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**Department of Health Services
Children's Medical Services Network
(CMS Net) - Information Bulletin #420**

Closure of CCS Cases for Healthy Families Program (HFP) Clients Open to CCS for Orthodontics Only Who Are Transitioned into Medi-Cal

The AB 1468 (Ch. 438, Stats. of 2012) transition of HFP subscribers to Medi-Cal is being implemented in phases through September 2013. When a CCS/HFP client completes the transition they will be full scope, no share of cost Medi-Cal beneficiaries eligible to receive all Medi-Cal State Plan benefits for persons under the age of 21 years, including the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) benefit, which covers orthodontics when determined to be medically necessary.

Denti-Cal authorizes dental services, including orthodontics for full scope, no share of cost Medi-Cal beneficiaries. If a former HFP subscriber has a current orthodontic authorization through Denti-Cal, Denti-Cal will continue to authorize ongoing orthodontic care. This should be transparent to families and providers since prior to the transition Denti-Cal authorized orthodontic care for CCS eligible HFP subscribers.

For a CCS client making the transition with a case open to CCS for orthodontics only, the client's CCS case should not be automatically terminated at the time of the client's transition to Medi-Cal. To assure continuity of the CCS client's care, such case termination, should not occur until the client's next annual CCS eligibility redetermination. If case closure is indicated at the time of the client's annual CCS eligibility redetermination, a Notice of Action (NOA) should be issued to the client/client's family by closing the case in CMS Net Client Eligibility and selecting reason code RS9 (Not CCS eligible—referred to Denti-Cal). Additional information on the AB 1468 transition is available in CMS Information Notice 12-04 dated December 19, 2012.