



## **California Children's Services (CCS) Dashboard Glossary**

### About This Document

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The CCS Program provides diagnostic and treatment services, case management, and physical and occupational therapy services to children under age 21 with CCS-eligible medical conditions. 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. CCS also provides medical therapy services that are delivered at public schools. The CCS Program is administered as a partnership between county health departments and the California Department of Health Care Services (DHCS). CCS also provides medical therapy services that are delivered at public schools.

The Whole Child Model (WCM) program is for children and youth under 21 years of age who meet the eligibility requirements of CCS and are enrolled in a Medi-Cal managed care plan (MCP) under a County Organized Health System (COHS) or Regional Health Authority (RHA).

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## Measure Glossary

Measure Detail – This table lists the measures included in this dashboard and their respective definitions.

Dimension	Definition
<b>Age Group</b>	A pre-defined set of age groups as defined by their date of birth. Age is defined as the total number of complete years from a person's date of birth to a reference date. An age group is a predefined range representing specific age intervals based on date of birth. Each age group includes all individuals from their starting birthday up to, but not including the next group's starting birthday. For example, the 6–11 age group includes individuals from their 6th birthday until the day before their 12th birthday. CCS is reported for age bins of 0-20 that aligns with national measure specifications.
<b>CCS Program Type</b>	CCS Type takes on the value of either Classic CCS (Members with CCS aid codes who are not enrolled in a MCP (WCM program) or Whole Child Model (Members enrolled in a MCP WCM program with a CCS condition aid code). The CCS Aid Codes include: <ul style="list-style-type: none"> <li>• 9M - CCS Med Therapy ONLY</li> <li>• 9N - CCS Case Mgt</li> <li>• 9R - CCS-Health Families Child</li> <li>• 9U - CCS-Healthy Families Child-NPSA.</li> </ul>
<b>CCS Monthly Statewide Enrollment Trends</b>	CCS trend that shows the general direction of enrollments by reporting month and year at the State, County, or WCM Plan level.
<b>County</b>	This refers to any of the 58 California counties. For children in Classic CCS and WCM, the county assignment is based on the member's county of residency. The MIS/DSS field is

	CCS_CNTY_CD, from the ELIGIBILITY_CCS_GHPP warehouse table. For a listing of CCS/WCM counties, please visit <a href="#">DHCS CCS WCM Homepage</a> .
<b>County Status</b>	<p>"Dependent" counties are defined as having a population under 200,000 and administer the CCS Program jointly with DHCS.</p> <p>"Independent" counties are defined as having a population in excess of 200,000 and administer the CCS Program independently.</p>
<b>Delivery System</b>	This field identifies how the member's care is delivered – either through Managed Care (MC) or Fee-for-Service (FFS). The values for this field are derived from the MIS/DSS PLAN_CD field from the ELG_HLTH_CARE_PLN warehouse table (FFS: PLAN_CD = '000'; MC: all HCP PLAN_CD values).
<b>Foster Care</b>	This field identifies whether a child is currently in Foster Care or is a Former Foster Youth. Children in foster care have a comprehensive team to help facilitate care comprised of Social Worker, Public Health Nurse, and the Judicial System. In counties with (COHS, children in Foster Care are in managed care. In non-COHS counties, children in Foster Care may be in MCPs or FFS. These statuses are based on aid code. See Measure Calculation: <a href="#">Foster Care</a> aid codes.
<b>Healthy Places Index (HPI) Quartile</b>	HPI is an index developed by The Public Health Alliance of Southern California. The current version of the HPI (HPI: 3.0) is based on 2015-19 American Community Survey (ACS) data other sources and is reflective of community socioeconomic conditions between 2015 and 2019. '1' indicates Quartile 1, the least healthy community conditions. '4' indicates Quartile 4 the healthiest community conditions. HPI scores are mapped to the census tract of residence. HPI scores are available for census tracts from the 2010 (not 2020) Census designation.

<b>Health Plan</b>	The Medi-Cal Managed Care health plan the member is enrolled in. All WCM members are enrolled in a managed care plan listed in <a href="#">APL 23-034</a> . For updates of WCM Health Plans, please visit <a href="#">DHCS CCS WCM Homepage</a> .
<b>Population Density</b>	Medical Service Study Area (MSSA) categories are a measure of population density. MSSA categories are based on the number of people per square mile within one or more census tracts. A rural MSSA has a population density of less than 250 persons per square mile and has no census defined place within the area with a population in excess of 50,000. A frontier MSSA has a population density of less than 11 persons per square mile. Any MSSA which is not a rural or frontier MSSA is an urban MSSA. Urban MSSAs should be within a population range of 75,000 to 125,000 but may not be smaller than five square miles in area.
<b>Race and Ethnicity</b>	This field identifies the race or ethnicity of the member. Both race and ethnicity are recorded in one data field. Race and ethnicity categories are sociopolitical constructs and are not an attempt to define race and ethnicity biologically or genetically. The Department of Health Care Services (DHCS) has developed race/ethnicity reporting standards that align with the 2024 revisions to the Office of Management and Budget, Statistical Policy Directive No. 15 (OMB SPD 15), and DHCS has implemented OMB Approach 1 and Approach 3 for the CCS dashboard. For more about the OMB Approach, please see <a href="#">OMB Race and Ethnicity Data Standards</a> .
<b>Reporting Year/Month</b>	The Reporting Year and Reporting Month fields represent the eligibility year and month, respectively, of the member.

<b>Sex<sup>1</sup></b>	Male, Female. <i>DHCS recognizes that male/female categories do not include all gender identities with which a person may identify. DHCS is updating its processes and collecting more self-reported information about member sexual orientations and Medi-Cal beneficiaries' gender identities, but the data are currently incomplete.</i>
<b>Language</b>	This field indicates reported primary language spoken by the member. The 'Summary' tab displays the percentage of CCS members that speak English, Spanish, Other Lang, and Unknown. - 'Unknown' includes 'No Valid Data Reported (MEDS generated)', 'No response, client declined to state', 'Unknown', and 'UNKNOWN'. The 'Other Lang' tab lists the top ten languages, American Sign Language, and Other from the percentage shown on the 'Summary' tab. - 'Other' includes all other languages spoken not shown on the list for that reporting year/month.
<b>Total CCS Enrollment (by Classic CCS, WCM, and Total)</b>	This is the distinct count of members in a given reporting month and year who are enrolled in either Classic CCS or WCM, by County.

## Measure Specification

Measure Specification Detail. This table lists how the measure is displayed in the dashboard as a number or percentage.

Measure	Specification
<b>Age Group</b>	Percentage of CCS-eligible Medi-Cal children and youth by pre-defined age group as defined by their date of birth.
<b>CCS Monthly Statewide Enrollment Trends</b>	Number of CCS-eligible Medi-Cal children and youth per reporting year and month at the state level for a given WCM plan or at the county level for all plans.

<b>Delivery System</b>	Percentage of CCS-eligible Medi-Cal children and youth in a given delivery system (Managed Care or Fee For Service/Mixed).
<b>Foster Care</b>	Percentage of CCS-eligible Medi-Cal children and youth who are in Foster Care or are Former Foster Youth.
<b>Healthy Places Index (HPI) Quartile</b>	Percentage of CCS-eligible Medi-Cal children and youth in a given HPI quartile.
<b>Population Density</b>	Percentage of CCS-eligible Medi-Cal children and youth living in a given type of MSSA ID (Urban, Rural, Frontier, Unknown).  <i><sup>1</sup>Unknown indicates a missing value for MSSA ID.</i>
<b>Race and Ethnicity</b>	Percentage of CCS-eligible Medi-Cal children and youth in a given race and ethnicity.
<b>Sex</b>	Percentage of CCS-eligible Medi-Cal children and youth who are classified as Male or Female. The field does not represent sex identity.
<b>Spoken Language</b>	Percentage of CCS-eligible Medi-Cal children and youth who speak a given language.
<b>Total CCS Enrollment (by Classic CCS, WCM, and Total)</b>	Number or Percentage of CCS-eligible Medi-Cal children and youth in a given County.

## Measure Calculation

This section provides detailed specifications for how the measure's business rules were operationalized in Medi-Cal administrative data. All business rules were developed and approved by departmental stakeholders as relevant. See the "Ownership" table below for the program teams and departments that are responsible for supporting the development and maintenance of these measures. Unless otherwise noted, data is pulled from the DHCS Management Information System/Decision Support System (MIS/DSS) data warehouse.

## Denominator Data

This metric provides the number of CCS-eligible Medi-Cal children and youth in the interval of interest for use in CCS measure denominators.

- Page 1 and 2 Measures (Age Group, County Status, Delivery System, Foster Care, Healthy Places Index Quartile, Population Density, Race and Ethnicity, Sex, Spoken Language, and Total CCS Enrollment by Classic CCS County and WCM by County Breakdown): Total CCS-eligible Medi-Cal children and youth enrolled in one or more Reporting Months in the Reporting Year (deduplicated) where ELIGIBILITY\_CCS\_GHPP.CCS\_AID\_CD IN ('9M','9N','9R','9U').

## CCS Aid Codes

The CCS-eligible Medi-Cal children and youth are identified by the CCS Aid Code from MIS/DSS, and the specific values identified for this population are defined as follows:

- 9M – Eligible for CCS Medical Therapy Program services only. Benefits include CCS Medical Therapy Program only.
  - MIS/DSS Definition – "CCS Med Therapy ONLY".
- 9N – Eligible for CCS Case Management.
  - MIS/DSS Definition – "CCS Case Mgt".
- 9R – CCS-eligible Healthy Families child. A child in this program is enrolled in a Healthy Families plan and is eligible for all CCS benefits (i.e., diagnosis, treatment, therapy, and case management). The child's county of residence has no cost sharing for the child's CCS services. Benefits include CCS.
  - MIS/DSS Definition – "CCS-Health Families Child".
- 9U – CCS-eligible Healthy Families child. A child in this program is enrolled in a Healthy Families plan and is eligible for all CCS benefits (i.e., diagnosis, treatment, therapy, and case management). The child's county of residence has no cost sharing for the child's CCS





services. Benefits include CCS.

- MIS/DSS Definition – “CCS-Healthy Families Child-NPSA”.

## Foster Care

Foster Care are defined uniquely using the Beneficiary Aid Code List table in MIS/DSS. Each of these populations is defined by the aid code groupings and their definition below:

- Foster Care – (Aid Codes 40, 42, 43, 45, 46, 49, 4H, 4K, 4L, 5K, 5L)
  - 40 - Aid to Families with Dependent Children Foster Care (AFDC - FC) - State only Foster Care Placement.
  - 42 - AFDC - FC - Federal Foster Care.
  - 43 - AFDC - FC - State Extended Foster Care. Non Minor Dependent (NMD) Ages 18 through 21 years old, under AB 12 on whose behalf financial assistance is provided for state-only FC placement.
  - 45 - Non-AFDC - FC. Covers children supported by public funds other than AFDC-FC.
  - 46 - Foster Care California Placement - Interstate Compact on the Placement of Children (ICPC).
  - 49 - Title IV-E Extended Foster Care – AFDC NMD Ages 18 through 21 years old, under AB 12 on whose behalf financial assistance is provided for federal FC placement.
  - 4H - Foster Children/Youth - in CalWORKS.
  - 4K - Foster Children/Youth - Emergency Assistance (EA) Covers juvenile probation cases placed in FC.
  - 4L - Foster Children/Youth - in 1931(b).
  - 5K - Emergency Assistance (EA) Foster Care Covers child welfare cases placed in FC.
  - 5L - Emergency Assistance (EA) Foster Care - For children, youth and NMDs up to age 21 if they do not meet eligibility requirements for the federal Emergency Assistance Foster Care (EA-TANF) program, aid code 5K.
- Former Foster Youth – (Aid Codes 4M, 4E)
  - 4M - Former Foster Youth (FFY) Individuals under the age of 26, not otherwise mandatorily eligible, who were in foster care and on Medicaid either when they turned age 18 or aged out of foster care.
  - 4E - 4E- Foster Care Hospital Presumptive Eligibility (PE) (Age 18-26) Covers former foster care children age 26 or younger with no income screening.

Race and Ethnicity is defined by the Federal OMB Statistical Policy Directive No. 15 on Race and Ethnicity Data Standards. DHCS has implemented Approach 1 and Approach 3 for the CCS dashboard.

#### Approach 1, alone or in combination

Approach 1 is an approach which combines all individuals who belong to a given racial or ethnic group (whether alone or in combination with another racial or ethnic group). Because the response categories are not mutually exclusive, the result is that percentages across the categories sum to greater than 100 percent.

- HL: Hispanic/Latino Alone or in Combination
- AIAN: American Indian/Alaska Native alone or in combination
- Asian: Asian Alone or in Combination
- Black: Black/African American Alone or in Combination
- NHPI: Native Hawaiian or Pacific Islander alone or in combination
- White: White Alone or in Combination
- Other: Some Other Race/Ethnicity Alone or in Combination
- Unknown: (Asked But No Answer/Unknown)

#### Approach 3, combined Multiracial and/or Multiethnic

Approach 3 is an approach which presents data for those reporting one of the seven race and/or ethnic categories (in addition to categories for Unknown and Other) alone, and then combines all other respondents reporting multiple race and/or ethnicity categories into an aggregated Multiracial and/or Multiethnic category. This approach has the effect of obscuring the specific racial and ethnic diversity of the population. As a result, it is used here on this CCS dashboard in conjunction with Approach 1 to report as much information on race and ethnicity as possible. The percentages of Approach 3 will sum to 100 percent because the response categories are mutually exclusive.

- HL: Hispanic or Latino alone
- AIAN: American Indian or Alaska Native alone
- Asian: Asian alone
- Black: Black or African American alone
- Multi: Multiracial and/or Multiethnic
- NHPI: Native Hawaiian or Pacific Islander alone
- White: White alone
- Other: Other
- Unknown: Unknown

For Page 1 Measures, this is the calculated percentage of the total CCS-eligible Medi-Cal children and youth in the interval of interest (Reporting Year and Month.) and subgroup of the measure of interest. Each measure has sub-dimensions which is calculated out of a total of 100%.

For the Page 2 Measure "Total CCS Enrollment by Classic CCS County and WCM by County Breakdown", this is the total number or percentage of CCS-eligible Medi-Cal children and youth in the interval of interest (Reporting Year and Month) in a given County, which can be disaggregated by CCS Type, (Classic CCS, WCM) Health Plan, (Any of the WCM plans) or County Status (Dependent or Independent).

For the Page 3 Measure "CCS Monthly Statewide Enrollment Trends", this is the total number of CCS-eligible Medi-Cal children and youth in the interval of interest, (Reporting Year and Month) which can be disaggregated by County or WCM Health Plan.

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## Measure Stratifications and Value Set Reference Table

Measure Stratifications - The groups/categories by which the measures are stratified are listed below:

Measures	Measure Stratification Filters
<b>Reporting Period</b>	The Reporting Year and Month of eligibility for CCS-eligible members.
<b>CCS Type</b>	Classic CCS; Whole Child Model (WCM)
<b>Plan Parent</b>	Medi-Cal Member Managed Care Plan (for children in the WCM population only)
<b>County Status</b>	Independent; Dependent
<b>County</b>	All 58 California Counties.

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## References

The following table identifies references to external documents that help provide additional definition and context for the items identified in this document.

Item	Description
<b>CCS Program Overview, Legislative Authority, and Funding Description</b>	<a href="#">Program Overview (ca.gov)</a>
<b>CCS WCM</b>	<a href="#">CCS Whole Child Model (ca.gov)</a>

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