DHCS
CALIFORNIA DEPARTMENT OF
HEALTH CARE SERVICES
Michelle Baass | Director

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TO: All California Children's Services Program Administrators

SUBJECT: Early and Periodic Screening, Diagnostic, and Treatment – Private Duty Nursing Case Management Services

I. PURPOSE

The purpose of this Numbered Letter (NL) is to clarify the California Children's Services (CCS) Programs' obligations related to the provision of case management services for Private Duty Nursing (PDN) that have been authorized for CCS members under the age of 21 pursuant to the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) available under Medi-Cal.

II. BACKGROUND

EPSDT provides medically necessary comprehensive and preventive health care services to members up to 21 years of age in accordance with requirements set forth in 42 United States Code (USC) sections 1396a(a)(43) and 1396d(a)(4)(B) and (r), 42 CFR section 441.50 et seq., and as required by Welfare & Institutions (WIC) sections 14059.5(b) and 14132(v).[1, 2, 3, 4, 5] Such services may also be medically necessary to correct or ameliorate defects and physical health conditions. For some CCS members PDN services may be medically necessary and thus are covered under EPSDT.

PDN services are nursing services provided to a member by a registered nurse (RN) or licensed vocational nurse (LVN) acting within their scope of licensing authority,

[1] 42 CFR § 441.50
[2] 42 U.S. Code § 1396d
[3] 42 CFR § 441.50
[4] California Code, Welfare and Institutions Code - WIC § 14059.5
[5] California Code, Welfare and Institutions Code - WIC § 14132

under the direction of the member's CCS paneled physician, CCS paneled nurse practitioner, or CCS paneled physician assistant with a co-signature of a CCS paneled physician. These services are for members who require more individual and continuous care than what would be available from a visiting nurse.[6] RNs and LVNs providing PDN services to a CCS member must be Medi-Cal enrolled as an individual nurse provider (INP) who offer PDN services independently, or employed by a Medi-Cal enrolled home health agency (HHA). A HHA is a State-licensed public or private organization that provides in-home skilled nursing services.[7]

III. POLICY AND IMPLEMENTATION, INCLUDING AUTHORIZATIONS OF PDN

If the County CCS Program or the California Department of Health Care Services (DHCS), for Dependent Counties, authorized PDN services for a CCS member under the age of 21, CCS is primarily responsible for providing case management to arrange for all authorized PDN service hours related to the CCS medically eligible condition(s).

For CCS members residing in Whole Child Model (WCM) counties, the managed care plan (MCP) is responsible for provision of all medically necessary EPSDT covered services to the member, including services covered by CCS. Regardless of who authorizes PDN services for a member under the age of 21, the MCP is responsible for providing case management services to arrange for all authorized PDN service hours when medically necessary, for both the CCS eligible condition and/or for a non-CCS eligible condition.

MCPs in non-WCM counties are responsible for provision of all medically necessary EPSDT covered services to the member except for services covered by CCS. See All Plan Letter 26-009, Private Duty Nursing Case Management Responsibilities For Medi-Cal Eligible Members Under The Age Of 21.

County CCS Programs and/or DHCS is responsible for authorizing PDN services in accordance with the standards set forth in 42 USC, Section 1396d(r)(5) to correct or ameliorate the CCS eligible condition.

The County CCS Program must, at the member's request, provide case management for all authorized PDN services, whether or not they are financially responsible for the PDN services. In meeting this obligation, the County CCS Program shall use one

[6] Title 42 of the Code of Federal Regulations (CFR), Section 440.80
[7] Health and Safety Code Section 1727

or more HHA, INP, or any combination thereof. PDN case management services include, but are not limited to:

- Providing the CCS member with information about the number of PDN hours the member is authorized to receive;
- Contacting enrolled HHAs and/or enrolled INPs to seek authorized PDN services on behalf of the CCS member;
- Identifying and assisting potentially eligible HHAs and INPs with navigating the process of enrolling to be a Medi-Cal provider; and
- Working as needed with HHAs and enrolled INPs to jointly provide PDN services to the CCS member.

CCS members or their authorized representative may choose not to use all authorized PDN service hours, and County CCS Programs must respect the member's choice. County CCS Programs must document in the member's records instances when a CCS member chooses not to use authorized PDN services. When arranging for the CCS member to receive authorized PDN services, County CCS Programs must document all efforts to locate and collaborate with PDN providers and with other entities, such as MCPs and other health coverage.

County PDN Case Management Policy and Procedures

County CCS Programs shall notify DHCS within 90 days of any revisions to their approved case management policies and procedures (P&P) and submit those to DHCS.

For MCP obligations related to the provision of case management services for PDN, see APL 26-009 or any superseding version of the APL.

If you have any questions regarding this NL, please email CCSProgram@dhcs.ca.gov.

Sincerely,

ORIGINAL SIGNED BY

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