California Children’s Services
Whole Child Model Overview

May 18, 2018
Webinar Sound

- This webinar can only be viewed online, not heard. You must dial in to hear the webinar; for audio, please call: 877-716-4284 and enter code 7434543.

- Participants on the phone will be in “listen only” mode. Throughout the webinar, we will pause for questions. The operator will give instructions on how to ask questions.

- CCSRedesign@dhcs.ca.gov
What will be covered today?

- California Children’s Services (CCS) Program History
- What is the Whole Child Model (WCM)?
- Which CCS children will be eligible to be in the WCM?
- Which health plans and counties will be in the WCM?
- What benefits will be available in the WCM?
- What resources will be available in the WCM?
- What roles will the health plan have in the WCM?
- What doctors will be available?
- How will the WCM ensure Continuity of Care?
- What is the grievance and appeals process?
- Where can I get more information?
CCS Program History

Created in 1927, CCS provides:

- Diagnostic and treatment services
- Medical case management
- PT/OT services

These services are provided to clients under age 21 with CCS-eligible medical conditions who also meet residential and financial eligibility requirements.
CCS Eligibility Requirements

Financial
- $40,000 or less
- Eligible for Medi-Cal
- Out-of-pocket medical expense more than 20% of family’s adjusted gross income

Residential
- Reside in county of service

Medical
- CCS-eligible condition
- Need the Medical Therapy Program (MTP)
CCS Qualifying Conditions

- Infectious Disease
- Neoplasms
- Endocrine, Nutritional, Metabolic Diseases and Immune Disorders
- Mental Disorders and Mental Retardation*
- Diseases of the Nervous System
- Medical Therapy Program
- Diseases of the Eye
- Disease of the Ear and Mastoid Process

*Conditions of this nature are not eligible except when the disorder is associated with or complicates an existing CCS-eligible condition
CCS Qualifying Conditions (cont.)

- Diseases of the Circulatory System
- Diseases of the Respiratory System
- Diseases of the Digestive System
- Diseases of the Genitourinary System
- Diseases of the Skin and Subcutaneous Tissues
- Diseases of the Musculoskeletal System and Connective Tissues
- Congenital Anomalies
- Accidents, Poisonings, Violence, and Immunization Reactions
CCS Service Providers

- Hospitals
- Specialty Care Centers
- Pediatric Specialists
- Pharmacies
- DME Providers
- Other Provider Types
Referrals to CCS

- Referrals to CCS can be made by anyone:
  - Hospital
  - Physician
  - School nurse
  - Family

- Referrals are sent to the appropriate county office where the child resides
CCS Program Today

Two (or more) separate systems

Specialty care is received from the CCS FFS system for the CCS condition.

Primary care and behavioral health services are received from the managed care health plan.
Questions?

- CCS Program History
- CCS Eligibility Requirements
- CCS Qualifying Conditions
- CCS Service Providers
- Referrals to CCS
- CCS Program Today
What is the Whole Child Model (WCM)?

A new way for CCS beneficiaries to get their care.

All CCS and non-CCS services will be provided by the health plan instead of county CCS Program.

Beneficiaries will get primary and specialty services, hospital visits, some mental health services, and some extra services.
What are the benefits of the WCM?

- Patient and family centered approach
- Improve care coordination through an organized delivery system
- Maintain quality
- Streamline care delivery
Which CCS children will be eligible to be in the WCM?

1. CCS Eligible Condition
2. Full-Scope Medi-Cal
3. Live in a Participating WCM County
When will WCM begin?

Phase 1  July 1, 2018
- 3 health plans
- 6 counties

Phase 2  January 1, 2019
- 2 health plans
- 15 counties
Which health plans and counties will be in the WCM?

July 1, 2018

<table>
<thead>
<tr>
<th>Health Plan</th>
<th>Counties</th>
<th>Number of Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central California Alliance for Health</td>
<td>Merced, Monterey, Santa Cruz</td>
<td>6,730</td>
</tr>
<tr>
<td>CenCal Health</td>
<td>San Luis Obispo, Santa Barbara</td>
<td>2,950</td>
</tr>
<tr>
<td>Health Plan of San Mateo</td>
<td>San Mateo</td>
<td>1,630</td>
</tr>
</tbody>
</table>
Which health plans and counties will be in the WCM? (cont.)

**January 1, 2019**

<table>
<thead>
<tr>
<th>Health Plan</th>
<th>Counties</th>
<th>Number of Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cal Optima</td>
<td>Orange</td>
<td>12,750</td>
</tr>
<tr>
<td>Partnership Health Plan</td>
<td>Del Norte, Humboldt, Lake, Lassen, Mendocino, Marin, Modoc, Napa, Shasta, Siskiyou, Solano, Sonoma, Trinity, Yolo</td>
<td>7,590</td>
</tr>
</tbody>
</table>
Questions?

- What is the Whole Child Model?
- What are the benefits of the WCM?
- Which CCS Children will be eligible to be in the model?
- When will WCM begin?
- Which health plans and counties will be in the WCM?
What benefits will be available in the WCM?

Benefits

• Primary care physician (PCP) assignment
• Timely access to appointments
• Time and distance standards
• Out of network access
• Formal grievance and appeals process
• Continuity of care
What resources will be available in the WCM?

Resources

- Provider lists
- Member services
- Interpreter services
- Care coordination
- Complex case management
What roles will the health plan have in the WCM?

Health plans will coordinate and approve care for all the child’s needs, and provide case management that will ensure children get to appropriate providers for delivery of health care services at the appropriate time and place.
WCM Health Plans will also provide...

- Communication
- Family-centered care planning
- Information about managed care processes
- Information on rights to appeal any service denials, filing grievances, and how to submit continuity of care requests
- Information on how to access community resources
- Access to ongoing information, education, and support regarding their child’s care plan
What doctors will be available?

- Children may continue to see their CCS-paneled providers
- 12 months of continuity of care with the current provider, with the ability to extend beyond the 12 months
Continuity of Care

Provider

- Provide up to 12 months of continuity of care with the current provider under certain conditions, with the ability to extend beyond the 12 months

Public Health Nurse (PHN)

- Beneficiary can continue to receive case management and care coordination from his or her PHN if they are still available
Continuity of Care (cont.)

Durable Medical Equipment (DME)

- Provide up to 12 months of access to current specialized/customized DME under certain conditions, with the ability to extend beyond the 12 months

Prescription Drug

- Provide continuation of currently prescribed prescription drugs until a new assessment and treatment plan is in place

Appeal Rights

- Continuity of care appeal rights to the DHCS Director
Questions?

- What benefits will be available in the WCM?
- What resources will be available in the WCM?
- What roles will the health plan have in the WCM?
- WCM Health Plans will also provide…
- What doctors will be available?
- Continuity of Care
Beneficiary Notices

- 90-Day Notice
- 60-Day Notice
- 30-Day Notice
Child/Family Member Support

Family Advisory Committees/Task Forces

Family input on CCS medical homes and transition policies

Family Engagement Activities Contract
What is the grievance and appeals process?

CCS Program Eligibility

County CCS Program

All other Grievance and Appeals

Health Plan
Next Steps – Phase 1

Provider Notice
To inform providers of the changes in WCM

30-day Beneficiary Notice
To remind beneficiaries about the transition

WCM Begins!
July 1, 2018
Next Steps – Phase 2

Provider Notice
To inform providers of the changes in WCM

90-day Beneficiary Notice
To inform impacted CCS beneficiaries about the transition

60-day Beneficiary Notice
To explain beneficiary rights to continue receiving case management and care coordination services

30-day Beneficiary Notice
To remind beneficiaries about the transition

WCM Begins!
January 1, 2019
Where to Get More Information

For Whole Child Model information, please visit

- [http://www.dhcs.ca.gov/services/ccs/Pages/CCSWholeChildModel.aspx](http://www.dhcs.ca.gov/services/ccs/Pages/CCSWholeChildModel.aspx)

For questions, please email:

- [CCSRedesign@dhcs.ca.gov](mailto:CCSRedesign@dhcs.ca.gov)
Authorization Requests

Phase 1
- Authorization requests received before July 1, 2018, are the responsibility of the county CCS Program
- Authorization requests received after July 1, 2018, are the responsibility of the health plans

Phase 2
- Authorization requests received before January 1, 2019, are the responsibility of the county CCS Program
- Authorization requests received after January 1, 2019, are the responsibility of the health plans
Provider Claims

Providers rendering services for WCM beneficiaries shall submit their claims directly to the health plans for services after...

- **Date of Service** on or after July 1, 2018, for Phase 1
- **Date of Service** on or after January 1, 2019, for Phase 2
Questions?

- Beneficiary Notices
- Child/Family Member Support
- What is the grievance and appeals process?
- Next Steps
- Open Discussion