CHILD HEALTH AND DISABILITY PREVENTION PROGRAM DIRECTOR/DEPUTY DIRECTOR TRAINING - SECTION I

Systems of Care Division



- The <u>Systems of Care Division</u> is a division of the California Department of Health Care Services and is responsible for the administration and oversight of programs that focus on children and adults with special health care needs.
- The Systems of Care Division focuses on high risk, high cost populations including Children's Medical Services and Adult Care Management programs.

- For more information on the organizational structure of the Systems of Care Division, please see the <u>Children's Medical Services Plan and Fiscal</u> <u>Guidelines</u>, Section 1.
- The organizational structure is subject to change as the Division seeks to align programs and staff to meet the changing healthcare landscape.

Children's Medical Services



CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES

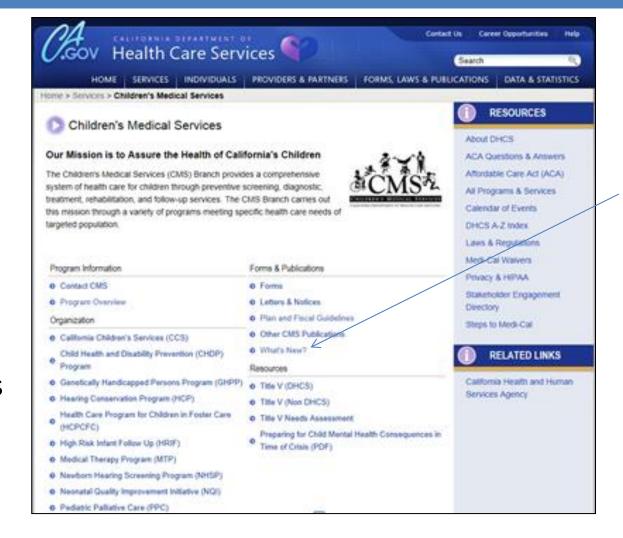
- The Systems of Care Division, formerly the Children's Medical Services Branch, administers children's health services through a comprehensive system of preventive screening, diagnostic, treatment, rehabilitation, and follow-up services.
- The Systems of Care Division encompasses a variety of programs to meet specific health care needs.
- Children's Medical Services is no longer a "Branch" in the Systems of Care Division, although some references still denote it as such.

Systems of Care Division Programs

- California Children's Services (CCS)
- Child Health and Disability Prevention (CHDP) Program
- Genetically Handicapped Persons Program (GHPP)
- Hearing Conservation Program (HCP)
- Health Care Program for Children in Foster Care (HCPCFC)
- High Risk Infant Follow Up (HRIF)
- Medical Therapy Program (MTP)
- Newborn Hearing Screening Program (NHSP)
- Neonatal Quality Improvement Initiative (NQI)
- Pediatric Palliative Care (PPC)

Children's Medical Services Website

Click on the links to go to each program's home page



Click here for new program information

Child Health and Disability Prevention



History

- In 1965, Congress enacted Medicaid, extending medical benefits to all children in households receiving Aid to Families with Dependent Children. The original legislation also gave States the option of extending coverage to all very poor children under age 21, regardless of welfare status.
- In 1967, Congress broadened Medicaid for children because of evidence of widespread disability among military recruits and preschool children in Head Start.

History

Many of the disabilities were conditions whose effects could have been ameliorated through early prevention. Particularly influential was the 1964 report One Third of a Nation, which showed pervasive health problems among young military draftees that could have been avoided had proper care been provided in childhood. Early Periodic Screening, Diagnosis, Treatment was thus added to expand coverage for children to ensure availability of treatments for conditions affecting growth and development.

Timeline

- 1965 Medicaid is enacted, mandating coverage for children receiving Aid to Families with Dependent Children and making coverage optional for other very poor children.
- 1967 Early, Periodic, Screening, Diagnosis and Treatment established by Congress
- 1973 Assembly Bill 2068 adopted Child Health and Disability Prevention Program in California

Timeline

- 1989 Assembly Bill 75 expanded Child Health and Disability Prevention Program services to all low income children under 200% of poverty level
- 1994 Vaccines for Children Program started
- 2000 Foster Care Program added to Child Health and Disability Prevention Program
- 2003 Gateway process implemented in Child Health and Disability Prevention Program

Timeline

□ In 1989, Early Periodic Screening, Diagnosis,
Treatment was further broadened to ensure access
to all treatments within the federal definition of
"medical assistance." Early Periodic Screening,
Diagnosis, Treatment thus focuses on
comprehensive care that treats potentially disabling
conditions as early as possible.

Program Description

- The Program provides comprehensive health assessments for the early detection and prevention of disease and disabilities for eligible children and youth in California.
- The Program sets the standards for children's health assessments to ensure they meet the screening and follow-up components of the federally mandated Early and Periodic Screening, Diagnosis, and Treatment benefit.

Program Eligibility

- Children from birth through 19 years of age not enrolled in Medi-Cal and who meet the income requirements
- Medi-Cal participants from birth to age 21
- Newborns born to mothers on Medi-Cal



Health Assessment Components

- □ Health and Developmental History
- Unclothed Physical Exam
- Developmental Assessment
- Nutritional Assessment
- Oral Health Assessment
- Vision and Hearing Screenings
- Mantoux Tuberculin Skin Test/ Immunizations
- □ Lab Tests
- Health Education / Anticipatory Guidance
- Referrals

Gateway Pre-enrollment Process

□ In July 2003, the Child Health and Disability Prevention Program began using Gateway, an automated pre-enrollment process for non Medi-Cal, uninsured, low income children. The Child Health and Disability Prevention Gateway serves as the entry point for these children to enroll in ongoing continuous health care coverage through Medi-Cal and Covered California.

19 Executive Committee

The Child Health and Disability Prevention Program Executive Committee serves the function of advising the Systems of Care Division Chief and State program staff on matters pertaining to the Program. It allows for two-way communication between the State and the local programs.

Executive Committee Purpose

- To review and comment on Child Health and Disability Prevention Program financial and policy matters, and to review legislation affecting the Program
- To review and comment on program issues, including guidelines, regulations, standards, and operating policies
- To provide expertise about program issues
- To recommend program changes to the Systems of Care Division Chief and department administration

Executive Committee Purpose

- To review and comment on other program issues referred by the representatives of the Child Health and Disability Prevention Program Regional Associations
 - The local Child Health and Disability Prevention Programs are organized regionally by the State: Northern, Bay Area, Central, and Southern.
- To review and approve educational and resource materials developed by subcommittees and work groups of the Executive Committee.

Executive Committee Participation

The regional representatives (Directors or Deputy Directors or designees) are voting members and rotate responsibilities for Chair and Vice Chair.

Representation includes:

- □ Northern 2 representatives
- □ Bay Area 2 representatives
- □ Central 2 representatives
- □ Southern 2 representatives
- □ Small counties 1 representative
- □ Large county (Los Angeles) 1 representative

Other attendees include:

- □ State staff
- Members or other representatives from associations related to health care for children
- Representatives from the subcommittees
- Local program staff may attend as non-voting members

There are four standing subcommittees to the Executive Committee:

Subcommittees:

- Nutrition
- ☐ Health Education
- □ Oral Health
- □ Foster Care

The Chairperson or a designee of each subcommittee attends the Executive Committee. Subcommittee goals, objectives and scopes of work are reviewed annually by the Executive Committee.

There are two standing work groups to the Executive Committee:

- □ Deputy Director Training Module
- ☐ Health Assessment Guidelines

The Deputy Director Training Module Work Group is chaired by the past Chair of the Executive Committee.

Both work groups are composed of regional representatives and State consultants.

Legislative Authority



Legislative Authority

Enabling legislation of the Child Health and Disability Prevention Program

Reference: <u>Health and Safety Code</u>, Sections 104395, 105300, 105305, 120475, and 124025 through 124110

Child Health and Disability Prevention Program regulations that implement, interpret, or make specific the enabling legislation

□ Reference: California Code of Regulations, Title 17, Sections 6800 through 6874

Medi-Cal regulations pertaining to the availability and reimbursement of Early Periodic Screening, Diagnosis, Treatment services through the Child Health and Disability Prevention Program

□ Reference: <u>California Code of Regulations</u>, Title 22, Sections 51340 and 51532

Funding

Funding Sources

- Medi-Cal children and youth under age 21 receive services under the Federal Title XIX benefit known as the Early Periodic Screening, Diagnosis, Treatment benefit. This benefit is part of the Medi-Cal program and is funded by state general and federal funds.
- Low-income children and youth under age 19 with family incomes up to 266 percent of the federal income guidelines, and without preventive health care coverage may be temporarily enrolled through the Child Health and Disability Prevention Program Gateway process into full scope, no-cost temporary Medi-Cal for up to 60 days, starting the day of their Gateway enrollment and Child Health and Disability Prevention Program health assessment. This translates to the month of the date of service plus the following month. These services are funded by state general and federal funds under the Early Periodic Screening, Diagnosis, Treatment (Title XXI) benefit.

Funding Sources

 Low-income children and youth not eligible through the Child Health and Disability Prevention Program Gateway pre-enrollment process for full scope Medi-Cal coverage receive Child Health and Disability Prevention Program services paid for by state general funds.