TO: ALL COUNTY CALIFORNIA CHILDREN'S SERVICES (CCS) ADMINISTRATORS AND MEDICAL CONSULTANTS, AND STATE CHILDREN'S MEDICAL SERVICES (CMS) STAFF

SUBJECT: CHILDREN AT RISK FOR HUMAN IMMUNODEFICIENCY VIRUS (HIV) INFECTION

Background:

Effective July 1, 2001, funding for the CCS HIV Children's Program reverted to the Department of Health Services Office of AIDS.

The 27 county CCS programs which supported a local HIV Children's Program and the CCS approved Immunology Disorder and Infectious Disease (IDID) Special Care Centers (SCC) were notified of this change. On June 22, 2001, county CCS programs were advised that the funding of these services would cease as of July 1, 2001, and that positions assigned to these responsibilities would need to be redirected to other activities through amendments to the county’s CCS Administrative Budget. They were also advised that they should work with county HIV programs to ensure that screening services to infants, children, and adolescents at risk for HIV infection were not disrupted. On May 21, 2001, IDID SCC’s were advised of the changes and reminded that infants, children, and adolescents in whom an HIV infection was confirmed are medically eligible for the CCS program.

These changes have resulted in some unintentional confusion on the availability of HIV screening services for newborns. The purpose of this letter is to provide the CCS program’s policy on the authorization of HIV screening services for infants and supercedes CCS N.L. 01-0195.

Policy:

A. CCS shall issue authorizations to a CCS-approved IDID SCC for outpatient diagnostic services for infants (i.e., children under 12 months of age) who are at risk for HIV infection. These services are related to the potential HIV infection.
B. Requests for authorizations of services provided after discharge from birth admission can come from various sources such as:

- The discharging hospital facility
- A CCS-approved IDID SCC
- A primary care provider
- County social services department

C. Authorizations for infants at risk for HIV infection MUST be issued:

- Within five days of receipt of the request for services, and
- To an approved IDID SCC, and
- Without regard to the patient’s insurance coverage or the family’s income, and
- Without waiting for a denial of coverage from a patient’s HMO or other third-party payor.

D. Issuance of an authorization for these diagnostic services requires only the receipt of a Request for Service Form for Medi-Cal beneficiaries and Health Families subscribers. Authorization for other infants requires a signed CCS application. There is no requirement to complete a financial and residential eligibility determination.

E. The $20 assessment fee is waived for these services.

F. An infant who is confirmed to have an HIV infection is medically eligible for the CCS program for ongoing treatment services.

**Policy Implementation:**

A. Authorizations for diagnostic services for infants who are at risk for HIV infection MUST be time-limited, not to exceed six months.
B. Authorizations shall cover only:

- Laboratory testing to determine the presence of HIV infection.
- SCC services.
- Prophylactic anti-retroviral medications.

C. Authorizations may be extended beyond six months based on medical justification received from the authorized IDID SCC.

D. Upon confirmation of an HIV infection, a treatment authorization shall be issued to the IDID SCC as long as the child meets all CCS program eligibility requirements.

If you have any questions on this change in CCS program policy, please contact your Regional Office Nurse Consultant.

Maridee A. Gregory, M.D., Chief
Children’s Medical Services Branch