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Department of Health Care Services



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June 24, 2010

CHDP Program Letter No.: 10-08

TO: ALL CHILD HEALTH AND DISABILITY PREVENTION (CHDP)
PROGRAM DIRECTORS, DEPUTY DIRECTORS, STATE CHILDREN'S
MEDICAL SERVICE (CMS) BRANCH STAFF AND REGIONAL OFFICE
STAFF

SUBJECT: CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAM
BASIC REQUIRED ACTIVITIES

The enclosed outline of basic required activities of the CHDP Program was developed by local CHDP program staff in response to budgetary constraints that are impacting local programs.

Please note that funding provided by the CMS Branch to local CHDP programs consists almost entirely of Medicaid Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Administrative funding. This funding is solely and explicitly to be used for administrative activities outlined in the State Medicaid Manual, Part 5 (EPSDT Services), produced by the Department of Health and Human Services, Centers for Medicare and Medicaid Services. The mandates addressed in this manual provide the framework for the EPSDT program. The key elements identified in this document must be performed to meet federal and state requirements. The information is available at the following link:

<http://www.cms.hhs.gov/Manuals/PBM/itemdetail.asp?itemID=CMS021927>

Additionally, the following citations provide legislative guidelines for the CHDP program:

- California Code of Regulations (CCR), Title 17, Sections 6800 through 6874
- CCR, Title 22, Sections, 51340, and 51532
- Health and Safety Code, Sections 104395, 105300, 105305, 120475, and 124025 through 124110

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Please continue to consult with your Regional Consultant staff for clarification or questions regarding these or other programmatic activities.

Original signed by Harvey Fry for Luis R. Rico

Luis R. Rico, Acting Chief
Children's Medical Services Branch

Enclosure

**Basic Required Activities
For
Child Health and Disability Prevention (CHDP) Program**

I. Program Administration

- A. Develop yearly Plan and Budgets, including Performance Measures, according to Children's Medical Services (CMS) Branch guidelines (Health and Safety Code, Section 124060).
- B. Submit annual Administrative Budget(s) and assure expenditure of funds according to Fiscal Year Allocation Letter issued by the State CMS Branch (Health and Safety Code, Sections 124060 (a)).
- C. Submit quarterly invoices to the State no later than 60 days after the end of each quarter (Health and Safety Code, Section 124065, 124070).
- D. Assure audit trail is maintained for all expenditures (Title 42 CFR Section 433.32(a); Health and Safety Code, Section 124070).
- E. Assure that all CHDP purchased equipment and supplies are used for CHDP Program purposes only (Health and Safety Code, Section 124070).
- F. Develop and implement an Interagency Agreement with the local **Department of Social Services (DSS) and Probation Department** which includes all the basic EPSDT mandated activities included in the "CHDP Program Model Interagency Agreement" in the current Plan and Fiscal Guidelines Manual (Social Security Act-Section 139(a); Section 1902(a)(43)).

These activities must include:

- Federal mandates from the Centers for Medicare and Medicaid Services, Subpart B (EPSDT), Sections 441.50-441.62:
 - Informing all EPSDT eligible individuals age 0-21 (or their families) about the nature, scope and benefits of the EPDST program via a combination of written and oral methods that are clear and non-technical.
 - Informing all ESPDT eligible individuals age 0-21 (or their families) of the benefits of preventive health and dental care, where and how to obtain them and that they are available at no cost.
 - Informing all ESPDT eligible individuals age 0-21 (or their families) that necessary transportation and scheduling assistance is available upon request.
- and*

- State mandates from the California Code of Regulations, Title 22, Sections 51340 and 51532:
 - EPSDT screening services are provided through the CHDP program.
 - EPSDT screening services are provided by a certified Medi-Cal provider
 - EPSDT supplemental services are covered subject to prior authorization if the requirements of subsections (e) or (f), as appropriate, are met.
 - Reimbursement for early and periodic screening services under the CHDP program shall be made in accordance with the provisions of Title 17, CCR, Sections 6800 et seq.

- G. Provide program oversight for the Health Care Program for Children in Foster Care (HCPCFC) Memorandum of Understanding. (Welfare and Institutions Code 16501.3).

- H. Compile yearly data of CalWORKs, Medi-Cal only and Foster Care persons requesting CHDP services (Health and Safety Code, Section 124060 (3)).

- I. Assure that CHDP/EPSTDT funded personnel perform only allowable functions (Health and Safety Code, Section 124075 (b)).

- J. Assure time studies are completed a minimum of one month each quarter per Federal Financial Participation requirements referenced in the current Plan and Fiscal Guidelines (Social Security Act, State Medicaid Plan, Title 42, Section 433.32 (a)).

- K. Retain all administrative records, including time study forms, for a minimum of three years (in addition to current year) or longer if under audit (Social Security Act, State Medicaid Plan, Title 42, Section 433.32 (b) (c)).

II. Resource Development

Except as noted otherwise, the following activities reflect elements of CHDP program standards promulgated under Health and Safety Code, Section 124035 (c).

- A. Recruit, enroll and support CHDP medical providers

- B. Inform of responsibilities as CHDP Provider and give all appropriate materials.
 - Inform providers of the CHDP Health Assessment Guidelines including protocol for Anti-Tobacco Health Education (Health and Safety Code, Section 104395 (c)).

 - Train providers on completion of PM 160.

 - Conduct a Facility Review and Medical Record Review
 - at the time of enrollment
 - change of location
 - change in practice, and/or
 - in response to a performance concern.

- Execute a Provider Agreement indicating his/her agreement to comply with CHDP Program requirements (Health and Safety Code, Section 124040 (a-2)).
 - Obtain all required information and send PM 177 to CMS Branch to enroll and/or to provide changes in status or information of CHDP Providers.
- C. Supply provider office with PM 160 and orient to the CHDP Website for necessary forms and manuals.
- D. Assist providers with billing issues and questions.
- E. Visit office periodically to assure services appropriately given and providers aware of local staff as resource/advocate.
- F. Provide sources to obtain Injury Prevention, Tobacco Avoidance, Dental Care, Nutrition, and other informational materials to provider for use in patient education.
- G. Distribute all Provider Notices sent by State CMS Branch and retain Report of Distribution.
- H. Orient provider offices to the Denti-Cal website as a resource for current listing of local Denti-Cal providers.

III. Care Coordination

- A. Review all Fee-for-Service Medi-Cal and CHDP PM160s. (Health and Safety Code, Sections 124040 (a-3))
- B. Provide follow-up to children with conditions coded 4 and 5 to assure access to care (Health and Safety Code, Sections 124040 (a-3) and (a-4))

IV. Outreach

Coordinate with and inform Public Health Programs, Community Based Organizations, Regional Center, WIC, Head Start and State Preschool programs of CHDP services and how they may be obtained (Health & Safety Code, Section 124040).

V. Medi-Cal Managed Care

Coordinate activities with Medi-Cal Managed Care Plans as delineated in the local Memorandum of Understanding (Health & Safety Code, Section 124040 (c)).