

# California Children's Services (CCS) County Monitoring and Oversight

Office Hours Training: Annual Report

# Topics Covered

- » Due dates
- » Annual Report submissions
- » Compliance activities, including:
  - Information that must be submitted
  - Best practices
- » Resources
- » Children's Medical Services (CMS) Net and Microsoft Business Intelligence (MSBI) reports

# Due Dates to which County CCS Programs Must Adhere

<b>Annual</b>	<b>Due Date</b>
Fiscal Year: July – June	October 1

Supplemental information requests due within 30 calendar days

# Annual Report Template



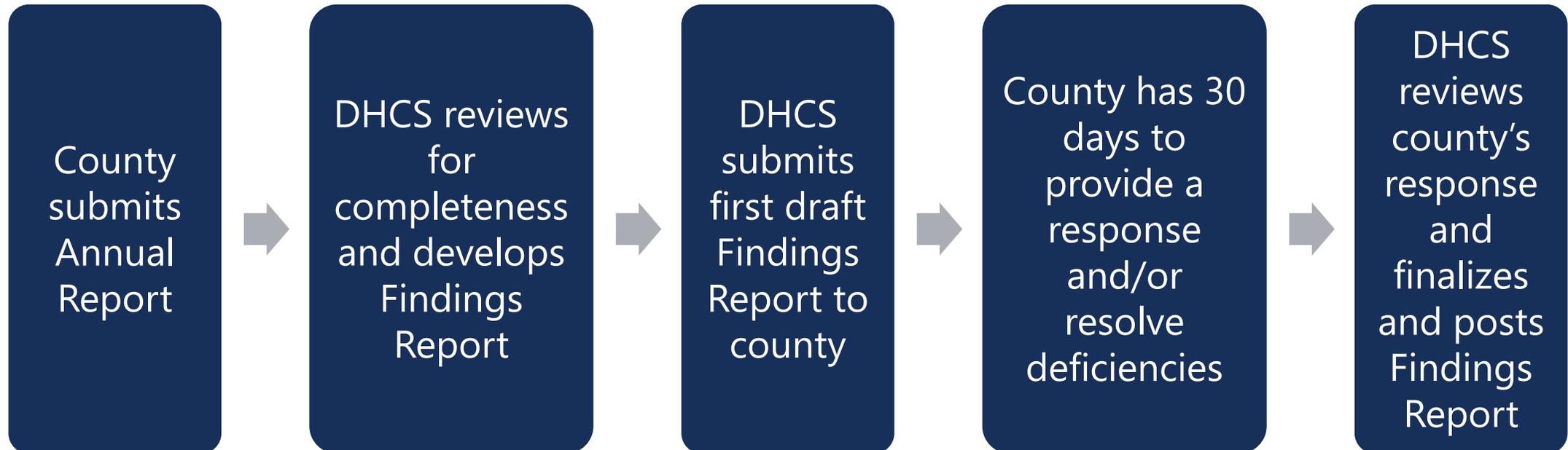
# Annual Report Template

The Annual Report Template is titled, ***Exhibit 2: CCS County Monitoring Template – Annual Reports***, and includes:

- » Reporting Instruction
- » Contact Info
- » Training Log
- » County Responsibilities
- » DHCS Responsibilities
- » Annual Compliance Activities

# Reporting Instructions

- » Reporting Instructions tab - instructions on how to complete the Annual Report Template
- » County CCS programs must comply with all reporting requirements by the submission dates



# Contact Information

<b>Contact Information</b>	
<b>County</b>	
<b>Reporting Period</b>	
<b>Preparer Name</b>	
<b>Preparer Title</b>	
<b>Preparer Email</b>	
<b>Preparer Phone</b>	

# Training Log

First Name	Last Name	Job Title	Job Type (Clinical or Non-Clinical)	Training Title

Training Short Description	Training Duration	DHCS Sponsored Training (Yes or No)	County Sponsored Training (Y=Yes, N-No)	Date Completed (MM/DD/YYYY)

# Compliance Activity for Training

Training		
Compliance Activity	Documentation Reviewed	Examples of Best Practices
<p>County CCS program shall complete mandatory training and 20 hours of training annually by all CCS program staff</p>	<ul style="list-style-type: none"> <li>» Counties submit <b>Training Log</b> within Annual Report</li> </ul>	<ul style="list-style-type: none"> <li>» County CCS program’s policies and procedures should list mandatory training and additional training for CCS program staff, timeline of when trainings need to be completed after onboarding and annually, and clear goals and objectives for each training</li> <li>» County CCS program should have an effective feedback loop for trainings</li> <li>» County CCS program documents evidence of training (e.g., sign-in sheets, dates of training, training schedules, training materials)</li> <li>» County CCS program conducts internal monitoring at a set frequency to ensure effectiveness of trainings</li> </ul>

# County Reporting Responsibilities

Metric	Instructions	Responsible County Model Type	Included in the Annual Submission (Select from below)
Medical Therapy Unit (MTU) Locations	County CCS programs to submit MTU directories and addresses	All counties	Select
Medical Therapy Program (MTP) Chart Audit	County CCS programs to submit policies and procedures	All counties	Select
Case Management and Coordination of Services	County CCS programs to submit policies and procedures	WCM Independent and Dependent counties	Select

» Family participation survey results if survey was completed

# Compliance Activity for MTU Locations

Counties submit their MTU directory, including MTU addresses

MTU Directory should include:

- » Full name
- » National Provider Identifier (NPI), if applicable
- » Complete address of all site(s)

# Compliance Activity for MTP Chart Audit *for Counties with MTU(s)*

Counties submit applicable policies and procedures

Policies and procedures should define

- » Processes for monthly MTP chart audits on randomly selected charts
- » How the county MTP Utilization Team will audit at least 10 of the MTP caseload
- » Identify who is part of the MTP Utilization Team
  - The titles of the team members
  - Their role within the team

# Compliance Activity for MTP Chart Audit *for Independent Counties Without a MTU*

Counties submit applicable policies and procedures

Policies and procedures should

- » Include process for MTP Utilization Team performing MTP therapy plan audit every six months
- » How MTP charts are selected
- » Identify who is part of the MTP Utilization Team
  - The title of team members
  - Their role within the team

# Compliance Activity for Case Management and Care Coordination

Counties submit  
applicable policies  
and procedures

Policies and procedures should

- » Include case management and care coordination between county CCS program and WCM managed care plans (MCP)
- » Process for method and frequency of communication
- » How collaboration between counties and WCM MCP will occur including resolving issues as they arise

# Compliance Activity for Annual Medical Review (AMR) and Family Participation

## CMS Net *Medical Review Less than 91 Days Report*

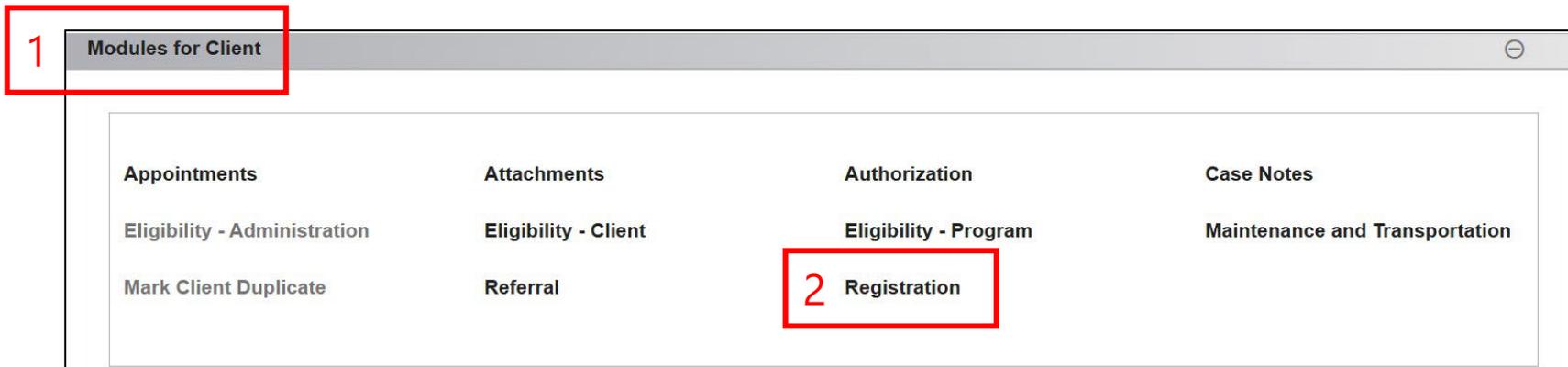
- » If number one was completed for family participation, counties must provide the results from the family survey

# DHCS Responsibilities

<b>Metric</b>	<b>Instructions</b>
Medical Home	DHCS will Pull CMS Net Report
AMR Completion	DHCS will Pull CMS Net Report
Medical Eligibility	DHCS will Pull CMS Net Report
Financial Eligibility	DHCS will Pull CMS Net Report
Residential Eligibility	DHCS will Pull CMS Net Report
CCS Beneficiaries Who Attended an Annual Special Care Center (SCC) Visit	DHCS will Pull MSBI Claims Report

# Medical Home

To meet this compliance activity, a medical home must be entered in the Medical Home field in CMS Net.



# AMR Completion

1

Complete AMR prior to program eligibility end date



2

Offer 1 of the 4 specific family participation criteria

# Other Annual Compliance Activities

There are no changes or new requirements for these annual compliance activities.

Medical Eligibility

Financial  
and  
Residential  
Eligibility

Annual SCC Visit

# Annual Compliance Activities

Provides an overview of all the annual compliance activities.

- » Total number of annual compliance activities
- » County model-type compliance activities applies to
  - » Numerator
  - » Denominator
  - » Data source
  - » Reporting entity

# How to Submit an Annual Report

Reports submitted through the **existing budget portal with specific naming convention**

- » Labeled as “County Name 20YY-20YY Annual Report” where YY is the beginning of the year and the end of the Fiscal year
  - **Example:** *Mono County 2025-2026 Annual Report*

# How to Submit an Annual Report

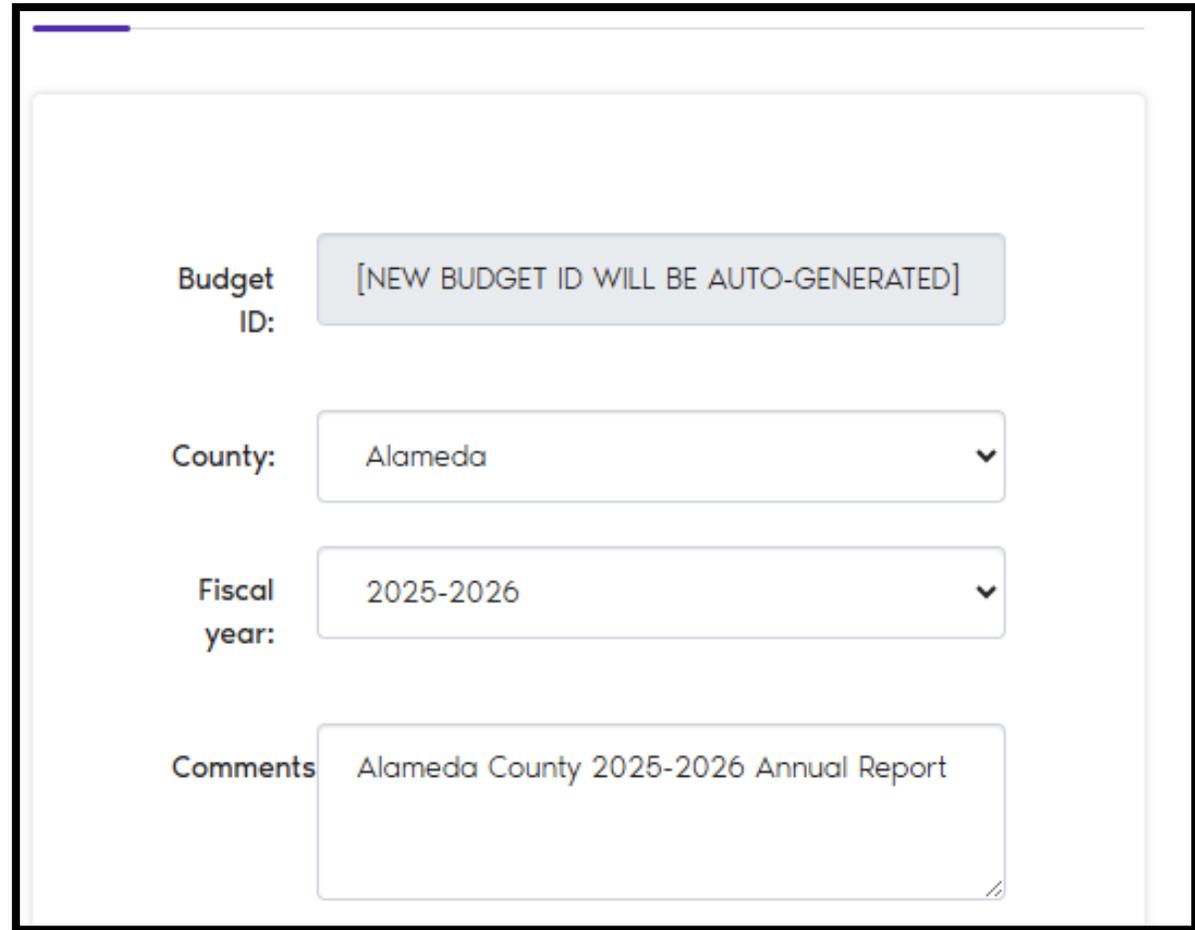


# How to Submit an Annual Report (*cont.*)

## Proper Naming Convention:

County Name 20YY-20YY Annual Report

**Example:** Mono County 2025-2026 Annual Report



The screenshot shows a web form with the following fields:

- Budget ID:** A text input field containing the placeholder text "[NEW BUDGET ID WILL BE AUTO-GENERATED]".
- County:** A dropdown menu with "Alameda" selected and a downward arrow.
- Fiscal year:** A dropdown menu with "2025-2026" selected and a downward arrow.
- Comments:** A text area containing the text "Alameda County 2025-2026 Annual Report".

# How to Submit an Annual Report (cont.)

I acknowledge, that the information submitted for the Plan and Budget is correct and follows the Plan and Fiscal Guidelines.

I hereby certify under penalty of perjury under the laws of the State of California that the forgoing information is, to the best of my knowledge, information and/or belief, that the information submitted is true, accurate, and complete, and that the corresponding documents and records are available and accessible to the California Department of Health Care Services upon request. I am aware that the documents and records may be requested at any time for review. I understand and acknowledge that submitting false information may subject the county to civil and/or criminal penalties under the California False Claims Act (Government Code § 12650) and/or any other state or federal regulation(s) required for County compliance.

# How to Submit an Annual Report *(cont.)*

File Type:

Attach Files:

There are currently no attachments to this filing.

# Resources

- » [California Children's Services \(CCS Compliance, Monitoring, and Oversight Program\)](#)

# Question and Answer Session



Thank you



# Appendix

CMS Net and MSBI Reports  
Utilized for the CCS County Annual Report

# Compliance Activity: Medical Home

## Report Name/Location:

Patient List Without Medical Home (CMS Net)

**Report Description:** Generated report provides list of beneficiaries without a medical home

The total beneficiaries without a medical home is divided by a county's total caseload to determine compliance level

## Report Path

- » Reports
- » Registration
- » Patient List Without Medical Home
- » Select Desired County
- » Run Report

> Appointments

> Authorization

> Caseload

> Miscellaneous

> Provider

~ Registration

### Reports for Registration

Report Name \*

Patient List without Medical Home

County \*

Alpine

Run Report

# Compliance Activity: Medical/Financial/Residential Eligibility Determinations

**Report Name/Location:** CCS Performance Measure (CMS Net)

**Report Description:** Reports generated on an annual and quarterly basis showing compliance percentage of determinations.

High Risk Infant Follow-Up (HRIF) and Neonatal Intensive Care Unit (NICU) determinations are now also included with these reports

## Report Path

- » Reports
- » Miscellaneous
- » CCS Performance Measure
- » Select County
- » Run Report

> Appointments

> Authorization

> Miscellaneous

> Provider

## Miscellaneous Reports

**Report Name \***

CCS Performance Measure

**County \***

Sacramento

Run Report

# Compliance Activity: Medical/Financial/Residential Eligibility Determinations (*cont.*)

Multiple reports are generated. The reports are separated by annual and quarterly reporting periods.

2023-2024	FY_2023-2024_PM2_Annual_Summary_20240928.pdf
2023-2024	FY_2023-2024_PM2_Annual_Summary_HRIF_20240928.pdf
2023-2024	FY_2023-2024_PM2_Annual_Summary_NICU_20240928.pdf
2023-2024	FY_2023-2024_PM2_Quarterly_01_Jul_Sep_Detail_20231228.xls
2023-2024	FY_2023-2024_PM2_Quarterly_01_Jul_Sep_Summary_20231228.pdf
2023-2024	FY_2023-2024_PM2_Quarterly_02_Oct_Dec_Detail_20240328.xls
2023-2024	FY_2023-2024_PM2_Quarterly_02_Oct_Dec_Summary_20240328.pdf
2023-2024	FY_2023-2024_PM2_Quarterly_03_Jan_Mar_Detail_20240627.xls
2023-2024	FY_2023-2024_PM2_Quarterly_03_Jan_Mar_Summary_20240627.pdf
2023-2024	FY_2023-2024_PM2_Quarterly_03_Jan_Mar_Summary_HRIF_20240627.pdf
2023-2024	FY_2023-2024_PM2_Quarterly_03_Jan_Mar_Summary_NICU_20240627.pdf
2023-2024	FY_2023-2024_PM2_Quarterly_04_Apr_Jun_Detail_20240928.xls
2023-2024	FY_2023-2024_PM2_Quarterly_04_Apr_Jun_Summary_20240928.pdf
2023-2024	FY_2023-2024_PM2_Quarterly_04_Apr_Jun_Summary_HRIF_20240928.pdf
2023-2024	FY_2023-2024_PM2_Quarterly_04_Apr_Jun_Summary_NICU_20240928.pdf

# Compliance Activity: Annual Medical Review/Family Participation

## Report Name/Location:

Medical Review Less Than 91 Days (CMS Net)

**Report Description:** The report generated shows active cases with less than 91 days to eligibility end date. The far, right column shows the number of days before an AMR is supposed to be completed, or before a beneficiary's program eligibility end date.

A negative number shows the amount of days past the AMR due date and indicates family participation was not offered.

## Report Path

- » Reports
- » Eligibility
- » Medical Reviews Less Than 91 Days
- » Select County
- » Run Report

» Appointments

» Authorization

» Caseload

» Eligibility

Reports for Eligibility

Report Name\*

Medical Review Less Than 91 Days

County\*

Sacramento

Run Report

# Compliance Activity: Annual SCC/Specialist Visit

## Report Name/Location:

Annual\_SCC\_Specialist\_Visit\_12\_121\_2023 (MSBI)

**Report Description:** The report generates details for beneficiaries who had at least one SCC/specialist visit during the date range and excludes multiple SCC/specialist visits from a particular beneficiary

The total participant count is found on the last row of the generated report. The total

## Report Path

- » Select the folder labeled "Templates"
- » Select the folder labeled "CMS Eligibility"
- » Select the folder labeled "Annual\_SCC\_Specialist\_Visit\_12\_121\_2023"
- » Enter the date range you want to see for authorized SCC/specialist visits
  - The date range should coincide with the annual reporting period
- » Click "County" and select desired county
- » Click "View Report"

Questions?  
Email: [CCSMonitoring@dhcs.ca.gov](mailto:CCSMonitoring@dhcs.ca.gov)

