

CALIFORNIA CHILDREN'S SERVICES AND CHILD HEALTH AND DISABILITY PREVENTION PROGRAMS

Presented to Health Services Advisory Board on XXX

Chief, California Children's Services Branch

Chief, Maternal, Child and Family Health Services Branch







PURPOSE OF BOARD LETTER



Authorize the Clerk of the Board to execute the Fiscal Year 2022-2023 through Fiscal Year 2026-2027 State Department of Health Care Services- California Children's Services and Child Health and Disability Prevention Program Certification Statements. Approve acceptance of \$24,624,552 from the State of California Department of Health Care Services for July 1, 2022 through June 30, 2023.

Request to continue the <u>California Children's Services</u> and <u>Child Health and Disability Prevention</u> programs.

COUNTY OF SAN DIEGO







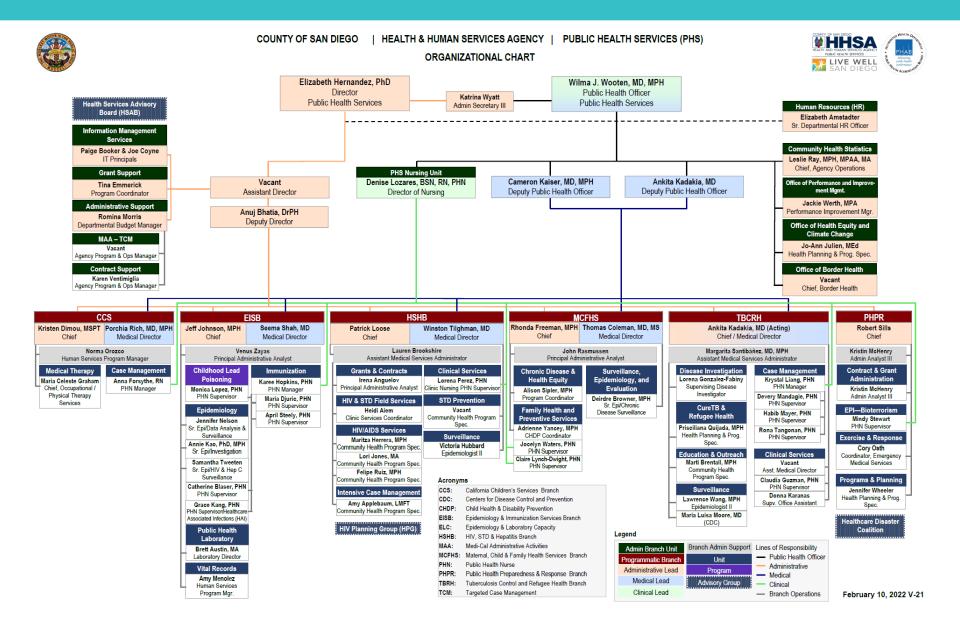
www.LiveWellSD.org





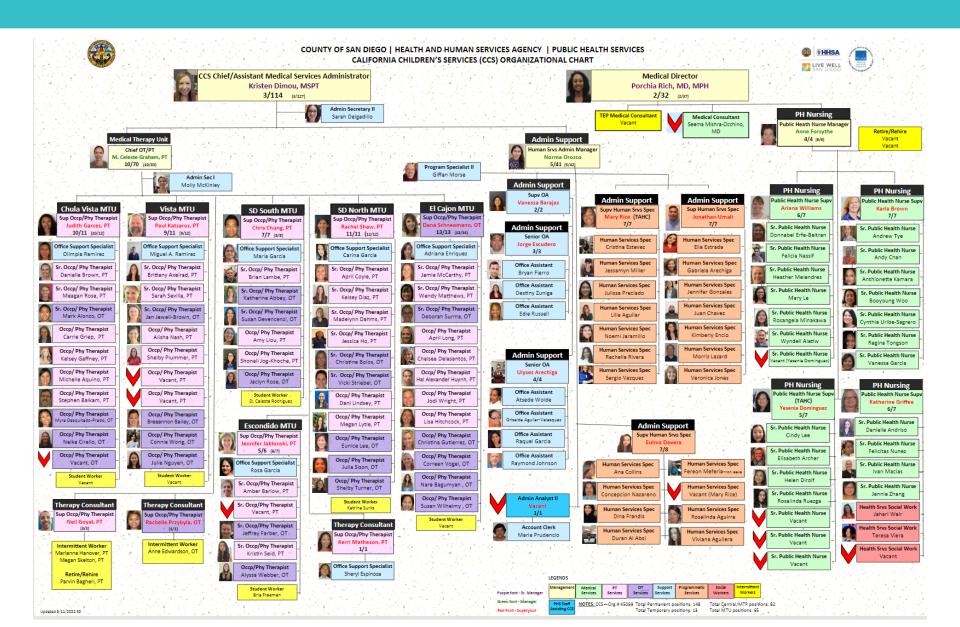
PUBLIC HEALTH SERVICES ORGANIZATIONAL CHART





CCS BRANCH ORGANIZATIONAL CHART





CALIFORNIA CHILDREN'S SERVICES PROGRAM



MISSION STATEMENTS

- CCS Case Management Program: Provide family-centered care coordination for CCS-eligible clients with a quality workforce, team collaboration, and strong community partnerships.
- CCS Medical Therapy Program: To maximize functional independence of children with physical disabilities through family-centered care at the medical therapy units (MTUs).

FUNDING

- State General Fund- \$9,955,000
- Federal Title XIX (21)- \$1,595,500
- Federal Title IX (19)- \$6,086,440
- Miscellaneous-\$2,100
- Realignment/General Fund- \$5,476,893

AUTHORITY

- California Government Code Sections 7570-7585
- California Health & Safety Code Sections 123800-123995 (Robert W. Crown California Children's Services Act)
- California Welfare and Institutions Code Sections 14094-14094.3
- California Insurance Code Sections 12690.62, 12693.64, and 12693.66
- California Code of Regulations, Title 22 Social Security, Division 2, Subdivision 7. California Children's Services

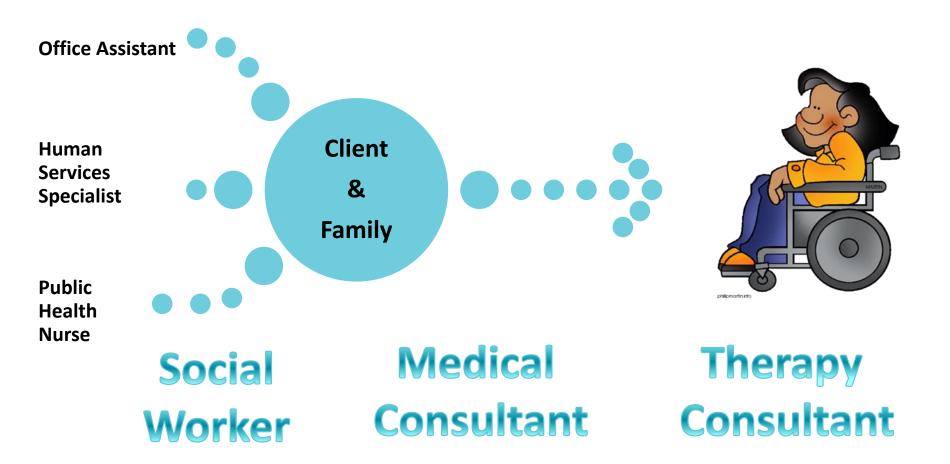
CALIFORNIA CHILDREN'S SERVICES PROGRAM



- 1. Managing CCS eligible medical services for 18,999 children with CCS eligible medical conditions such as cystic fibrosis, hemophilia, cerebral palsy, heart disease, cancer, traumatic injuries, and infectious diseases producing major complications.
- 2. Assisting 18,999 CCS families in navigating available services for children with physical disabilities and complex medical conditions.
- 3. Providing direct rehabilitative services in collaboration with the public schools to 1,671 children with physical disabilities and complex, special health care needs.
- 4. Expediting CCS eligibility determinations for hospitalized children at Rady, UCSD, Sharp, and Kaiser Hospitals through electronic review of medical records, training, and collaboration and communication with hospital staff.
- 5. Collaborating with the California Department of Health Care Services to help redesign the State's case management informatics system to improve efficiency and timeliness in processing provider service authorization requests so children get their needed services faster.

CCS CASE MANAGEMENT





CCS CASE MANAGEMENT GOALS



- 1. Children enrolled in the CCS Program will have documented Medical homes/primary care providers.
- 2. Timely eligibility determinations for CCS benefits:
 - Medical eligibility within five working days of receipt of all medical documentation necessary to determine whether a CCS-eligible condition exists.
 - Residential eligibility within 30 days of receipt of documentation needed to make the determination.
 - Financial eligibility within 30 days of receipt of documentation to make the determination.
- 3. Ensure there is an annual interdisciplinary team report for each child enrolled in CCS whose condition requires Special Care Center services and has received an authorization to a Special Care Center.
- 4. Ensure Transition Planning services are offered to CCS clients 14, 16, 18, or 20 years within the past 12 months for children aged 14 years and over whom requires long term transition planning.
- 5. Implementation of Family Participation strategies including satisfaction surveys and advisory committees.

CCS- MEDICAL THERAPY PROGRAM (MTP)



- 1. Serves persons under the age of 21 who have MTP-qualifying conditions such as cerebral palsy, spina bifida, muscular dystrophy, rheumatoid arthritis, spinal cord injuries, arthrogryposis, osteogenesis imperfecta, and head injuries.
- 2. There is no financial eligibility requirement for MTP services.
- 3. There is financial eligibility requirement for specialized equipment.
- 4. MTP staff participate as CCS liaisons at Rady Specialty Clinics: Muscle Disease Clinic, Spinal Defects Clinic, Pediatric Rehabilitation Clinic, Pediatric Rheumatology Clinic, and Limb Deficiency Clinics.

CALIFORNIA CHILDREN'S SERVICES PROGRAM CHALLENGES



Challenges

Resources and Services:

- 1) Staffing
 - a. Complexity of cases adds to challenge of timeliness and comprehensive care coordination required of staff to manage a high-volume caseload.
 - b. Aging workforce while hiring pool is declining, especially among nurses.
- 2) Planning for clients with complex health care needs as they transition to adult services
 - a. Assisting families to navigate a health care system with various funding sources and providing them with current, appropriate information to meet their specific needs (e.g., transferring care to an adult provider).

Solutions

- 1) Work with Public Health Services Administration and Agency's Human Resources to maintain adequate staffing, retain experienced and competent workforce, and provide succession planning.
- 2) Increase collaboration and leverage resources with community partners regarding transition to adulthood services through joint meetings, sharing resources, joint sponsorship of educational and informational symposiums.

REQUEST FOR HSAB SUPPORT

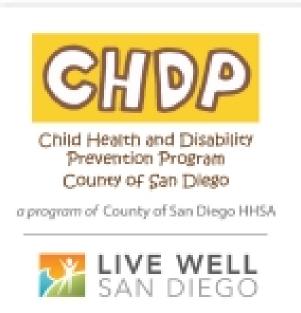


BOARD LETTER RECOMMENDATIONS

- 1. Approve and authorize the Clerk of the Board to execute the Fiscal 2022-2023 through Fiscal Year 2026-2027 State Department of Health Care Services- California Children's Services Certification Statements. California Children's Services (CCS) funding sources are the State General Fund, Federal Title XIX, Federal Title XXI, and Health Realignment.
- 2. Authorize the Agency Director, Health and Human Services Agency, to apply for any additional funding opportunity announcements.



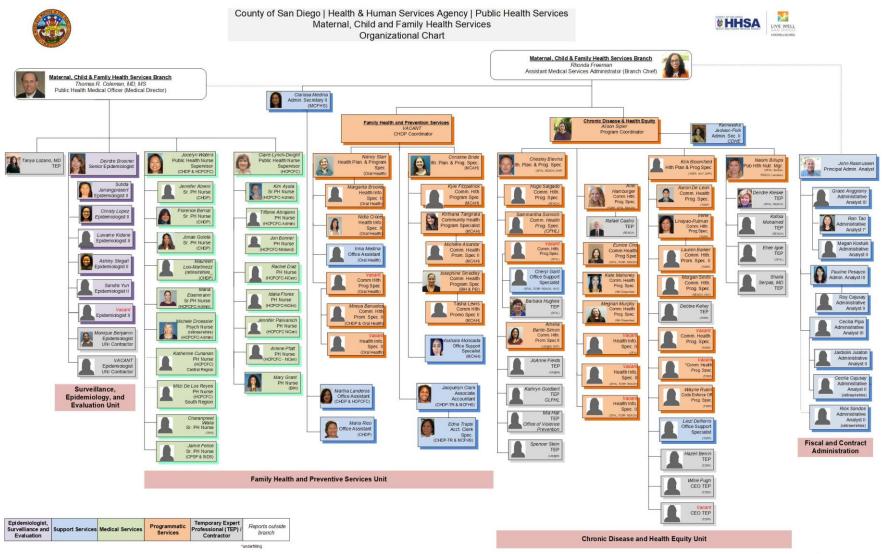
CHILD HEALTH AND DISABILITY PREVENTION PROGRAM





MCFHS ORGANIZATIONAL CHART





CHILD HEALTH AND DISABILITY PREVENTION (CHDP) PROGRAMS



GOAL

• Child Health and Disability Prevention (CHDP) programs focus on prevention, identification, and treatment of health problems early through providing periodic well-child health and dental exams and linking children to ongoing health care coverage.

FUNDING

- State General Fund \$1,202,029
- County Realignment \$1,467,269
- Federal Title XIX (match) \$4,261,843

STATUTES

- California Health and Safety Code Sections 104395, 105300, 105305, 120475, and 124025-124110
- California Code of Regulations Title 17, Sections 6800-6874 and Title 22, Sections 51340-51532
- Budget Act of 1999 and California Welfare and Institutions Code Sections 16501.3 and 16010 (foster care)
- California Education Code Section 49452.8 (dental)

CHDP PROGRAMS









CHDP

- EPSDT Intensive Informing
- Provider Certification and Monitoring
 - Care Coordination
 - Early and Periodic Lead Exposure Prevention Initiative

Oral Health

Dental Health Initiative/ Share the Care Program Health Care Program for Children in Foster Care (HCPCFC)

CHDP PROGRAM GOALS



Promote early detection and prevention of disease and disabilities.

Ensure eligible children receive periodic, comprehensive, preventive health examinations.

Ensure follow-up and treatment of health conditions detected during CHDP health assessments.

Coordinate and provide trainings to health care professionals to ensure quality services.

Connect eligible children enrolled in grades K through 12 to emergency dental care through a network of *pro bono* dentists.

Offer oral health education to pregnant women, adolescents, parents, and caregivers.

Provide oral health training to childcare sites, medical/dental professionals, and other organizations that work with children ages 0-5.

Provide consultation and care coordination services to ensure medical and dental needs for youth in-out-of-home placement are met.

CHDP PROGRAM SERVICES FY 22-23



Facilitate	Well-child exams for low-income children and assist with access to medical and dental home.
Certify, Monitor, and Training	A network of 164 CHDP providers representing a combined total of 695 physicians and non-physician medical practitioners to ensure quality health services are provided.
Collaborate	County Child Welfare Services, County Office of Nursing Excellence, and Juvenile Probation to provide intensive care coordination to 1,782 children and youth in out-of-home placement.
Facilitate	Sealant and/or varnish events to ensure 250 children receive oral health screenings, sealant, or varnish application, and are provided information on access to dental and health care.
Educate and Train	300 medical/dental providers and ancillary staff on community linkage through an electronic referral system and fluoride varnish application.





CHDP PROGRAM OUTCOMES FY 20-21

- Worked collaboratively to host Give Kids a Smile Event
 - 333 children received varnish or sealants valued at \$48,200
- Trained 156 health care professionals
- Coordinated with 164 providers to provide 16,000 health exams to lowincome children with no health care coverage.
- Provided care coordination activities on behalf of 1,764 foster children.

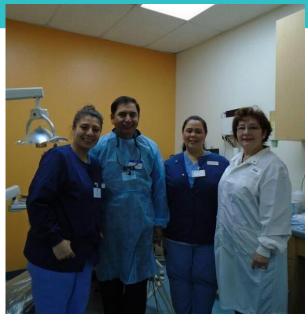












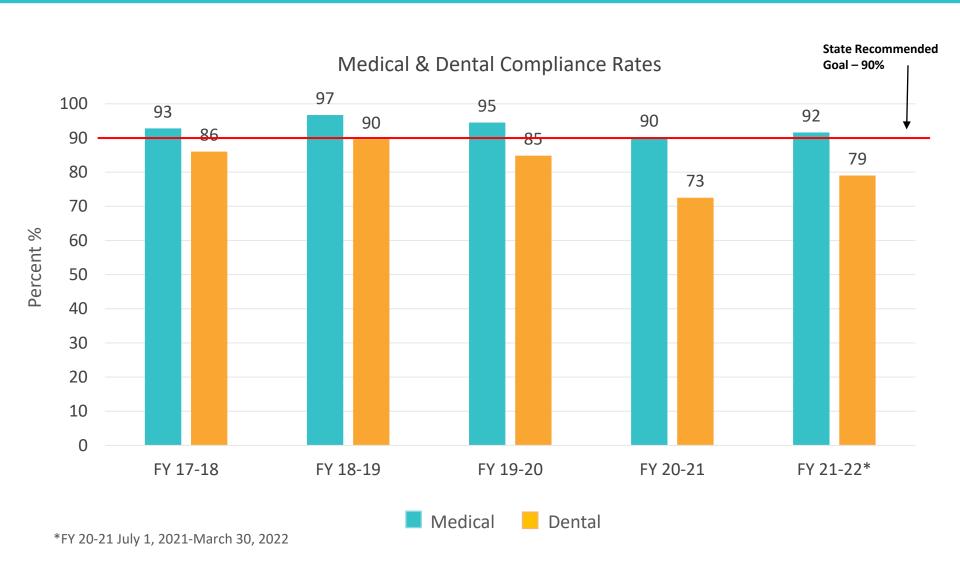
GIVE KIDS A SMILE COLLABORATIVE EFFORTS

Education & Volunteers

HEALTH CARE PROGRAM FOR CHILDREN IN FOSTER CARE OUTCOMES

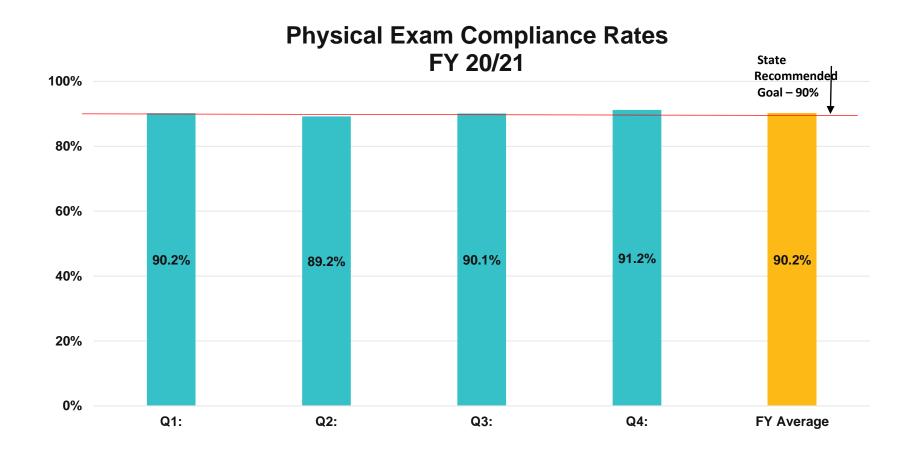






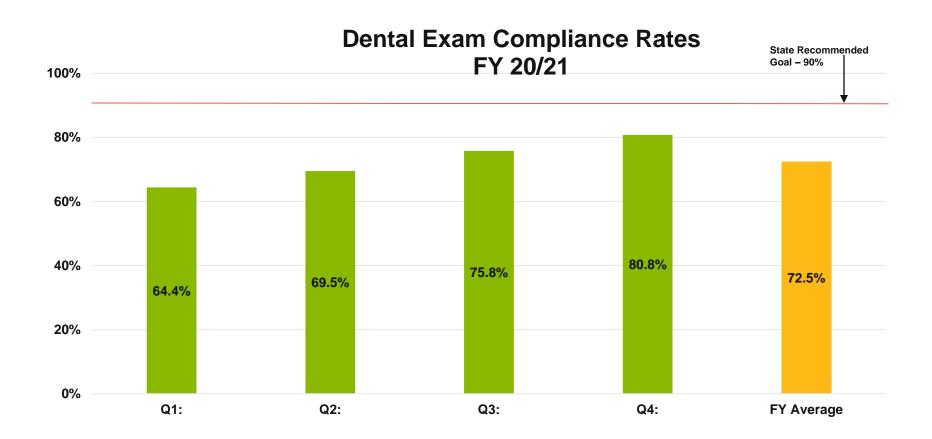
HEALTH CARE PROGRAM FOR CHILDREN IN FOSTER CARE OUTCOMES





HEALTH CARE PROGRAM FOR CHILDREN IN FOSTER CARE OUTCOMES





CHDP PROGRAMS



Challenges

Proposed elimination of the CHDP program.



No additional funding to help support oral health efforts focused on children and youth.

Solutions

Work closely with State, local Managed Care Plans, and other counties on transition.



Absorb staffing and shift to other funding sources.

Shift Dental Health Initiative activities to Local Oral Health Program.

Leverage resources with community partners and seek additional funding.

REQUEST FOR HSAB SUPPORT



BOARD LETTER RECOMMENDATIONS

- Approve and authorize the Clerk of the Board to execute the Fiscal 2022-2023 State
 Department of Health Care Services- Child Health and Disability Prevention (CHDP)

 Program Certification Statements. CHDP funding sources are the State General Fund,
 Federal Title XIX, and Health Realignment.
- 2. Authorize the Agency Director, Health and Human Services Agency, to apply for any additional funding opportunity announcements.

CONTACT INFORMATION



QUESTIONS?

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