California Children's Services (CCS) Overview

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CCS Title V Needs Assessment Stakeholder's Meeting
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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

- Family income of \$40,000 or less
- Eligible for Medi-Cal
- Out-of-pocket medical expense more than 20 percent of family's adjusted gross income (AGI)

Residential

Services coordinated by county of residence

Medical

- CCS-eligible condition
- Need the Medical Therapy Program (MTP)* for PT/OT/MTU

^{*} No income requirement for MTP eligibility

Medical Eligibility – Title XXII

- 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.

Medical Eligibility – Title XXII (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

Referrals to CCS

- Referrals to CCS can be made by anyone, including:
 - Hospital
 - Physician
 - School nurse
 - Family
- Referrals are sent to the appropriate county office where the child resides



CCS Service Providers

Hospitals **Specialty Care Centers Pediatric Specialists Pharmacies DME Providers** Other Provider Types

Provider Standards

CCS Provider Paneling

Hospitals

Neonatal and Pediatric Intensive Care Units

Outpatient Special Care Centers

Healthcare Delivery Systems

Healthcare Delivery Systems

Improving Care Coordination Through an Organized Care Delivery System

- California Children's Services (CCS) Redesign:
 Whole-Child Model (WCM)
- 1115 Waiver CCS Demonstration Project

CCS Redesign: WCM

Bifurcated delivery system results in lack of coordination and integration when accessing care from both systems:

Specialty care is received from the CCS Fee for Service (FFS) system for the CCS condition

Primary care and behavioral health services are received from the managed care health plan (MCP)

WCM

Integrates Medi-Cal managed care and CCS FFS delivery systems, resulting in:

Improved care coordination for primary, specialty, and behavioral health services for CCS and non-CCS conditions

Care that is consistent with CCS program standards by CCS-paneled providers, specialty care centers, and pediatric acute care hospitals

Increased consumer protections, such as continuity of care, oversight of network adequacy standards and quality performance

CCS Redesign: WCM

Goals

- Implement patient- and family-centered approach
- Improve care coordination
- Maintain quality
- Streamline care delivery
- Build on lessons learned
- Be cost-effective

Implementation Date

- Phase 1 July 2018, 6 counties
- Phase 2 Jan. 2019, 15 counties

WCM Transition by Numbers

2 phases

21 counties

30,000 children and youth

5 plans

1115 Waiver CCS Demonstration Project

Goals

- Improve care coordination and remove delivery of fragmented health care
- Improve health outcomes
- Improve patient and provider satisfaction
- Establish clear provider and State accountability
- Maintain a family-centered delivery system
- Preserve existing CCS Regional Provider Network

1115 Waiver CCS Demonstration Project

Health Plan San Mateo - started April 2013; now part of WCM

- Medi-Cal Managed Care Plan model
- Comprehensive health care to about 1400
 CCS-eligible clients; all health conditions covered
- Manages and coordinates a full range of health care services for the "whole" child, including periodic health assessments, immunizations, primary health care services, and specialty health care services

1115 Waiver CCS Demonstration Project

Rady Children's Hospital, San Diego

- Operational date July 2018
- Accountable Care Organization (ACO) model
- Includes 5 CCS health conditions: Hemophilia,
 Cystic Fibrosis, Sickle Cell, Leukemia, Diabetes
- Population size: about 400

Evaluation

WCM

- Will be conducted by an independent entity
- Data will be collected on standardized performance measures - comparing WCM MCPs to CCS Program prior to implementation; WCM vs. non-WCM counties
- Evaluation results due to state legislature on Jan. 1, 2021

1115 Waiver Demonstration Project

Evaluation design approved by CMS

Performance Measures

2017 Performance Measures Technical Workgroup

Goal

To align and standardize performance measures across programs for Children and Youth with Special Health Care Needs (CYSHCN)

Programs

- CCS
- 1115 Waiver CCS Demonstration Project
- Title V Federal Block Grant
- WCM

2017 Performance Measures Technical Workgroup

Product

- High-level summary document of the proposed performance measures in the categories of
 - Access to Care
 - Care Coordination
 - Family Participation
 - Quality of Care
 - Transition Services

2018 Performance Measures Quality Subcommittee

Goals

- To discuss the set of performance measures for the 1115 Waiver, Title V, WCM, and the CCS Statewide Plan Fiscal Guidelines
- To discuss consistent data pull for the established performance measures

Objectives

 To standardize data collections for the performance measures associated with the 1115 Waiver, Title V, WCM (in conformance with SB 586), and the CCS Statewide Plan and Fiscal Guidelines

2018 Performance Measures Quality Subcommittee

Product

 Technical specifications document for performance measures is being finalized

Current Title V Report Main Topics

1. Organized care delivery system: WCM
2. Medical Home
3. Transition
4. Timely access to a qualified provider of medically necessary care

5. Telehealth

Title V Report Measures

Example: State Performance Measure

Percentage of CYSHCN with select conditions who have a documented special care center (SCC) visit within 90 days of referral

- Numerator: Number of unique CCS children with select conditions who have an initial visit with the SCC within 90 days of CCS Program (state or county) receiving a service authorization request (SAR) to the SCC
- Denominator: Number of unique CCS children with an initial SAR to the SCC
- Data Source: CMS Net, FFS claims and encounter data

Title V Report Measures

Example: Evidence-Based Strategy Measure

Number of county CCS programs with family members providing input into transition policies

Numerator: Number of county CCS programs with family members providing input into transition policies

Denominator: 58 CCS county programs

Data Source: Survey of CCS County Administrators

Questions?









