



Promise Health Plan

Overview: Healthcare Programs for At-Risk Children and Youth

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Today's presenters and panelists



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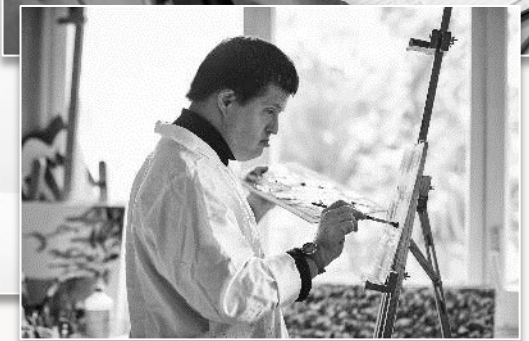
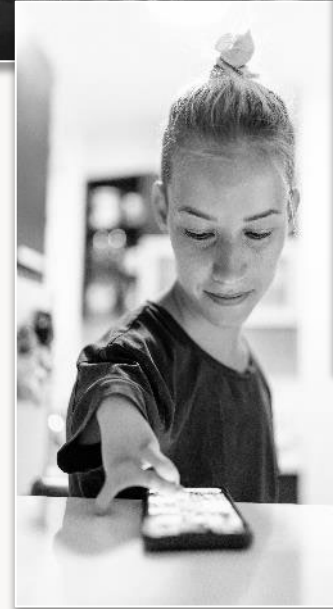
Webinar goal

Provide an overview of programs available for at-risk children/youth (Children w/ Special Health Care Needs and Population of Focus) in California, and ensure providers are aware of the support services Blue Shield Promise provides when you serve members in these programs.

What we'll cover:

- Medi-Cal for Kids & Teens Program
- California Children's Services (CCS) Program
- Regional Centers
 - Early Start (ES) Program
 - Developmental Disability Services (DDS)
- Blue Shield Promise population health management (PHM) children's services

* See Appendix for [links to the programs and resources](#) we cover in this webinar.





Medi-Cal for Kids & Teens

Overview

The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children/youth under age 21 who are enrolled in Medi-Cal.

California refers to the EPSDT benefit as Medi-Cal for Kids & Teens.

The program:

- Provides free services to keep Medi-Cal-enrolled children healthy from birth to age 21.
- Includes check-ups, shots, and health screenings as well as treatments for physical, mental, and dental health problems.
 - Services provided as appropriate by Medi-Cal providers like you, managed care plans like Blue Shield Promise, county and state agencies, and schools.
- Follows the Bright Futures/American Academy of Pediatrics (BF/AAP) periodicity schedule.
 - This periodicity schedule describes the set of screenings and assessments recommended at each well-child visit from infancy through adolescence.
 - The current BF/AAP periodicity schedule can be accessed [here](#).



Millions of children in Medi-Cal are not receiving preventive health services

In 2019, the California State Auditor released a report highlighting the low rates of children's preventive health services in Medi-Cal. A follow-up audit in 2022 underscored that millions of Medi-Cal-enrolled children are still not receiving preventive services. In response, DHCS committed to developing a standardized provider training on Medi-Cal for Kids & Teens.

Since the 2019 California State Audit found:

- 2.4 million children enrolled in Medi-Cal did not receive required preventive services – roughly half of all children under age 21 in Medi-Cal.
- Pre-pandemic, California ranked 40th nationwide for utilization of children's preventive services, or 10 percentage points below the national average.

Since the COVID-19 pandemic, California's preventive services utilization has continued to decline:

1 in 2 children ages 12 – 21 received at least one annual well-care visit.



22% of children under the age of 3 received a developmental screening.



Less than half of children at age 13 were fully immunized.



Medi-Cal for Kids & Teens diagnostic services



Screening services

Screenings are designed to identify health and developmental issues as early as possible

When diagnostic and/or treatment services are indicated because of a screening, providers must take all reasonable steps, including follow-up, to ensure enrollees receive medically necessary diagnostics and treatment **no later than 60 days after screening**



Diagnostic services

A child's diagnosis may be provided by a physician or other qualified practitioner



ACEs / trauma-screening services

Providers may conduct Adverse Childhood Experiences (ACEs) screenings for all children and youth under age 21. ACEs screenings are included in the BF/AAP Periodicity Schedule and encouraged by the California Surgeon General's [ACEs Aware](#) campaign and are reimbursable.

Recommended schedule

- Conduct ACEs screenings once per year, per child.
- ACEs scores >3 indicate high risk for toxic stress (HCPCS G9919). Scores 0-3 indicate low risk (HCPCS G9920).

Screening tool

Providers must use the validated [PEARLS screening tool](#) for ages 0-19 ACEs screening.

Training

Complete and [attest](#) to the [ACEs Aware Training](#) to be eligible for the incentive payment (see box below).

Referrals

Providers who conduct ACEs screenings must provide children with appropriate referrals, when necessary, for diagnosis and treatment without delay.



Supplemental Incentive Payment. Under Proposition 56, Medi-Cal reimburses providers *who completed and attested to the ACES Aware training* with a supplemental incentive payment of \$29.00 for trauma screenings

Services to support access provided free-of-charge by Blue Shield Promise

- Necessary transportation to/from appointments (NEMT or NMT)
 - Related travel expenses
- Language assistance:
 - Oral interpretation for non-English speaking family or child/youth
 - Sign language interpreter services
 - Alternative formats of the member handbook; provider directory; and dental, termination, and appeal notices such as braille, audio format, large print, and accessible electronic format

Providers must offer and provide, as requested, assistance with scheduling appointments for Medi-Cal for Kids & Teens services.

* See Appendix for detailed information on free-of-charge [transportation](#) and [language assistance](#) services.

Your role in informing families of program services

As providers, you must inform all Medi-Cal eligible families of the services available to them under Medi-Cal for Kids & Teens, including:

- Benefits of preventive health and dental care
- Tips and information for choosing a health or dental care provider
- Nature and scope of Medi-Cal for Kids & Teens medical and dental services
- Appointment scheduling and transportation assistance availability
- Need for prompt diagnosis of suspected defects, illnesses, diseases or other conditions
- Availability of treatment for problems diagnosed during screening
- Referrals to other providers for additional services not offered
- Ability to ask for and receive services, even if the services were initially denied

- A combination of face-to-face, oral, and written communication is recommended.
- **Note:** DHCS and Blue Shield Promise are required to identify children underutilizing Medi-Cal for Kids & Teens screenings and preventive services, and ensure outreach to these children

* See Appendix for how DHCS/Blue Shield Promise [cover out-of-state services](#).



California Children's Services (CCS)

What is CCS?

Statewide program providing diagnostic and treatment services, medical case management, and physical and occupational therapy services to children under age 21 who have CCS-eligible medical conditions.

- Administered as a partnership between county health departments and DHCS.
- Authorizes and pays for specific medical services and equipment provided by CCS-approved specialists.
- About 70% of CCS-eligible children are on Medi-Cal , which reimburses their care. Cost of care for the other 30% is split equally between CCS Only and CCS Healthy Families.
 - Funding is a combination of monies appropriated by the county, State General Funds, and the federal government.
 - CCS patients remain enrolled in their Medi-Cal MCP.
- Income is not a factor when: 1) diagnostic services are required to confirm a CCS-eligible medical condition; 2) child is adopted with a known CCS-eligible medical condition; 3) only medically necessary occupational and/or physical therapy services are needed [Medical Therapy Program]; or 4) child is eligible for full Medi-Cal benefits.

Examples of services provided by CCS program

| Medical case management | Medical treatment | Medical therapy program |
|---|---|---|
| <ul style="list-style-type: none"> • Diagnostic services and programs • Care plans • Authorized services coordination • Prior authorizations and ongoing case review • Resource identification • Social services • Transition planning | <ul style="list-style-type: none"> • Physician services • Hospital and surgical care • Physical and occupational therapy • Lab tests and X-rays • Orthopedic and medical equipment • Private duty nursing | <ul style="list-style-type: none"> • Occupational, physical and speech therapies for long-term physical disabilities generally due to neurological and/or musculoskeletal disorders • Additional CCS services include: <ul style="list-style-type: none"> • High Risk Infant Follow-up (HRIF) • Newborn Hearing Screening Program (NHSP) |

- Blue Shield Promise provides comprehensive care management and care coordination.
- Blue Shield Promise and CCS coordinate delivery of non-CCS services. Blue Shield Promise remains responsible for providing primary care and prevention services not related to the CCS-eligible medical condition, so long as the member is in the program.

CSS eligibility requirements overview

Age

Less than 21 years of age.

- Blue Shield Promise will help CCS members transition out of the program due to age or medical need.

Residential

Resident of California

- Apply for services in county of residence.
- Provider services within 30 miles of the patient's home = in-network.

Financial

Meet [financial eligibility criteria](#) when family has:

- Full-scope or share-of-cost Medi-Cal
- Adjusted gross income of \$40,000 or less, or
- Out-of-pocket costs expected to exceed 20% of adjusted gross income for the eligible condition.

Medical

Member has a [CCS-eligible](#) chronic, disabling, or life-threatening medical condition

CCS-eligible chronic, disabling, or life-threatening medical conditions

- Accidents
- Congenital anomalies
- Diseases of:
 - Blood and blood-forming organs
 - Eye, ear, or mastoid
 - Musculoskeletal system and connective tissue
 - Nervous, circulatory, respiratory, digestive, or genitourinary systems
 - Skin and subcutaneous tissues
- Endocrine, nutritional, and metabolic diseases
- Infectious diseases
- Immune disorders
- Immunization reactions
- Neoplasms
- Perinatal morbidity and mortality
- Poisonings
- Violence

CCS intake process

- 1 Doctor/parent/teacher/Blue Shield Promise (anyone) sends referral to County CCS office
- 2 Physician sends diagnosis report of potential CCS eligible medical condition to Blue Shield Promise or County CCS
- 3 County CCS approves medical condition eligibility
- 4 Family or youth fills out and signs application for CCS services
- 5 County CCS Nurse Manager, together with Blue Shield Promise Nurse Manager, coordinates care
- 6 Providers, parents, teachers, or Blue Shield Promise submit Service Authorization Request forms to County CCS
- 7 County CCS sends health care service approvals to providers, family's home, and Blue Shield Promise
- 8 Family schedules appointments and gets medications and equipment

- All CCS eligible condition services, except emergencies or out-of-state services, must receive authorization by the local county CCS office.
- CCS requires that physicians are approved (paneled) prior to providing care.

CCS Medical Therapy Program (MTP)

MTP is a special CCS program that provides physical therapy (PT) and occupational therapy (OT) services for children with disabling conditions, generally due to neurological or musculoskeletal disorders.

Ages 3 to 21 years

At least one (1) of the following conditions:

- Cerebral palsy
- Neuromuscular conditions that produce muscle weakness and atrophy
- Chronic musculoskeletal and connective tissue diseases or deformities
- Ataxias, degenerative neurological disease, or other intracranial processes

Eligibility

Under 3 years

Two (2) or more of the following:

- Exaggerations of, or persistence of, primitive reflexes beyond the normal age (corrected for prematurity)
- Increased deep tendon reflexes (DTRs) that are three (3) or greater
- Abnormal posturing as characterized by the arms, legs, head, or trunk turned or twisted into an abnormal position
- Hypotonicity, with normal or increased DTRs, in infants below one year of age
- Asymmetry of motor findings of trunk or extremities



How to become a CCS paneled provider

What is provider paneling?

- Physicians and most allied health professionals must be CCS-paneled to receive a higher reimbursement rate when they care for CCS eligible patients.
- In the [paneling process](#), CCS reviews and approves a provider by ensuring they meet requirements to provide care for CCS patients.
- It is free to apply, and the process is simple. CCS will respond in approximately two (2) weeks.
- A provider's paneling remains in effect regardless of what facility they are employed within CA or bordering states.



Application process

- Providers are required to submit their [paneling application online](#). Note, ensure that pop-up blockers are disabled.
- Write down the tracking number you receive upon completing your application online. You can track status by returning to [CCS paneling application](#) and entering that number.
- After submitting the application, a fax cover page will be generated showing the list of supporting documentation that must be submitted along with your online application. Supporting documentation and any additional information that is needed to meet paneling requirements can be emailed to ProviderPaneling@dhcs.ca.gov or faxed to **(916) 440-5299**.
- Questions? Contact the Integrated Systems of Care Division, Provider Enrollment Unit at **(916) 552-9105** option 5, then option 2, or email ProviderPaneling@dhcs.ca.gov, or contact your local county CCS office.



Regional Centers

Regional Center overview *

There are 21 Regional Centers in California: Seven (7) Regional Centers in LA and one (1) in San Diego.

- See Appendix for [contact information](#).

Regional Centers...

- Are private, non-profit agencies funded by the State Department of Developmental Services (DDS).
 - Support infants, children, and adults with intellectual and/or developmental disabilities – qualifying developmental condition – regardless of income or citizenship/residency status.
 - Administer the Early Start (0-36 months) and Developmental Disability Services (3-18 years of age) programs.
 - Are responsible for the administration of benefits and services under the Home and Community Based Services (HCBS) waiver program.
 - Blue Shield Promise is responsible for implementing and maintaining systems to identify members with developmental disabilities that may meet the requirements for participation in this waiver and refer accordingly.
- * Regional Centers also provide services to members of all ages with a qualifying developmental condition, including Medi-Cal members. Note, Blue Shield Promise may not be responsible for payment of a set of benefits and services provided by the out of plan agency.



How a patient qualifies for Regional Center services

- A person can qualify for services at any age. However, the person must be diagnosed with an intellectual and/or a developmental disability **before the age of 18**.
- Regional Centers **do not** provide support to persons who are **solely** diagnosed with a mental illness (i.e., depression, schizophrenia), have a learning disability (i.e., dyslexia, auditory processing disorder), are **solely** deaf or blind, or **solely** have a speech disorder.
- Primary diagnosis must be an intellectual and/or developmental disability. A person can be found eligible who is **dually diagnosed** with an intellectual or developmental disability as well as one or more of the disabilities described above.
- A psycho-social assessment is conducted that covers birth and developmental history, family constellation and functioning and the applicant's abilities in the following areas: cognitive, motor, communication, social, emotional, educational/vocational, and self-care/independent living skills.

If you feel someone is delayed and are unsure if they would qualify for Regional Center services, you can refer them for an assessment.

Regional Center intake process

- 1 Local Regional Center "intake" department contacted, and phone screening completed
- 2 Potential client and family interviewed by Intake Service Coordinator (at office and/or home)
- 3 Available medical, psychological, and school records reviewed
- 4 School or community observation may be conducted
- 5 Other clinicians may also assess the potential client (physician, psychologist, OT/PT, etc.)
- 6 Psycho-social intake assessment completed
- 7 Clinician team makes eligibility determination (if ineligible, referred to other resources)
- 8 Eligible clients assigned a Service Coordinator
- 9 An Individual Program Plan is developed with the client, family, and Service Coordinator



Early Start (ES) Program

Regional Center Early Start (ES) services

The Early Start (ES) program is California's early intervention program for infants and toddlers with developmental delays or at risk for having a developmental disability and their families. Early Start services are available statewide and are provided in a coordinated, family-centered system.

Services include:

- | | |
|-----------------------------------|------------------------|
| • Behavior intervention | • Occupational therapy |
| • Early identification assessment | • Physical therapy |
| • Early intervention programs | • Referrals |
| • Family training | • Service coordination |
| • Feeding therapy | • Special instruction |
| • Incontinence supplies | • Speech therapy |
| • Individual Family Service Plan | • Support groups |
| • Nursing supports | • Translation |
| • Nutrition services | • Transportation |





Development Disability Services (DDS)

DDS services, ages 3-21



Ages 3 - 10

- Behavior intervention
- Crisis support
- Day care support
- Incontinence supplies
- IEP support
- In-home respite care
- Overnight/out of home respite
- Parent education classes
- Referrals
- Service coordination
- Social skills training
- Support groups
- Translation
- Transportation



Ages 11 - 17

- Behavior intervention
- Crisis support
- Day care support
- Incontinence supplies
- IEP support
- In-home respite care
- Overnight/out of home respite
- Parent education classes
- Referrals
- Residential homes
- Self-advocacy groups
- Service coordination
- Social skills training
- Some medical equipment
- Support groups
- Translation



Ages 18 - 21

- Adult day services
- Behavior intervention
- Crisis support
- Driver training
- Independent living training
- In-home respite care
- Overnight/out of home respite
- Referrals
- Residential homes
- Self-advocacy groups
- Service coordination
- Social skills training
- Some medical equipment
- Supported employment
- Supported living



Blue Shield Promise
population health
management (PHM)
children's services

How Blue Shield Promise supports out-of-plan services

California Children's Services (CCS)

- Identify and refer members to County CCS
- Authorize and pay for non-CCS eligible conditions (primary care, specialty care, prescriptions, medical equipment, and other supplies)
- Refer to CCS-approved providers and facilities in our network
- Provide care coordination and case management
- Assist with coordination of transition planning to adult CCS providers before age 18 and non-CCS providers before age 21
- Assist with adult living arrangements, legal decisions, and educational, social, and recreational services

Regional Centers (ES and DDS)

- Identify and refer members to local Regional Center
- Authorize and pay for medically necessary needs and prescriptions not provided by Regional Center
- Ensure members are referred for evaluation
- Provide care coordination and case management of medically covered services identified in the Individual Family Service Plan or Individual Program Plan

How we support out-of-plan services *continued*

For members under 21 years old (Medi-Cal for Kids and Teens), children with special healthcare needs and/or enrolled to CCS, EIES-DDS Programs, Blue Shield Promise provides the following support:


- Ensures members eligible for a program listed above, are included and fully addressed in our population health management strategy and basic population health management services.
- Collaborates with program providers to help determine medically necessary diagnostic, preventive services, treatment, and treatment plans for Blue Shield Promise members. Provides case management and care coordination accordingly.
- Identifies individuals who may need or who are receiving services from out-of-plan providers and/or government agency programs to ensure coordinated service delivery and efficient and effective joint case management for services.
- Refers members with CCS-eligible conditions to the County CCS and developmental disabilities to a Regional Center for evaluation and for access to non-medical services provided through the County CCS and Regional Centers such as but not limited to, respite, out-of-home placement, and supportive living.
- Assures that contracted providers continue to provide all medically necessary covered services to a Blue Shield Promise member until CCS or Early Start/DDS-eligibility is confirmed.

* See Appendix for a detailed list of services Blue Shield Promise provides to [support out of plan programs](#).

Population Health Management Referral Form

- To refer a member, complete the [Population Health Management Referral Form](#).
 - See fax number on the form for where to submit.
 - This form is available from the Blue Shield Promise provider website > Our programs > [Population health management programs](#)
- Questions?

Contact Blue Shield Promise Children’s Services Team at MCSPHMChildrensLeaders@blueshieldca.com



Population Health Management Referral From

| Member Information | | |
|---|--|-----------|
| Date of referral: | Member ID: | |
| Member first name: | Member last name: | |
| Date of birth: | Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | |
| Address: | City: | ZIP code: |
| Member phone number: | Preferred spoken language: | |
| Type of Case Management services needed (check one) | | |
| <input type="checkbox"/> Disease management | | |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Congestive Heart Failure (CHF) | |
| <input type="checkbox"/> Cardiovascular Disease | <input type="checkbox"/> Depression | |
| <input type="checkbox"/> Chronic Obstructive Pulmonary Disease (COPD) | <input type="checkbox"/> Diabetes | |
| <input type="checkbox"/> Complex Case Management | | |
| <input type="checkbox"/> Maternity Case Management | | |
| <input type="checkbox"/> Children with Special Health Care Needs (CSHCN) | | |
| <input type="checkbox"/> California Children’s Services (CCS) | | |
| <input type="checkbox"/> Early Start-Early Intervention, Developmental Disability Services (EIES-DDS) | | |
| <input type="checkbox"/> Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) | | |
| Reason for case management services (check all that apply) | | |
| <input type="checkbox"/> Difficulty controlling symptoms | <input type="checkbox"/> Medication or treatment non-compliance | |
| <input type="checkbox"/> Assistance with self-management | <input type="checkbox"/> Poly-pharmacy | |
| <input type="checkbox"/> Assistance with care coordination | <input type="checkbox"/> Poorly controlled chronic conditions | |
| <input type="checkbox"/> Multiple hospital admissions and ER visits | <input type="checkbox"/> Caregiver or social issues | |
| Diagnosis: | | |
| Additional information: | | |
| Referral source information | | |
| Physician name: | <input type="checkbox"/> Primary care provider <input type="checkbox"/> Specialist | |
| Phone number: | IPA: | |

Fax form with pertinent medical records and information to:
 Los Angeles County: (323) 889-6575
 San Diego County: (619) 219-3302



Appendix

Medi-Cal for Kids & Teens periodic screenings

Reimbursable screening services

- Comprehensive health and developmental history
- Comprehensive, unclothed physical exam, including nutritional, height/ weight, and BMI assessment
- Behavioral health screening including depression screening and tobacco, alcohol, or drug use
- Developmental screening for physical and mental health using standardized screening tools
- Age-appropriate immunizations (per BF/AAP periodicity schedule and Advisory Committee on Immunization Practices (ACIP) recommendations)
- Age-appropriate laboratory tests, including blood lead screening test
- Oral health screenings and referrals to a dentist (beginning by age 1 or eruption of first tooth)
- Age-appropriate vision and hearing screenings
- Health education and anticipatory guidance for child and caregiver

- Screenings are designed to identify health and/or development issues ASAP.
- Any qualified Medi-Cal physician/practitioner can conduct these screenings.
- Families do not need to request these screenings, and prior authorizations are not permitted.
- When a screening indicates that diagnostic and/or treatment services are needed, providers must take all reasonable steps to ensure these take place **within 60 days after screening.**

* See Appendix for [subset of required Medi-Cal for Kids & Teens screenings & services](#) and a list of available [school-based services](#).

Behavioral health and substance use disorder (SUD) services

Medi-Cal for Kids & Teens covers all medically necessary mental health services for Medi-Cal enrolled children/youth under age 21. A diagnosis is not required to receive mental health services. There are different systems leveraged to deliver mental health services depending on level of need. Note that If a child/youth meets the criteria for SMHS, they should also be receiving NSMHS from the Blue Shield Promise, except in cases where the No Wrong Door policy applies.

| | System | Referral |
|---|--|---|
| 1 | Non-specialty Mental Health Services (NSMHS): Managed care plan is responsible for providing medically necessary NSMHS. | <ul style="list-style-type: none"> Call Blue Shield Promise Member Care Coordinators at (888) 297-1325. |
| 2 | <p>Specialty mental health services (SMHS)*: County mental health plans are responsible for providing medically necessary SMHS.</p> <p>Medi-Cal members can self-refer. Blue Shield Promise can also work with a member’s provider to help coordinate resources.</p> | <ul style="list-style-type: none"> Los Angeles County Mental Health Access Center Helpline (800) 854-7771, Option 1. San Diego County Mental Health Access & Crisis Line (888) 724-7240. |
| 3 | <p>SUD: Provided via county-run Drug Medi-Cal (DMC) or Drug Medi-Cal Organized Delivery System (DMC-ODS) programs.</p> <ul style="list-style-type: none"> Some SUD services are provided by managed care plans. For more information, contact Blue Shield Promise Member care. | <ul style="list-style-type: none"> Los Angeles County Substance Abuse Service Helpline (Drug Medi-Cal Organized Delivery System) (844) 804-7500. San Diego County Drug Medi-Cal Organized Delivery System (888) 724-7240. |

* See Appendix for information on [NSMHS](#) and [SMHS](#).

Mental health services screening and transition tools

Providers are required to use:

- [Youth Screening Tool for Medi-Cal Mental Health Services](#) for children and youth under age 21 who are not currently receiving mental health services and who contact Blue Shield Promise or the county mental health plan seeking mental health services.
- [Transition of Care Tool for Medi-Cal Mental Health Services](#) to ensure enrollees who are receiving mental health services from one delivery system receive timely transition of care referrals or service referrals to their managed care plan or county mental health plan.
 - Both county mental health plan and managed care plan providers will leverage the Transition of Care Tool statewide to better identify appropriate behavioral health delivery systems and services that are child and family-centered.

SMHS access criteria: Child must meet either criteria 1 or 2 below

1. High risk for a mental health disorder due to experience of trauma (i.e., scores in the high-risk range under a trauma screening tool, involvement in the child welfare system, juvenile justice involvement, or experiencing homelessness) **OR**
2. Meets both 2a) and 2b) requirements below:
 - a) Child has at least one of the following:
 - i. Significant impairment
 - ii. Reasonable probability of significant deterioration in an important area of life functioning
 - iii. Reasonable probability of not progressing developmentally as appropriate
 - iv. Need for SMHS, regardless of presence of impairment, that are not included within the mental health benefits that a Medi-Cal managed care plan is required to provide **AND**
 - b) Child's condition as described above is due to **one of the following**:
 - i. Diagnosed mental health disorder
 - ii. Suspected mental health disorder that has not yet been diagnosed
 - iii. Significant trauma placing the child at risk of a future mental health condition, based on the assessment of a licensed mental health professional.

For more information, please review [BHIN 21-073](#).

SUD services provided by Blue Shield Promise

Though most SUD services are provided via DMC or DMC-ODS for children and youth, Blue Shield Promise provides:

SABIRT screening starting at age 11, for children and youth who are at risk of developing a SUD.

Early intervention SUD services for children and youth determined to be at risk of SUD (e.g., any service component covered under the outpatient level of care)

Medications for Addiction Treatment (MAT) available in primary care, inpatient hospital, and emergency departments

Emergency services to stabilize the child (including voluntary inpatient detoxification)

- Some children may qualify for both SMHS and SUD services if they have a co-occurring SUD and mental health condition. Providers are required to coordinate and collaborate across delivery systems to ensure clinical integration between county mental health plans, DMC or DMC-ODS counties, and managed care plans, and to ensure non-duplicative services.

Resources

| Medi-Cal for Kids & Teens | California Children's Services | Regional Centers | Regional Centers Early Start |
|--|---|---|--|
| <ul style="list-style-type: none"> Website | <ul style="list-style-type: none"> Website | <ul style="list-style-type: none"> Website | <ul style="list-style-type: none"> Website |
| <ul style="list-style-type: none"> Provider information | <ul style="list-style-type: none"> County offices list | <ul style="list-style-type: none"> Los Angeles county directory | <ul style="list-style-type: none"> Contact numbers |
| <ul style="list-style-type: none"> Member information | <ul style="list-style-type: none"> Medical eligibility | <ul style="list-style-type: none"> Patient zip-code RC look-up | <ul style="list-style-type: none"> Healthcare providers brochure |
| | <ul style="list-style-type: none"> Eligibility application (English) | <ul style="list-style-type: none"> Medical information | <ul style="list-style-type: none"> FAQ |
| | <ul style="list-style-type: none"> Eligibility application (Spanish) | <ul style="list-style-type: none"> Early signs of autism video | <p>Free family resources:</p> |
| | <ul style="list-style-type: none"> Potential clients' pamphlet | <ul style="list-style-type: none"> Developmental Disability Basics Child Development | <ul style="list-style-type: none"> Reasons for concern pamphlet |
| | <ul style="list-style-type: none"> New referral request | <ul style="list-style-type: none"> Parent information | <ul style="list-style-type: none"> Family guide to intervention |
| | <ul style="list-style-type: none"> Service authorization request | | <ul style="list-style-type: none"> Family introduction to Early Start |
| | <ul style="list-style-type: none"> Authorizations and claims info | | |
| | <ul style="list-style-type: none"> Special Care Centers | | |
| | <ul style="list-style-type: none"> High-risk infant follow-up | | |
| | <ul style="list-style-type: none"> Pediatric Palliative Care | | |
| | <ul style="list-style-type: none"> Paneling standards | | |
| | <ul style="list-style-type: none"> Paneling application | | |

Medi-Cal for Kids & Teens screening & services



| Subset of required Medi-Cal for Kids & Teens screenings & services | |
|--|--|
| <ul style="list-style-type: none">• Blood lead screening services | <ul style="list-style-type: none">• Vision screening services |
| <ul style="list-style-type: none">• Developmental screening services | <ul style="list-style-type: none">• Hearing screening services |
| <ul style="list-style-type: none">• Autism Spectrum Disorder (ASD) screening services | <ul style="list-style-type: none">• Oral health screening services |
| <ul style="list-style-type: none">• Depression screening services (for adolescents and postpartum individuals) | <ul style="list-style-type: none">• Adverse Childhood Experiences (ACEs) trauma screening services |
| <ul style="list-style-type: none">• Dyadic services | <ul style="list-style-type: none">• Alcohol and drug screening, assessment, brief interventions and referral to treatment (SABIRT) |

Medi-Cal for Kids & Teens school-based services



Medi-Cal-enrolled children and youth under age 21 can receive the following Medi-Cal covered services from schools:

- Nutritional assessments and counseling treatments
- Vision assessments and screenings
- Physical, respiratory, occupational, and speech-language therapy
- Audiology assessment, treatments, and hearing screening tests
- Psychology and counseling services and psychosocial assessments
- Orientation and mobility services
- Developmental assessments
- Specialized medical transportation
- Health education and anticipatory guidance
- School health aide services (administration of specialized physical health care services and assistance with Activities of Daily Living)

Transportation services to support access

| | |
|---|--|
|  | <p>Necessary transportation to and from appointments</p> <ul style="list-style-type: none">• Blue Shield Promise offers and assists with arranging non-emergency medical transportation (NEMT) and non-medical transportation (NMT) so children/youth under age 21 can receive Medi-Cal for Kids & Teens services.<ul style="list-style-type: none">• NEMT is transportation by ambulance, wheelchair van, or litter van for children whose medical and physical condition does not allow them to travel by public or private transportation.<ul style="list-style-type: none">• Providers must submit a Physician Certification Statement (PCS) form to Blue Shield Promise for NEMT prior authorization.• NMT is private or public transportation; families or the child/youth will need to attest to their provider verbally or in writing that they have an unmet transportation need and all other currently available resources have been reasonably exhausted.<ul style="list-style-type: none">• Providers need to confirm with the Blue Shield Promise if prior authorizations are required for NMT services, as it is up to the managed care plan to determine.• Families or the child/youth may request or refuse transportation assistance at any time. |
|  | <p>Related travel expenses</p> <ul style="list-style-type: none">• Blue Shield Promise covers related travel expenses for medically necessary services at the child/youth's request, including the cost of meals and lodging for a child and parent, caretaker, relative, friend, or attendant for the purpose of obtaining needed medical care |

Language assistance services to support access

| | |
|---|--|
|  | <p>Language assistance</p> <ul style="list-style-type: none">• Blue Shield Promise provides oral interpretation for any non-English speaking family or child/youth, free of charge, at all medical encounters (such as an outpatient visit) and certain non-medical encounters (such as scheduling appointments)• Sign language interpreter services must also be provided during all medical and certain non-medical encounters.• Blue Shield Promise translates the member handbook and provider directory into prevalent non-English languages when at least 3,000 or 5% of the plan’s members speak a non-English language, whichever is lower<ul style="list-style-type: none">• The provider directory must include cultural and linguistic capabilities of each provider, including languages (including ASL) offered by the provider or a skilled medical interpreter at the provider’s office, or access to language line interpreters.• Families, children and youth, and providers can call the Office of Civil Rights at (916)-440-7370, 711 (California State Relay) or the Medi-Cal Member Help Line at 1-800-541-5555 for assistance accessing language services.• Blue Shield Promise provides alternative formats of the member handbook; provider directory; and dental, termination, and appeal notices such as braille, audio format, large print (no less than 20-point Arial font), and accessible electronic format (e.g., data CD). |
|  | <p>Appointment scheduling assistance</p> <ul style="list-style-type: none">• Providers must offer and provide, as requested, assistance with scheduling appointments for Medi-Cal for Kids & Teens Services. |

Out-of-state services for Medi-Cal for Kids & Teens

DHCS and Blue Shield Promise will cover out-of-state services if the service(s) are covered in state, and:

- Service is required because of an emergency;
- Child is out of state and the child's health would be endangered if they were required to travel to their home state;
- Service is more readily available in another state; **or**
- Child lives in an area that often utilizes services in another state (i.e., if area borders another state)

Non-specialty mental health services (NSMHS)*

NSMHS (formerly known as Mild to Moderate services) include a variety of behavioral interventions that promote the functioning of children and youth and prevent or minimize the adverse effects of behaviors that interfere with learning and social interaction. Managed care plans must provide or arrange all medically necessary NSMHS for children and youth under age 21 regardless of their level of distress or impairment, or the presence of a diagnosis.

NSMHS includes:

- Mental health evaluation and treatment, including individual, group and family psychotherapy
- Dyadic services for children and their caregiver(s)
- Psychological and neuropsychological testing, when clinically indicated to evaluate a mental health condition
- Outpatient services for purposes of monitoring drug therapy
- Psychiatric consultation
- Outpatient laboratory, drugs (not including outpatient pharmacy benefits covered under Medi-Cal Rx), supplies, and dietary supplements (e.g., folic acid, vitamin D, vitamin B12)

Provider types include:

- Licensed Clinical Social Worker
- Licensed Professional Clinical Counselor
- Licensed Marriage and Family Therapist
- Licensed Psychologist
- Associate provider types may render services under a supervising clinician
- Psychiatric Physician Assistant
- Psychiatric Nurse Practitioner
- Psychiatrist (as consistent with the practitioner's training and licensing requirements)

* For more information, please review the [Non-Specialty Mental Health Services: Psychiatric and Psychological Services Provider Manual](#)

County Specialty Mental Health Services (SMHS)

Each county mental health plan must provide or arrange all medically necessary SMHS for children and youth under age 21 enrolled in Medi-Cal who require more intensive mental health services. County mental health plans must make individualized determinations of each child's need for SMHS. Examples include, but are not limited to:

- Intensive Care Coordination (ICC) (e.g., targeted case management for children in SMHS)
- Intensive Home-Based Services (IHBS) (e.g., interventions designed to correct or ameliorate conditions that interfere with functioning and improve the family's ability to help the child successfully function at home/school/community)
- Therapeutic Foster Care (TFC) (e.g., short-term, trauma-informed, intensive SMHS for children with complex emotional and behavioral needs. In TFC, children are placed with trained and intensely supervised TFC parents)
- Therapeutic Behavioral Services (TBS) (e.g., short-term, intensive services for children with a SED)
- Psychiatric Health Facility Services and/or Inpatient Hospital Services (e.g., 24-hour inpatient care)
- Crisis Intervention, Stabilization, and/or Residential Services (e.g., community-based crisis intervention, short-term)
- Day Treatment Intensive and/or Rehabilitation Services (e.g., group therapy, skill building groups, short-term)
- Peer Support Services (optional)
- NSMHS – if a child meets the criteria for SMHS, then they should also be receiving any NSMHS from the mental health plan, except in cases where the No Wrong Door policy applies



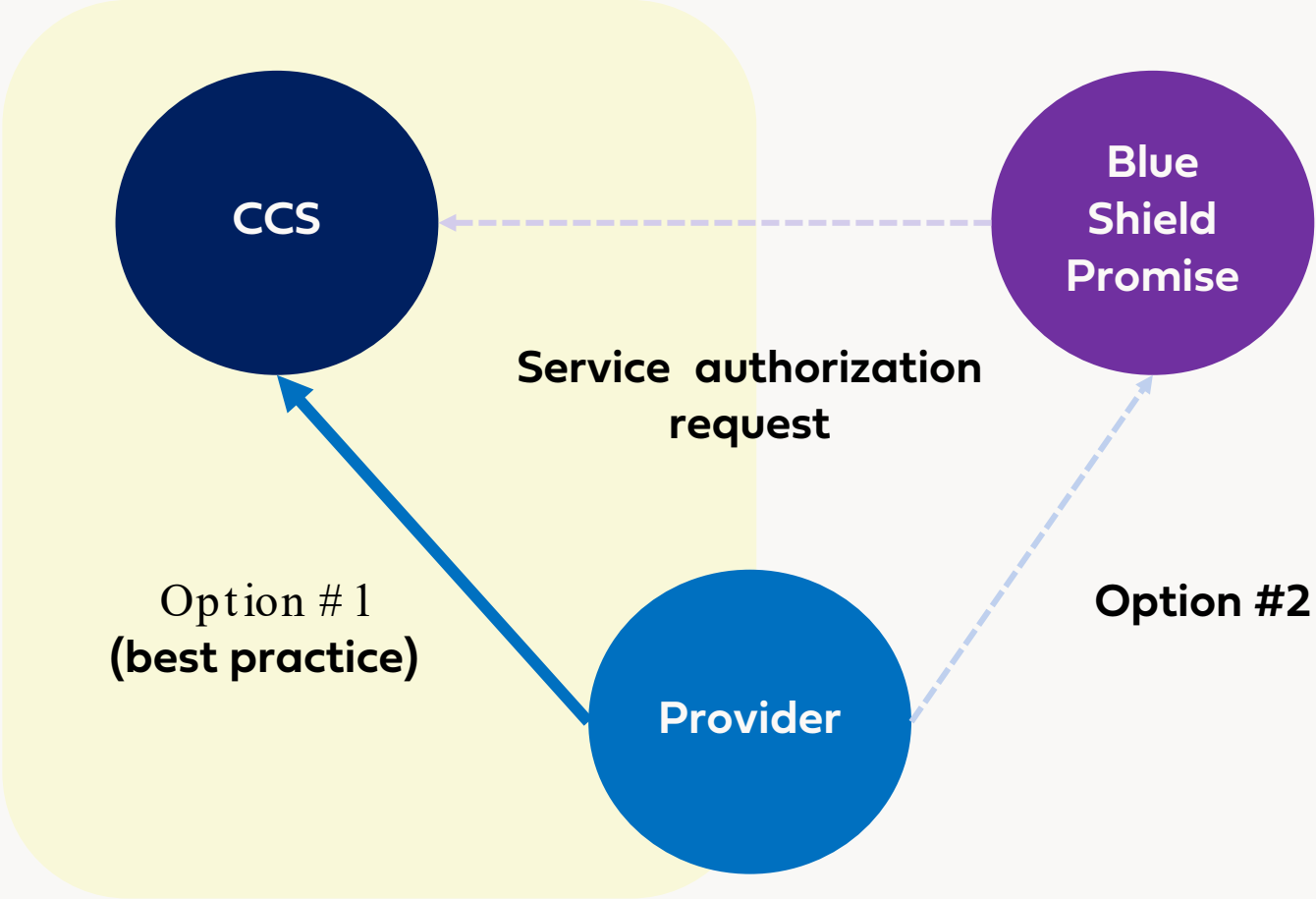
SMHS may be provided during an assessment period for the child prior to the determination of a diagnosis or whether SMHS access criteria are met (see next slide for access criteria).

CSS-provided services for eligible conditions

- CCS eligibility diagnostic testing
- High-risk infant follow-up
- Home and school consultation
- Home health care
- Hospital and surgical care
- Lab tests and X-rays
- Medical and orthopedic equipment
- Medications
- Neonatal Intensive Care Units

- Neuropsychological testing
- Nurse Case Manager care coordination
- Occupational therapy
- Physician services
- Private duty nursing
- Physical therapy
- Social worker services
- Special Care Centers
- Speech therapy

Submit service authorizations requests directly to CCS



Benefits for paneled providers and their patients

- **Help kids and their families** obtain much-needed care
- **Receive faster and higher reimbursement** from the county CCS program
- **Obtain reimbursements** for services offered to children who otherwise would have limited coverage
- **Save administrative time** so you can focus on your patients
- **Boost your presence and referrals** through Blue Shield Promise's provider search tool option to "include California Children's Services"
- **Strengthen our partnership** through CCS referrals
- **Increase patient volume** through Blue Shield Promise as a CCS-paneled provider
- **Submit fewer authorizations** (based on services)
- **Get assistance** with in-patient case management from Blue Shield Promise, and care coordination support from the county CCS and Blue Shield Promise

Los Angeles Regional Centers

[Eastern Los Angeles Regional Center](#)

Executive Director: Gloria Wong
Phone: 626-299-4700
TTY: 916-978-6286
Fax: 626-281-1163
Early Start intake: 626-299-4777
Address: 1000 South Fremont Avenue
Alhambra, CA 91802
Service area: Eastern Los Angeles county including Alhambra and Whittier

[Frank D. Lanterman Regional Center](#)

Executive Director: Melinda Sullivan
Phone: 213-383-1300
TTY: N/A
Fax: 213-383-6526
Early Start intake: 213-252-8610
Address: 3303 Wilshire Blvd., Suite 700
Los Angeles, CA 90010
Service area: Central, Glendale, Hollywood-Wilshire, and Pasadena

[Harbor Regional Center](#)

Executive Director: Patrick Ruppe
Phone: 310-540-1711
TTY: N/A
Fax: 310-540-9538
Early Start intake: 310-543-7927
Address: Del Amo Business Plaza
21231 Hawthorne Boulevard
Service area: Bellflower, Harbor, Long Beach, and Torrance

[North Los Angeles County Regional Center](#)

Executive Director: Ruth Janka
Phone: 818-778-1900
TTY: N/A
Fax: 818-756-6140
Early Start intake: 818-778-1900
Address: 9200 Oakdale Ave, Suite 100
Chatsworth, CA 91311
Service area: East Valley, San Fernando, and West Valley

[San Gabriel/Pomona Regional Center](#)

Executive Director: Dr. Jesse Weller
Phone: 909-620-7722
TTY: N/A
Fax: N/A
Early Start intake: 909-620-7722
Address: 75 Rancho Camino Drive
Pomona, CA 91766
Service area: El Monte, Monrovia, Pomona, and Glendora

[South Central Los Angeles Regional Center](#)

Executive Director: Dexter A. Henderson
Phone: 213-744-7000
TTY: N/A
Fax: N/A
Early Start intake: 213-744-8807
Address: 2500 S. Western Avenue
Los Angeles, CA 90018
Service area: Compton, San Antonio, South, Southeast, and Southwest

[Westside Regional Center](#)

Executive Director: Jane Borochoff
Phone: 310-258-4000
TTY: N/A
Fax: 310-649-1024
Early Start intake: 310-258-4096
Address: 5901 Green Valley Circle, Ste 320
Culver City, CA 90230
Service area: Inglewood and Santa Monica-West

[San Diego Regional Center](#)

Executive Director: Mark Klaus
Phone: 858-576-2996
TTY: N/A
Fax: 858-576-2873
Early Start intake: 858-496-4318
Address: 4355 Ruffin Road, Suite 200
San Diego, CA 92123-1648
Service area: Imperial and San Diego counties

How we support out-of-plan services

| CCS (to age 21) | Regional Center (ages 3-22) | Early Start (to age 3) |
|------------------------------------|-------------------------------|---------------------------------|
| Behavioral health (counseling) | Adult day services | Behavior intervention |
| CCS eligibility diagnostic testing | Behavior intervention | Early identification assessment |
| High-risk infant follow-up | Crisis support | Early intervention programs |
| Home and school consultation | Day care support | Family training |
| Home health care | Driver training | Feeding therapy |
| Hospital and surgical care | Incontinence supplies | Incontinence supplies |
| Lab tests and X-rays | Independent living training | Individual Family Service Plan |
| Medical/orthopedic equipment | IEP support | Nursing supports |
| Medications | In-home respite care | Nutrition services |
| Neonatal Intensive Care Units | Overnight/out of home respite | Occupational therapy |
| Neuropsychological testing | Parent education classes | Physical therapy |
| Nurse Case Manager | Referrals | Referrals |
| Occupational therapy | Residential homes | Service coordination |
| Physician services | Self-advocacy groups | Special instruction |
| Private duty nursing | Service coordination | Speech therapy |
| Physical therapy | Social skills training | Support groups |
| Social worker services | Some medical equipment | Translation |
| Special Care Centers | Support groups | Transportation |
| Speech therapy | Supported employment | |
| | Supported living | |
| | Translation | |
| | Transportation | |

Early Start (ES) Program and Developmental Disability Services (DDS)

Regional Centers administer the ES program and DDS services.

- DHCS requires health plans to identify and refer members to local Regional Centers for evaluation when they have or are at risk development disabilities
- Doing so helps promote access to non-medical services such as early intervention/early start programs, respite, out-of-home placement and supportive living.
- DHCS and the Regional Centers provide health plans with information on members currently enrolled in a Regional Center.
- Pediatric health care providers are critical in the successful implementation of this mandate through the timely referral of children with suspected early delays.
 - Some behaviors are more readily identified as problems because they are observable whereas other problems may not be as apparent, such as depression and anxiety. For this reason, a careful review of a child's developmental and behavioral functioning is necessary at each well child encounter.

Regional Center services

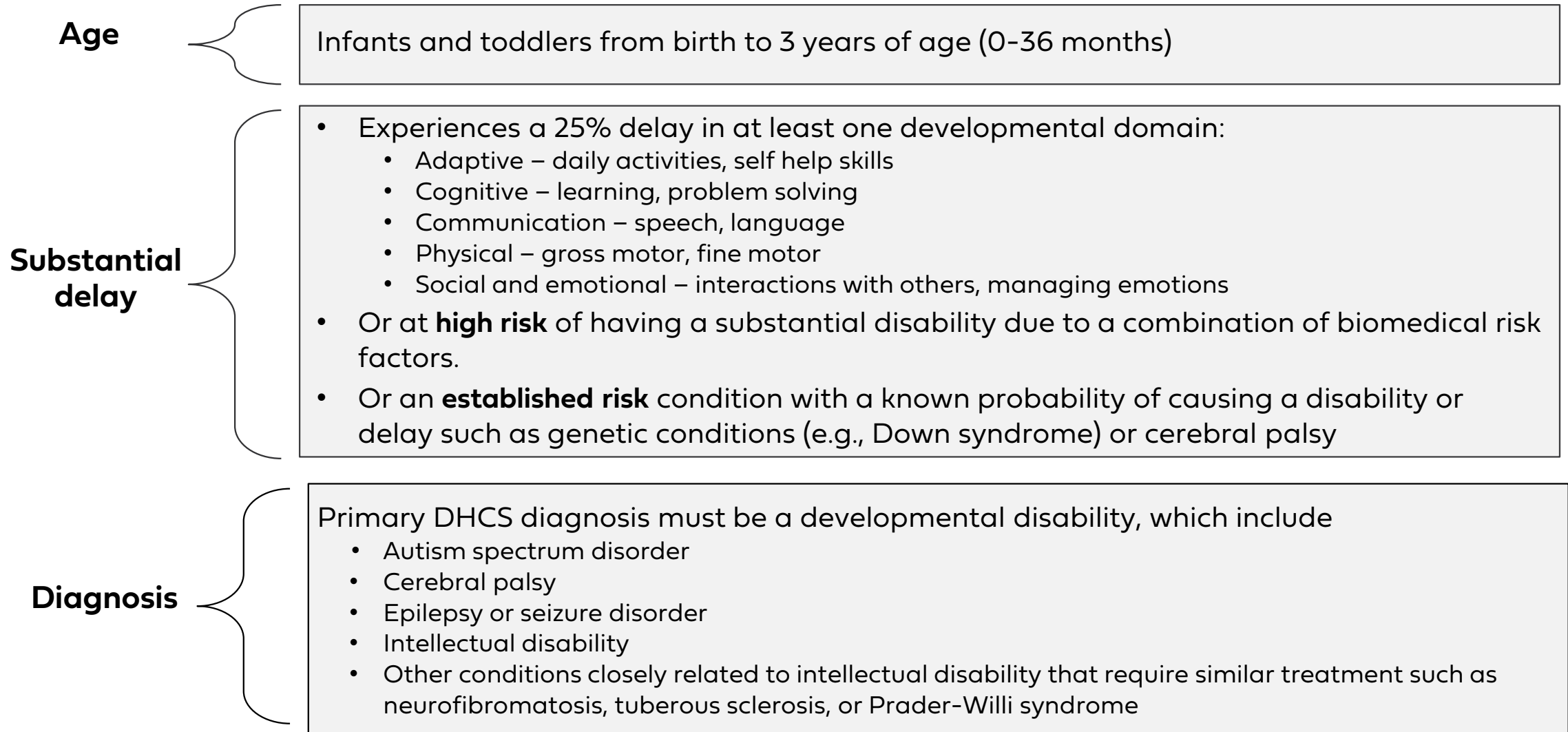
| Regional Center services | Generic social service programs* |
|---|--|
| <ul style="list-style-type: none">• Case management• Assessment and evaluation• Information and referral• Advocacy• Quality assurance monitoring of vendor programs | <ul style="list-style-type: none">• Public schools for school age children (special education up to 22 years of age)• Medi-Cal which pays for medical needs/prescriptions• Public transportation/MTA• In-home Supportive Services• Intervention by the Department of Mental Health• Child Day Care Centers/Early Head Start |

* Regional Centers are mandated to access "generic" social services program used by the public.

Regional Center services *continued*

| Vendor programs | Other services |
|---|--|
| <ul style="list-style-type: none">• Vocational adult day programs• Residential placement• Independent living services• Behavior management programs• Respite services• Transportation services• Sheltered workshops• Employment Training | <ul style="list-style-type: none">• Family Resource Center<ul style="list-style-type: none">• Parent support groups• Educational parent trainings• Service navigation support• Educational advocacy support<ul style="list-style-type: none">• Help with finding needed community resources• Trainings<ul style="list-style-type: none">• Behavior management• Nutrition & wellness• Presentations in the community• Dental clinics• Support to judicially involved and incarcerated consumers |

ES eligibility requirements overview*



* Regional Centers don't provide services to persons **solely** diagnosed.

DDS eligibility requirements overview*

Age

A person may receive services at any age, but the developmental disability diagnosis (DDS), also known as the Lanterman Act, must occur from 3 years and before the member's 18th birthday.

Substantial disability

- A condition which results in major impairment of cognitive and/or social functioning, representing sufficient impairment to require interdisciplinary planning and coordination of services to assist the individual in achieving maximum potential; **AND**
- The existence of significant functional limitations in three or more of the following areas of major life activity, as appropriate to the person's age:
 - Receptive and expressive language
 - Learning
 - Self-care
 - Mobility
 - Self-direction
 - Capacity for independent living
 - Economic self-sufficiency.

Diagnosis

Primary DHCS diagnosis must be a developmental disability, which include:

- Autism spectrum disorder
- Cerebral palsy
- Epilepsy or seizure disorder
- Intellectual disability
- Other conditions closely related to intellectual disability that require similar treatment such as neurofibromatosis, tuberous sclerosis, or Prader-Willi syndrome

* Regional Centers don't provide services to persons **solely** diagnosed.