

3.41 STANDARDS FOR COCHLEAR IMPLANT CENTERS**A. Definition**

A Cochlear Implant Center is a multi-disciplinary team capable of providing cochlear implant candidacy evaluations, cochlear implant maintenance, adjustments, programming, and cochlear implant aural rehabilitative management of children of all ages together with their parents.

B. General Requirements and Procedures for Approval

1. The Cochlear Implant Center shall be located at a health care provider office or facility. The cochlear implant surgery shall be performed in a CCS-approved hospital facility by a surgical member of the cochlear implant team.
2. The health care provider or facility, and hospital shall be enrolled as a Medi-Cal provider, as shall all health care professionals delivering services to CCS-eligible children.
3. The Center shall operate as an identifiable team which shall be responsible for the coordination of all aspects of comprehensive evaluation, treatment, and management related to speech-language and hearing concerns.
4. The Cochlear Implant Center must be concurrently approved as a Type C Communication Disorder Center which provides services for infants through the age of 21.
5. The facility must have an active cochlear implant (CI) program, which has performed pediatric cochlear implant surgeries on at least five (5) children without implant-related complications as a team and continues to perform at least three (3) surgeries per year.
6. Cochlear Implant Centers previously approved by Medi-Cal as Medi-Cal Centers of Excellence will maintain their approval, but shall submit an application with current team members identified for CCS record maintenance.
7. A provider wishing to participate in the California Children's Services Program as a Cochlear Implant Center shall submit an application to:

CCSFacilityReview@dhcs.ca.gov

For questions call 916-327-2144

Fax 916-440-5317

8. A provider whose application meets the requirements identified in these standards, by a review of the application, a site visit, or both, shall be approved as a Cochlear Implant Center.
9. Center staff and consultants providing care to CCS-eligible children shall be CCS approved, eligible for approval, or receiving supervision by a CCS-approved provider according to the standards for panel participation established by the State CCS program.
10. Changes in professional staff whose qualifications are incorporated into any portion of these standards shall be reported to the state CCS program at the above address whenever they occur.
11. Center approval shall be subject to re-evaluation at intervals defined by the State CCS program.
12. Centers shall be in compliance with communication and accessibility standards in the Americans with Disabilities Act.
13. Centers shall be responsible for having translation services available for non-English speaking families.

C. Requirements for Participation

1. Staff

- a. The Cochlear Implant Center must include a team of multi-disciplinary providers with expertise in pediatric care for children with hearing loss and their families. Team members are not required to work within the same facility, must be individually identified, and specified if they are a referral source outside the facility. Referral sources are used to supplement the cochlear implant evaluation and/or treatment recommendations for the individual patient as deemed appropriate by the core team members.
- b. The team shall include:
 - (1) A CCS approved audiologist as a core team member and primary contact for the team, who has at least two years of professional experience in providing cochlear implant services to children of all ages. The audiologist shall be responsible for leading or co-leading the cochlear implant team for implant selection and care coordination of the cochlear implant candidate.

CALIFORNIA CHILDREN'S SERVICES MANUAL OF PROCEDURES

CHAPTER 3 – PROVIDER STANDARDS

COCHLEAR IMPLANT CENTERS

- (2) Additional audiologists as cochlear implant team members, with experience in pediatric cochlear implant evaluations and post-surgical treatment. In compliance with California licensure standards and CCS approval standards, non-licensed audiologists during their Required Professional Experience and licensed audiologists prior to obtaining CCS approval may provide services to CCS-eligible children under the supervision of a CCS-approved audiologist on the cochlear implant team. Supervision requires the licensed, CCS-approved provider to be on-site, immediately available for consultation and assistance.
- (3) A CCS-approved cochlear implant surgeon as a core team member, having completed at least 20 surgeries post residency on children without complications. Additional surgeons with like experience are encouraged to participate as team members.
- (4) A CCS-approved or equivalent speech-language pathologist, with experience in providing services to children of all ages who are deaf or hard of hearing. If the speech pathologist is not CCS approved, work experience documenting two years of pediatric experience is required, and completion of a CCS application is encouraged. A speech pathologist must be a core member of every cochlear implant team.
- (5) Additional speech pathologists as referral sources for the post-implant rehabilitation as necessary. Speech pathologists providing post-implant rehabilitation shall be CCS-approved or equivalent and must coordinate services with the cochlear implant team.
- (6) A Behavioral Health professional capable of evaluating behavioral, social, and/or developmental characteristics outlined in current CCS cochlear implant criteria. The professional must be California licensed and have two years experience in pediatric evaluations. The Behavioral Health professional may be a psychiatrist, psychologist, social worker, and/or a developmental pediatrician. A Behavioral

CALIFORNIA CHILDREN'S SERVICES MANUAL OF PROCEDURES

CHAPTER 3 – PROVIDER STANDARDS

COCHLEAR IMPLANT CENTERS

Health professional should be a consistent referral source.

- (7) Additional team members or referral sources as necessary. This may include, but it not limited to, educational specialists, neurologists, or credentialed teachers of the deaf.
- (8) If the audiologist utilizes a test assistant, the test assistant shall work under the direct supervision of the CCS approved audiologist. The CCS approved audiologist shall be in the same room or visually observing the test assistant when the assistant is providing services to a CCS-eligible child.
- (9) If the speech-language pathologist utilizes a speech-language pathology assistant, the assistant shall work under the direct supervision of the CCS approved speech-language pathologist, as specified in Section 2538 et seq. of the California Business and Professions Code.

2. Facility and Equipment

- a. There shall be a waiting room appropriately furnished for children.
- b. There shall be at least one sound-treated examination room, conforming to the requirements set forth in current ANSI standards.
- c. Equipment capable of performing all procedures for the evaluation of cochlear implant audiology candidacy criteria and post-implant services, as referred to in current peer-reviewed audiologic guidelines, standards, or preferred practice patterns published by professional audiological associations for infants and children of all ages shall be available and used by the Center's audiologist(s).
- d. Equipment shall be calibrated in accordance with the manufacturer's recommendation and a log shall be kept documenting the dates of calibration, repair or replacement. The electroacoustic equipment and ambient noise shall meet current ANSI and manufacturer's specifications.
- e. Biologic checks of the equipment (e.g., identifying signs of wear, listening checks by the operator for hearing levels, cross talk, signal distortion, noise levels, etc.) shall be

made and recorded daily or, if less than daily, each time equipment is used.

3. Services

- a. The Center shall comply with current peer-reviewed cochlear implant guidelines, standards, or preferred practice patterns published by professional audiological and speech-language pathology associations and provide comprehensive cochlear implant evaluation and post-implant treatment for children of all ages.
- b. The Center shall provide cochlear implant counseling, including communication and educational options, and follow-up for children of all ages.
- c. The multi-disciplinary cochlear implant team shall be responsible for addressing all the criteria for cochlear implant surgical selection outlined in CCS policy, delineated in the most recent Numbered Letter.
- d. The core members of the cochlear implant team shall be responsible for the final recommendation regarding cochlear implant candidacy, based on evaluations and reports from all team members. A report summarizing all findings shall be compiled by a core member and disseminated to the family and the County CCS office.
- e. The Center shall provide post implant services including programming, mapping, troubleshooting and on-going evaluation and management.
- f. An audiology test assistant, if utilized, may assist the CCS approved audiologist to perform the functions outlined below.
 - (1) Behavioral management, including:
 - (a) Assisting the child to cooperate in the testing environment.
 - (b) Conditioning the child to respond appropriately during play and orientation to audiological test techniques;
 - (2) Reassure the child to allay fear of the testing and evaluation process.
 - (3) Assist the child that may require careful observation and/or assistance in responding to acoustic stimuli.

- (4) Supervise the care of the child during the parent(s) interview and counseling session, before and after the evaluation.
 - g. If the cochlear implant team determines the child is not a candidate at their facility, it is the responsibility of the team to inform the family and the County CCS office.
- 4. Care Coordination/Referral
 - a. The Core team members are ultimately responsible for the post-surgical care and care coordination of the cochlear implant recipient. Care coordination must include:
 - (1) Referral for aural rehabilitation
 - (2) Coordination with schools or Early Start programs regarding therapy and/or classroom needs
 - (3) Referrals for psychological, social or developmental counseling, if necessary
 - (4) Referrals to other medical specialist if additional disorders are suspected
 - (5) Authorization requests for replacement parts, batteries and accessories
 - (6) If available, coordination with local audiology providers for on-going hearing aid, aural rehabilitation, and/or cochlear implant care
 - (7) Referral to appropriate services for communication options if it is determined a cochlear implant is not an option for the child, or if post-implantation language development is not progressing as predicted.
- 5. Reporting Requirements
 - a. Each Cochlear Implant Center shall submit to the CCS program summary reports at least annually in a format determined by The State. The report should include the number of patients, number of surgeries, the number of patients referred to CCS for approval, short term and long term outcomes for each child, and a one year assessment of the child's ability to development speech.

6. Billing

CALIFORNIA CHILDREN'S SERVICES MANUAL OF PROCEDURES

- a. A Cochlear Implant Center shall submit claims for reimbursement of CCS authorized services in a format specified by the CCS program.
- b. Claims for the surgical device(s) and surgery is the responsibility of the outpatient hospital facility where the surgery is performed and the physicians involved with the surgery.

COCHLEAR IMPLANT CENTER REPORTING FORM

Name of Facility				
Name of hospital/medical center (if different from above)				
Medi-Cal provider number	NPI number	Telephone number	FAX	TDD
Address			City	ZIP code
Service Address		City	ZIP code	County
Director			E-mail address	
Chief audiologist			E-mail address	
Contact person for this application		Telephone number	FAX	E-mail address

FACILITY INFORMATION

Medi-Cal Approved Outpatient Hospital Surgery Center(s)

Outpatient Surgery Center Name	NPI	Surgeon has privileges?	Radiology services?	Inpatient services available?
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Communication Disorder Center Approval

Communication Disorder Center Name	CCS Approved?	CDC Number	NPI Number
	<input type="checkbox"/> Yes <input type="checkbox"/> No	7.3	

REPORTING INFORMATION

Number of Patients	
Number of Patients referred to CSS for approval	
Number of Surgeries completed	

CHILD INFORMATION (PROVIDE INFORMATION ON ALL CCS PATIENTS)

Name:	CCS #	Procedure:
Short Term Outcomes:		
Long Term Outcomes:		
Date One Year Assessment will be completed (if completed, provide date of completion and a narrative assessment):		

Name:	CCS #	Procedure:
Short Term Outcomes:		
Long Term Outcomes:		
Date One Year Assessment will be completed (if completed, provide date of completion and a narrative assessment):		

Name:	CCS #	Procedure:
Short Term Outcomes:		
Long Term Outcomes:		
Date One Year Assessment will be completed (if completed, provide date of completion and a narrative assessment):		

Name:	CCS #	Procedure:
Short Term Outcomes:		
Long Term Outcomes:		
Date One Year Assessment will be completed (if completed, provide date of completion and a narrative assessment):		

Name:	CCS #	Procedure:
Short Term Outcomes:		
Long Term Outcomes:		
Date One Year Assessment will be completed (if completed, provide date of completion and a narrative assessment):		