponding Regulations
17-0591	NL*	Medi-Cal Eligibility Aid Codes
13-0591	NL*	Major Risk Medical Insurance Program (MRMIP)
20-0590	NL*	Capitated Health System Plans
07-0290	NL*	200 Percent Medi-Cal Coverage for Pregnant Women and Infants Up to One Year Old
18-0689	NL*	Revision of California's Disease Reporting Regulations
07-0289	NL*	Presumptive Disability Under Medi-Cal
33-0888	NL*	CCS Case Management and Authorization for Medi-Cal Children
20-0788	NL*	Insurance Disclaimers
19-0488	NL*	Public Access to California Children's Services (Telephone Coverage)
17-0388	NL*	Confidentiality of CCS Patients
16-0388	NL*	CCS Application for Treatment Services – Form for Adult Clients
15-0388	NL*	Form 2 – Release of Information (MC 2701)
01-0388	NL*	Out of State Hospital Rates
17-1087	NL*	CCS Services to Children Who Live in ICF for the Developmentally Disabled. See also <b>32-0784*</b> CCS Services and Children Who Covered by Medi-Cal and Live in ICF-DD
06-0587	NL*	Use of Health Insurance. See also: 33-1185
04-0587	NL*	Proof of California Residence
07-0386	NL*	Out of State Provider Services
38-1285	NL*	State Staff – New Personnel
33-1185	NL*	Health Insurance

32-1185	NL*	Residence Eligibility
16-0785	NL*	Referral of Undocumented Applicants to Medi-Cal. See also: 05-0385
05-0385	NL*	Referral of Undocumented Applicants to Medi-Cal, effective immediately. See also: 16-0785
30-0985	NL*	CCS Nurse Consultant Responsibilities
50-1184	NL*	Diagnostic and Treatment Funds
37-0884	NL*	Case Coordinator Procedure Manual Revisions
19-0484	NL*	Medi-Cal Provider Relations
42-1083	NL*	(1) Medi-Cal Application (2) Guardians
16-0483	NL*	Caseload Records (Case Load Policy)
32-0883	NL*	Medi-Cal Application
09-0883	NL*	Seventh Day Adventist Health Care Assistance Plan (HCAP)
3/14/83	*	Policies/Procedures – Questions and Answers
01-0183	NL*	Medi-Call Application as a Requirement for CCS Treatment Services
24-0682	NL*	Adult CCS Clients

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## FISCAL YEAR

[CCS IN 13-07](#) - Correction of County Share of Costs Resulting from a Duplicate CCS Checkwrite that Occurred in January 2012 – 112113

[CCS IN 13-04](#) - Fiscal Year (FY) 2013-14 County Allocations for CCS County Administration and the CCS Medical Therapy Program (MTP) - 081913

[CCS IN 13-03](#) - California Children's Services (CCS) Fiscal Year 2013-2014 Diagnostic, Treatment, Vended Therapy, and Dental Funding Certifications Certification of County Appropriation - 070113

[CCS IN 13-02](#) - Web Source For Preliminary Draft of Narrative For Federal Fiscal Year (FFY) 2013-14 Title V Block Grant Application and Progress Report - 061213

[CCS IN 12-01](#) - Fiscal Year (FY) 2012-13 County Allocations for CCS County Administration and the CCS Medical Therapy Program (MTP) - 080912

[CHDP IN 13-B](#) - Web Source For Preliminary Draft of Narrative For Federal Fiscal Year (FFY) 2013-14 Title V Block Grant Application and Progress Report - 042413

[CMS IN 13-01](#) - Plan and Fiscal Guidelines (PFG) Update - 091613

[CMS IN 12-02](#) - Web Source for Preliminary Draft of Narrative for Federal Fiscal Year (FFY) 2012-13 Title V Block Grant Application and Progress Report - 061812

[CMS IN 12-01](#) - CMS Branch Plan and Fiscal Guidelines (PFG) - 121211

[CMS IN 11-01](#) - Web Source for Preliminary Draft of Narrative for Federal Fiscal Year (FFY) 2011-12 Title V Block Grant Application and Progress Report - 051911

[CMS IN 10-04](#) - CMS Branch Plan and Fiscal Guidelines (PFG) - 092310

[CMS IN 10-03](#) - California Children's Services (CCS) Fiscal Year (FY) 2010-2011 Diagnostic, Treatment, Vended Therapy, and Dental Funding Certifications – 070110

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