

**CALIFORNIA
CHILDREN'S
SERVICES (CCS)**

Network Medical Management

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CHILDREN MEDICAL SERVICES

- CCS is a statewide medical care coordination program under State CMS.
 - ❑ Los Angeles County CCS is part of the Department of Public Health.
 - ❑ CCS will arrange and pay for all or part of the medical care, therapy services, and equipment for eligible patients under 21 years of age with certain health care needs that have been approved for services.
 - ❑ Children's Medical Services
 - ❑ California Children's Services (CCS)
 - ❑ Child Health and Disability Prevention Program(CHDP)

CALIFORNIA CHILDREN'S SERVICES

- What is California Children's Services (CCS)?

CCS is a statewide program that treats children with certain physical limitations and chronic health conditions or diseases. CCS can authorize and pay for specific medical services and equipment provided by CCS-approved specialists. The [California Department of Health Care Services \(link is external\)](#) (DHCS) manages the CCS program and it is administered as a partnership between county health departments and the DHCS.

- What Medical Conditions Does CCS Cover?

Only certain conditions are covered by CCS. In general, CCS covers medical conditions that are physically disabling or require medical, surgical, or rehabilitative services. You can view a complete list on the [L.A. County Department of Health \(link is external\)](#) website.

CALIFORNIA CHILDREN'S SERVICES

- What Does CCS Offer?
 - If you think your patient might have a CCS-eligible medical condition, CCS may pay for or provide a medical evaluation to find out if your patient's condition is covered.
- If your patient is eligible, CCS may pay for or provide:
 - Treatment, such as doctor services, hospital and surgical care, physical therapy and occupational therapy, laboratory tests, X-rays, orthopedic appliances and medical equipment.
 - Medical case management to help get your patient special doctors and care, referral to other agencies, or a Medical Therapy Program (MTP), which can provide physical therapy in public schools for children who are medically eligible.

CALIFORNIA CHILDREN'S SERVICES

- Who Qualifies for CCS?
 - The program is open to anyone who meets the four eligibility requirements:
 - **Age eligible:** the child is under 21 years old.
 - **Medically eligible:** the child has a physical disability or medical condition that is covered by CCS. This is called having a “CCS eligible condition.” CCS covers many serious health and physical conditions. After careful study of the information received from your child's doctors, the County of Los Angeles Department of Public Health decides if your child has an eligible condition. Contact them if you have questions.
 - **Residentially eligible:** the child lives with a parent or guardian who lives in Los Angeles County. Each county in California has a CCS program, and if you move to another county, County of Los Angeles Department of Public Health will help you transfer to that county's CCS program.
 - **Financially eligible:** The child has Medi-Cal or Healthy Families or The family's adjusted gross income is less than \$40,000 (if a family earns less than \$40,000 but 200% above the federal poverty level, they will need to apply to Medi-Cal and Healthy Families). The family earns more on medical services for the child's CCS eligible condition without CCS.

Referring Provider (PCP)'s Responsibility

- **There is documentation in the medical record noting that the PCP is aware of member's Dx and CCS status, or that the PCP was the referring MD to CCS.**
- **Indication that child is receiving routine preventive health services.**
 - Complete Physical Examination/periodic care
 - Preventive Health Services (e.g. Immunizations, screenings)
- **Care Coordination**
 - When services are not covered by CCS eligible members, there is documentation in the medical record of appropriate specialty provider referral.
 - When services are covered by CCS eligible members there is a summary and/or documentation from CCS Paneled Physician on medical record or notes by PCP documenting discussion or results from CCS provider.
- There is evidence of transition planning from CCS to other programs for children who have reached age 19 and will continue to need services by the time they reach age 21.

CCS REFERRAL PROCESS (LA County)

- A referral can be made by anyone, including the family, school, public health nurse, family doctor, facility, medical group, or physician's specialist.
- A SAR Request Form should be used when requesting services from LA County-CCS.
- Referrals must include the following:
 - ❑ A completed and legible SAR Request Form
 - ❑ A completed and legible CCS Client Separator Page for each CCS client referred.
 - ❑ Copy of medical reports, including but not limited to laboratory, radiology, diagnostic test that confirm the suspected eligible condition

AUTHORIZATION PROCESS

- The CCS program requires authorization for health care services related to a CCS client's CCS-medically eligible condition.
- Services may be authorized for varying length of time during the CCS client's program eligibility period (usually one year, if open for treatment services).
- The referring provider(s) must indicate what type of services and who the services should be authorized to. If this information is omitted, a delay in authorizing services may occur.
- CCS requires that all physicians be CCS-paneled or facility's be CCS-approved in order to be authorized to provide services to CCS client.
- If a provider or facility is not CCS approved or paneled, the CMS-Net SAR system will not allow user to issue a SAR authorization as requested.
- For additional information on applying for CCS paneling, visit our state CMS-CCS website. You may apply on-line.

CCS ELIGIBLE MEDICAL CONDITIONS

- **A. Infectious Diseases (ICD-9-CM 001-139) (Section 41515.2)**

- In general, these conditions are eligible when they:
 - involve the central nervous system and produce disabilities requiring surgical and/or rehabilitation services;
 - involve bone;
 - involve eyes leads to blindness;
 - are congenitally acquired and for which postnatal treatment is required and appropriate.

- **B. Neoplasms (ICD-9-CM 140-239) (Section 41516)**

- All malignant neoplasms, including those of the blood and lymph systems.
- Benign neoplasms when they constitute a significant disability, visible deformity, or
- significantly interfere with function.

- **C. Endocrine, Nutritional, and Metabolic Diseases, and Immune Disorders (ICD-9-CM 240-279) (Section 41516.1)**

- In general, these conditions are eligible. Examples of eligible conditions include diseases of the pituitary, thyroid, parathyroid, thymus, adrenal, pancreas, ovaries and testes; growth hormone deficiency, diabetes mellitus, diseases due to congenital or acquired immunologic deficiency manifested by life-threatening infections, inborn errors of metabolism; cystic fibrosis.
- Nutritional disorders such as failure to thrive and exogenous obesity are not eligible.

- **D. Diseases of Blood and Blood-Forming Organs (ICD-9-CM 280-289) (Section 41516.3)**

- In general, these conditions are eligible. Common examples of eligible conditions are:
 - sickle cell anemia, hemophilia, and aplastic anemia.
 - Iron or vitamin deficiency anemias are only eligible when they present with life threatening complications.

CCS ELIGIBLE MEDICAL CONDITIONS

- **E. Mental Disorders and Mental Retardation (ICD-9-CM 290-319) (Section 41517)**
 - Conditions of this nature are not eligible except when the disorder is associated with or complicates an existing CCS-eligible condition.
- **F. Diseases of the Nervous System (ICD-9-CM 320-389) (Section 41517.3)**
 - Diseases of the nervous system are, in general, eligible when they produce physical disability (e.g., paresis, paralysis, ataxia) that significantly impair daily function.
 - Idiopathic epilepsy is eligible when the seizures are uncontrolled, as per regulations.
 - Treatment of seizures due to underlying organic disease (e.g., brain tumor, cerebral palsy, inborn errors of metabolism) is based on the eligibility of the underlying disease.
 - Specific conditions not eligible are those which are self-limiting and include acute neuritis and neuralgia; and meningitis that does not produce sequelae or physical disability. **Learning disabilities are not eligible.**
- **G. Diseases of the Eye (ICD-9-CM 360-379) (Section 41517.7)**
 - Strabismus is eligible when surgery is required.
 - Chronic infections or diseases of the eye are eligible when they may produce visual impairment and/or require complex management or surgery.
- **H. Diseases of the Ear and Mastoid (ICD-9-CM 380-389) (Section 41518)**
 - Hearing loss, as defined per regulations;
 - Perforation of the tympanic membrane requiring tympanoplasty;
 - Mastoiditis;
 - Cholesteatoma

CCS ELIGIBLE MEDICAL CONDITIONS

- **I. Diseases of the Circulatory System (ICD-9-CM 390-459) (Section 41518.2)**
 - Conditions involving the heart, blood vessels, and lymphatic system are, in general, eligible.
- **J. Diseases of the Respiratory System (ICD-9-CM 460-519) (Section 41518.3)**
 - Lower respiratory tract conditions are eligible if they are chronic, cause significant disability, and respiratory obstruction; or complicate the management of a CCS-eligible condition.
 - Lungs: chronic lung disease of infancy is eligible; chronic lung disease of immunologic origin is eligible, as per regulations
- **K. Diseases of the Digestive System (ICD-9-CM 520-579) (Section 41518.3)**
 - Diseases of the liver, chronic inflammatory disease of the gastrointestinal (GI) tract and most congenital abnormalities of the GI system are eligible; and gastroesophageal reflux, as per regulations.
 - Malocclusion is eligible when there is severe impairment of occlusal function and is subject to CCS screening and acceptance for care.
- **L. Diseases of the Genitourinary System (ICD-9-CM 580-629) (Section 41518.5)**
 - Chronic genitourinary conditions and renal failure are eligible. Acute conditions are
 - eligible when complications are present.
- **M. Diseases of the Skin and Subcutaneous Tissues (ICD-9-CM 680-709) (Section 41518.6)**
 - These conditions are eligible if they are disfiguring, disabling, and require plastic or reconstructive surgery and/or prolonged and frequent multidisciplinary management

CCS ELIGIBLE MEDICAL CONDITIONS

- **N. Diseases of the Musculoskeletal System and Connective Tissue (ICD-9-CM710-739) (Section 41518.7)**
 - Chronic diseases of the musculoskeletal system and connective tissue are eligible.
 - Minor orthopedic conditions such as toeing-in, knock knee, and flat feet are not eligible.
 - However, these conditions may be eligible if expensive bracing, multiple casting, and/or surgery is required. See Q. below for acute injuries.
- **O. Congenital Anomalies (ICD-9-CM 740-759) (Section 41518.8)**
 - Congenital anomalies of the various systems are eligible if the condition limits a body function, is disabling or disfiguring, amenable to cure, correction, or amelioration, as per regulations

CCS ELIGIBLE MEDICAL CONDITIONS

- **P. Perinatal Morbidity and Mortality (ICD-9-CM 760-779)**

- Neonates who have a CCS-eligible condition and require care in a CCS-approved neonatal intensive care unit (NICU) because of the eligible condition.
- Critically ill neonates who do not have an identified CCS-eligible condition but who require one or more of the following services in a CCS-approved NICU:
 - Invasive or non-invasive positive pressure ventilatory assistance.
 - Supplemental oxygen concentration by hood of greater than or equal to 40 percent.
 - Maintenance of an umbilical artery (UA) or peripheral arterial catheter (PAC) for medically necessary indications, such as monitoring blood pressure or blood gases.
 - Maintenance of an umbilical venous catheter or other central venous catheter for medically necessary indications, such as pressure monitoring or cardiovascular drug infusion.
 - Maintenance of a peripheral line for intravenous pharmacological support of the cardiovascular system.
 - Central or peripheral hyperalimentation.
 - Chest tube.
- Neonates and infants who do not have an identified CCS-eligible condition but who require two or more of the following services in a CCS-approved NICU:
 - Supplemental inspired oxygen.
 - Maintenance of a peripheral intravenous line for administration of intravenous fluids, blood, blood products or medications other than those used in support of the cardiovascular system.
 - Pharmacological treatment for apnea and/or bradycardia episodes.
 - Tube feedings.

- **Q. Accidents, Poisonings, Violence, and Immunization Reactions (ICD-9-CM 800-999)**

- Injuries of the central or peripheral nervous and vital organs may be eligible if they can result in permanent disability or death. Fractures of the skull, spine, pelvis, or femur which when untreated would result in permanent loss of function or death. Burns, foreign bodies, ingestion of drugs or poisons, lead poisoning, and snake bites may be eligible, as per regulations.

REFERENCE LINKS

- <http://www.dhcs.ca.gov/services/ccs/Pages/default.aspx>
- <http://www.dhcs.ca.gov/formsandpubs/forms/Pages/CCSForms.aspx>
- [Title 22, Section 51013](#)
- Health and Safety Code, Section 123800 et seq
- <https://www.dhcs.ca.gov/services/ccs/Pages/CCSProviders.aspx>