

# CCS Needs Assessment Survey for Physicians

## 1. Introduction

The California Children's Services Program (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 and that meet financial eligibility criteria. Examples of CCS-eligible conditions include, but are not limited to, chronic medical conditions such as cystic fibrosis, hemophilia, cerebral palsy, heart disease, cancer, traumatic injuries, and infectious diseases producing major sequelae.

The Family Health Outcomes Project at the University of California, San Francisco, is conducting a Needs Assessment of the California Children's Services (CCS) Program, under the Children's Medical Services Branch. Data gathered from this survey will be used to help set priorities for the CCS program for the next 5 years. We have collected a lot of information about what works well in the CCS program and now are conducting this survey to gather more information to help determine priorities for improving the program. You are being invited to participate because you are a physician who may or may not be providing services to CCS clients. We would very much like to get your perspective on the CCS Program and how it might encourage more physician participation and make improvements in providing services to children with special healthcare needs.

We understand how valuable your time is so we have structured this survey to skip you through questions that might not apply to you. For example, physicians who have not been involved with CCS are only asked to complete a short set of questions at the beginning of the survey and will be skipped to the end, while physicians who have participated with CCS and cared for CCS children as they age out of the program will be asked additional questions relevant to their experience.

Thank you for taking the time to complete this survey and sharing your opinions with us.

If you are an administrator or program manager from a Hospital, Health Plan, or County CCS Program, please follow this link to be taken to the physician survey: <http://www.surveymonkey.com/s/F9GYSBB>

## CCS Needs Assessment Survey for Physicians

### 1. What kind of physician are you?

- |   |  |
|---|--|
| <input type="checkbox"/> Child Neurologist                    | <input type="checkbox"/> Pediatric Cardiologist          |
| <input type="checkbox"/> Family Medicine Physician            | <input type="checkbox"/> Pediatric Critical Care         |
| <input type="checkbox"/> Internist                            | <input type="checkbox"/> Pediatric Endocrinologist       |
| <input type="checkbox"/> Neonatal Perinatal Medicine          | <input type="checkbox"/> Pediatric Gastroenterologist    |
| <input type="checkbox"/> Neurologist                          | <input type="checkbox"/> Pediatric Hematology Oncologist |
| <input type="checkbox"/> Neurosurgeon                         | <input type="checkbox"/> Pediatric Infectious Disease    |
| <input type="checkbox"/> Ophthalmologist                      | <input type="checkbox"/> Pediatric Neonatologist         |
| <input type="checkbox"/> Orthodontist                         | <input type="checkbox"/> Pediatric Nephrologist          |
| <input type="checkbox"/> Orthopedic Surgeon                   | <input type="checkbox"/> Pediatric Neurologist           |
| <input type="checkbox"/> Otolaryngologist                     | <input type="checkbox"/> Pediatric Neurosurgeon          |
| <input type="checkbox"/> Otolaryngology Maxillofacial Surgeon | <input type="checkbox"/> Pediatric Pulmonologist         |
| <input type="checkbox"/> Other (specify below)                | <input type="checkbox"/> Pediatric Surgeon               |
| <input type="checkbox"/> Pediatrician                         | <input type="checkbox"/> Psychiatrist                    |
| <input type="checkbox"/> Pediatric Allergy Immunologist       |  |

Other - please specify

### 2. Are you a physician in a hospital or a physician in a private practice?

- Hospital-based
- Private Practice
- Other

Other (please specify)

## CCS Needs Assessment Survey for Physicians

### 3. What counties do you practice in? (Check all that apply)

- |                                       |  |  |
|---------------------------------------|--|--|
| <input type="checkbox"/> Alameda      | <input type="checkbox"/> Marin           | <input type="checkbox"/> San Mateo     |
| <input type="checkbox"/> Alpine       | <input type="checkbox"/> Mariposa        | <input type="checkbox"/> Santa Barbara |
| <input type="checkbox"/> Amador       | <input type="checkbox"/> Mendocino       | <input type="checkbox"/> Santa Clara   |
| <input type="checkbox"/> Butte        | <input type="checkbox"/> Merced          | <input type="checkbox"/> Santa Cruz    |
| <input type="checkbox"/> Calaveras    | <input type="checkbox"/> Modoc           | <input type="checkbox"/> Shasta        |
| <input type="checkbox"/> Colusa       | <input type="checkbox"/> Mono            | <input type="checkbox"/> Sierra        |
| <input type="checkbox"/> Contra Costa | <input type="checkbox"/> Monterey        | <input type="checkbox"/> Siskiyou      |
| <input type="checkbox"/> Del Norte    | <input type="checkbox"/> Napa            | <input type="checkbox"/> Solano        |
| <input type="checkbox"/> El Dorado    | <input type="checkbox"/> Nevada          | <input type="checkbox"/> Sonoma        |
| <input type="checkbox"/> Fresno       | <input type="checkbox"/> Orange          | <input type="checkbox"/> Stanislaus    |
| <input type="checkbox"/> Glenn        | <input type="checkbox"/> Placer          | <input type="checkbox"/> Sutter        |
| <input type="checkbox"/> Humboldt     | <input type="checkbox"/> Plumas          | <input type="checkbox"/> Tehama        |
| <input type="checkbox"/> Imperial     | <input type="checkbox"/> Riverside       | <input type="checkbox"/> Trinity       |
| <input type="checkbox"/> Inyo         | <input type="checkbox"/> Sacramento      | <input type="checkbox"/> Tulare        |
| <input type="checkbox"/> Kern         | <input type="checkbox"/> San Benito      | <input type="checkbox"/> Tuolumne      |
| <input type="checkbox"/> Kings        | <input type="checkbox"/> San Bernardino  | <input type="checkbox"/> Ventura       |
| <input type="checkbox"/> Lake         | <input type="checkbox"/> San Diego       | <input type="checkbox"/> Yolo          |
| <input type="checkbox"/> Lassen       | <input type="checkbox"/> San Francisco   | <input type="checkbox"/> Yuba          |
| <input type="checkbox"/> Los Angeles  | <input type="checkbox"/> San Joaquin     |  |
| <input type="checkbox"/> Madera       | <input type="checkbox"/> San Luis Obispo |  |

## 2. Participation in CCS

## CCS Needs Assessment Survey for Physicians

4. Please rate how much the following factors impact your participation or lack thereof in the CCS program:

(Note: Medi-Cal rates are set by State and physicians participating with CCS are reimbursed at Medi-Cal rates with an additional increase for treating a patient's CCS-eligible condition(s).)

	Major barrier	Somewhat of a barrier	Slight barrier	Not a barrier	Don't Know/Not Sure
a. Lack of knowledge about the CCS Program and how to participate	jq	jq	jq	jq	jq
b. Low Medi-Cal outpatient reimbursement rates for care of CCS children	jq	jq	jq	jq	jq
c. Delays in payments for the services provided to CCS children	jq	jq	jq	jq	jq
d. Time consuming and difficult paper work to complete to get reimbursed	jq	jq	jq	jq	jq
e. Having to get a Medi-Cal number	jq	jq	jq	jq	jq
f. Process and length of time to get a Medi-Cal number	jq	jq	jq	jq	jq
g. Having to be CCS-paneled provider	jq	jq	jq	jq	jq
h. Process and length of time to be a CCS-paneled provider	jq	jq	jq	jq	jq
i. The complexity of care needed by CCS children and the increased time it takes to care for them	jq	jq	jq	jq	jq
j. The need to coordinate services for CCS children and the lack of information on how to do it	jq	jq	jq	jq	jq
k. Lack of knowledge about resources for CCS children	jq	jq	jq	jq	jq
l. Lack of medical training or expertise on how to treat/or expertise for serving children with special health care needs	jq	jq	jq	jq	jq
m. Lack of a specialist to easily consult for advice in caring for children with special health care needs	jq	jq	jq	jq	jq
n. Medi-Cal Health plans do not pay enhanced rate for the primary care services for children in CCS	jq	jq	jq	jq	jq
o. Lack of knowledge about the CCS Program and how to participate	jq	jq	jq	jq	jq
p. Other (please describe below)	jq	jq	jq	jq	jq

Other barriers - please specify

5

6

Please indicate how much you agree or disagree with the following statements about MEDI -CAL.

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5. Just because I have a Medi-Cal number, that doesn't mean that I have to see too many Medi-Cal patients. It is up to me how many Medi-Cal patients I see.

- a. Agree Strongly
- b. Agree Somewhat
- c. Disagree Somewhat
- d. Disagree Strongly
- e. Don't Know/Not Sure

6. I am concerned that having a Medi-Cal - number would lead to my practice becoming financially unsustainable due too many Medi-Cal patients and the low reimbursements paid for care for Medi-Cal patients.

- a. Agree Strongly
- b. Agree Somewhat
- c. Disagree Somewhat
- d. Disagree Strongly
- e. Don't Know/Not Sure

## CCS Needs Assessment Survey for Physicians

7. Please indicate how much you agree or disagree with the following suggestions to increase physician participation with CCS

	Agree Strongly	Agree Somewhat	Disagree Somewhat	Disagree Strongly	Don't Know/Not Sure
a. Increase the reimbursement rates paid to physicians to care for CCS clients.	100	100	100	100	100
b. Ensure that there are staff at the Medi-Cal fiscal intermediary that are familiar with CCS to process claims for providing services to CCS clients.	100	100	100	100	100
c. Primary care physicians should receive more training on how to handle common subspecialty problems such as diabetes.	100	100	100	100	100
d. Create training opportunities on CCS and caring for CSHCN in pediatric and family medicine residency programs and adolescent medicine fellowships.	100	100	100	100	100
e. Work with professional organization such as the Children's Specialty Care Coalition, the California affiliate of the American Academy of Pediatrics, the California Academy of Family Physicians and others to identify ways to further educate physicians about participating in the CCS program.	100	100	100	100	100
f. Work with professional medical associations to offer continuing education on caring for children with special health care needs	100	100	100	100	100
g. Streamline the process for CCS providers of having to re-apply for a Medi-Cal number when the provider moves.	100	100	100	100	100
h. The CCS paneling process should be done concurrently with the Medi-Cal approval process and should be completed in a reasonable timeframe, particularly if staff privileges have been granted at a CCS approved regional tertiary center.	100	100	100	100	100
i. Provide assistance to physicians to help with getting CCS paneled	100	100	100	100	100
j. Provide ongoing assistance with authorizations and billing for services once physicians are paneled.	100	100	100	100	100
k. Better align Codes and reimbursement rates to allow for outpatients tests and procedures where appropriate	100	100	100	100	100
l. Managed Care plans should provide enhanced rates for the primary care services for children with CCS eligible conditions.	100	100	100	100	100
m. Other (specify below)	100	100	100	100	100

Other - please specify

Please indicate how much you agree or disagree with the following statement.

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8. Children with CCS conditions need increased access to primary care providers to decrease ER visits and hospitalization.

- a. Agree Strongly
- b. Agree Somewhat
- c. Disagree Somewhat
- d. Disagree Strongly
- e. Don't Know/Not Sure

\* 9. Are you currently or have you ever been CCS paneled?

(Note: To be CCS paneled, a physician must apply for and receive a Medical number and then apply to the California Children's Medical Services branch to become a CCS-paneled provider.)

- a. Currently CCS paneled
- b. CCS paneled in the past but not currently
- c. No
- d. Don't know/Not Sure

### 3. Becoming CCS Paneled

\* 10. If you are not or have not been CCS paneled, are you interested in becoming CCS paneled?

- Yes
- No
- Don't Know/Not Sure

Please feel free to comment on the issue of becoming CCS paneled, or any experiences you have had trying to become paneled.

### 4. CCS Administration

## CCS Needs Assessment Survey for Physicians

11. When you submit claims for payment for services for a patient's CCS eligible conditions, how often are the claims rejected by the Medi-Cal fiscal intermediary?

- a. Never
- b. Less than 25% of the time
- c. 25-50% of the time
- d. 50 to 75% of the time
- e. More than 75% of the time
- f. Don't Know/Not Sure

12. Please indicate how much you agree with the follow statements about about monitoring CCS standards.

	Agree Strongly	Agree Somewhat	Disagree Somewhat	Disagree Strongly	Don't Know/Not Sure
a. CCS standards should be monitored and enforced by paid consultants who are experts in the field for which they are monitoring standards.	<input type="radio"/>				
b. CCS standards should be monitored and enforced by local county CCS staff.	<input type="radio"/>				
c. CCS standards should be monitored and enforced by state CCS staff.	<input type="radio"/>				
d. A regional system should be developed for monitoring and enforcing CCS standards.	<input type="radio"/>				

## 5. Case Management

A case manager is a person who makes sure that a child gets all the services that are needed and that these services fit together in a way that works for the family. This person may have different titles such as care coordinator or a social worker, etc.

13. Who should be able to provide case management for children enrolled in CCS? (Check all that apply)

- a. Certified case managers
- b. RN, PHN, Medical Consultants, Social workers
- c. Specially trained, but unlicensed staff
- d. Other (specify below)

Other - please specify

## 6. Organization of CCS services

## CCS Needs Assessment Survey for Physicians

### 14. Do you care for CCS patients whose CCS-services are

a. 'Carved In' (the County's managed care plan is responsible for providing services through CCS-approved providers for the patient's CCS-eligible condition. Counties that are 'carved in' are Napa, Solano, San Mateo, and Santa Barbara).

b. 'Carved Out' (the County's managed care plan and patient's health plan are \*NOT\* responsible for providing services for the patient's CCS-eligible condition and the patient gets care through CCS-approved providers in a fee for service system)

c. Both

Please indicate how much you agree or disagree with the following statements.

15. It is more efficient and effective to have one system of care, including primary care providers and specialty providers, caring for ALL of the health needs of children with CCS-eligible conditions (care for the whole child) instead of having CCS providers give care for ONLY the CCS-eligible conditions.

a. Agree Strongly

b. Agree Somewhat

c. Disagree Somewhat

d. Disagree Strongly

e. Don't Know/Not Sure

16. Carving out coverage of children's CCS-eligible medical conditions from their health plans (that is, care for the CCS-eligible conditions is not the responsibility of their health plan) has been important for improving the quality of care for their CCS-eligible conditions.

a. Agree Strongly

b. Agree Somewhat

c. Disagree Somewhat

d. Disagree Strongly

e. Don't Know/Not Sure

## CCS Needs Assessment Survey for Physicians

17. If CCS services were integrated into Medi-Cal managed care plans, then the CCS program, CCS standards, and CCS guidelines and special care centers would be compromised.

- a. Agree Strongly
- b. Agree Somewhat
- c. Disagree Somewhat
- d. Disagree Strongly
- e. Don't Know/Not Sure

18. Special Care Centers should hire primary care providers (physicians and nurse practitioners) to provide primary care services to CCS clients.

- Agree Strongly
- Agree Somewhat
- Disagree Strongly
- Disagree Somewhat
- Don't Know/Not Sure

Questions #17 and #18 ask about NICU care. If you are not familiar with the NICU, please go to question #19.

19. CCS should re-examine CCS eligibility criteria for NICU care.

- a. Agree Strongly
- b. Agree Somewhat
- c. Disagree Somewhat
- d. Disagree Strongly
- e. Don't Know/Not Sure

## CCS Needs Assessment Survey for Physicians

20. NICU care for infants should only be covered by CCS if the infant has been diagnosed with a CCS-eligible condition, otherwise the cost of the NICU care should be covered by the child's health plan.

- a. Agree Strongly
- b. Agree Somewhat
- c. Disagree Somewhat
- d. Disagree Strongly
- e. Don't Know/Not Sure

21. The State should re-examine medical eligibility for CCS to focus on longer term conditions that need intensive case management and care coordination.

- a. Agree Strongly
- b. Agree Somewhat
- c. Disagree Somewhat
- d. Disagree Strongly
- e. Don't Know/Not Sure

22. There may be small variations between counties in medical eligibility determinations, but this does not create significant problems.

- a. Agree Strongly
- b. Agree Somewhat
- c. Disagree Somewhat
- d. Disagree Strongly
- e. Don't Know/Not Sure

## CCS Needs Assessment Survey for Physicians

23. Medical eligibility determinations should be made at a regional or statewide level instead of by Counties' CCS Medical Eligibility consultants.

- a. Agree Strongly
- b. Agree Somewhat
- c. Disagree Somewhat
- d. Disagree Strongly
- e. Don't Know/Not Sure

## 7. Durable Medical Equipment (DME) and Transitioning Youth

Question #22 is about durable medical equipment (DME). If you do not have patients who use DME, go to question #23.

24. Please tell us how often, if ever, the following issues related to durable medical equipment (DME) present problems for your patients.

	Not a problem	Only rarely a problem	Occasionally a problem	Frequently a problem	Don't Know/Not sure
a. Too few DME providers being available due to low reimbursement rates.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. DME providers refusing to provide certain kinds of equipment due to low reimbursement rates for that equipment.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Client discharges being delayed because of delays in getting DME (e.g. ventilators, apnea monitors, wheel chairs).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Hospitals or families having to purchase DME so that clients can be discharged in a timely manner.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Clients missing school due to delays in getting or repairing needed DME.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Other problems with DME (describe below)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other problems - please describe

## CCS Needs Assessment Survey for Physicians

\* 25. Have you worked with youth covered by CCS as they approach the time when they age out of the system?

Yes

No

Don't Know/Not Sure

### 8. Transitioning Youth

26. Please tell us how easy it is for youth/young adults who have aged out of CCS to find a new primary care provider when one is needed?

Very Easy

Somewhat Easy

Somewhat Hard

Very Hard

Don't Know/Not Sure

27. Please tell us how easy it is for youth/young adults who have aged out of CCS to find a new specialty care provider when if one is needed?

Very Easy

Somewhat Easy

Somewhat Hard

Very Hard

Don't Know/Not Sure

## CCS Needs Assessment Survey for Physicians

28. To encourage doctors who care for adults to take CCS clients that have aged out of the CCS program, please tell us how helpful it would be:

	Very Helpful	Helpful	Only a little Helpful	Not helpful	Don't Know/Not Sure
a. If these clients have the skills or supports they need to effectively manage their care?	jn	jn	jn	jn	jn
b. If the adult providers were given a prepared medical summary of the patient?	jn	jn	jn	jn	jn
c. If the adult provider had easy access to Regional Center, Special Care Center, school, CCS and pediatric records?	jn	jn	jn	jn	jn
d. If the adult provider were offered training, funding, and resources to help you care for these patients?	jn	jn	jn	jn	jn
e. If these clients have insurance that covers the cost of their care and coordination?	jn	jn	jn	jn	jn
f. If there is someone the adult provider can go to for consultation?	jn	jn	jn	jn	jn

## 9. Additional Comments

29. Please use this space to share any other comments you want to make about the CCS program.

Thank you for taking the time to complete this survey. If you have any questions or additional comments about the survey, please call the Family Health Outcomes Project at UCSF at 415-476-5283.