



County of San Diego

NICK MACCHIONE, FACHE
AGENCY DIRECTOR

HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH SERVICES
CALIFORNIA CHILDREN'S SERVICES
6160 MISSION GORGE ROAD, STE. 400, MAIL STOP P-586
SAN DIEGO, CA 92120
(619) 528-4000 • FAX (858) 514-6539

WILMA J. WOOTEN, M.D., M.P.H.
PUBLIC HEALTH OFFICER

Dear CCS Family,

You may frequently hear the term "SAR" used by medical providers, pharmacies, and/or CCS staff. A SAR, or Service Authorization Request, is an authorization from CCS to allow medical providers to bill for services related to your child's CCS-eligible condition. A SAR may be issued to a physician, hospital, pharmacy, outpatient department, a Special Care Center, a home health agency or a medical supply/equipment provider.

Enclosed are copies of CCS SAR(s) for your child. We have also included a sample SAR with highlighted areas and definitions to use as a guide in understanding your SAR(s).

When possible, CCS will try to authorize payment of services to your doctor or Special Care Center of your choice. It may take 1-2 weeks to receive the SAR approval letter in the mail, after your Nurse Case Manager approves it.

It is important for you to keep the SAR letter! You may need to show it to your doctor or pharmacist. Please review the sample SAR guide for services covered under a physician or Special Care Center SAR.

The authorization has an expiration date, always be sure to check the date before making a doctor's appointment.

Please contact your Nurse Case Manager if you have questions regarding your child's SAR or difficulty accessing medical services.

Nurse Case Manager Name: _____ Phone Number: _____

Sincerely,

CCS Human Services Specialist

CONFIDENTIAL
CALIFORNIA CHILDREN'S SERVICES (CCS)
SAN DIEGO COUNTY CCS OFFICE
6160 MISSION GORGE ROAD STE 400
SAN DIEGO, CA 92120
PH: (619) 528-4000

SAR #: 9700000000

- A. CCS authorization number for medical services.
- B. Covers medications, x-rays and labs in addition to doctor visits
- C. See Special Instructions

Specialist Physician

Authorized Provider: BUNNY, BUGS MD
3020 CARTOON WAY
SAN DIEGO, CA 92123

Provider Number: 222222222
Telephone: (222) 111-5555

Provider Type: PHYSICIAN

AUTHORIZATION FOR SERVICES

Authorization is for services and effective dates indicated below, in accordance with CCS program policies and fee schedule. Authorization for additional services not listed below must be requested in advance. By providing these authorized services, you agree to accept payment from the CCS program as payment in full. If you have a Service Code Grouping (SCG) authorization, please check your Medi-Cal manual for services included in the SCG.

CCS CLIENT INFORMATION

Client Name: JOHN DOE
Address: 1234 TEST ST.
SAN DIEGO, CA 12345

Client Index Number: 99999999F9
Case Number: 1234567
Date Of Birth: 01/01/1001
Gender: MALE
Client Telephone:
Parent/Guardian Tel: (619) 001-1000

Parent/Guardian: MARY DOE
Address: 1234 TEST ST.
SAN DIEGO, CA 12345

Pediatrician or Primary Care Doctor

Medical Home: BEAR, YOGI MD
Address: 3020 CARTOON WAY
SAN DIEGO, CA 92123

County: SAN DIEGO
Primary Diagnosis: G80.0 SPASTIC QUADRIPLÉGIC CEREBRAL PALSY (ICD10)
Secondary Diagnosis:

AUTHORIZATION INFORMATION

Effective Dates: 02/25/2019 through 02/24/2020 Dates SAR is ACTIVE

OTHER COVERAGE

CCS AUTHORIZED SERVICES

Service Code	Modifier	Service Description	Units	Quantity	Negotiated Price
01		PHYSICIAN	1		

SPECIAL INSTRUCTIONS

MED.ELIGIBLE.

IN ORDER FOR THIS PROGRAM TO AUTHORIZE SERVICES TIMELY, PLEASE SEND FINDINGS, RECOMMENDATIONS, TREATMENT PLAN AND PROGRESS REPORTS AT LEAST EVERY 6 MONTHS TO A YEAR.

SAR INCLUDES COVERAGE FOR PRESCRIBED MEDICATION TO TREAT OR AMELIORATE A CCS MEDICALLY ELIGIBLE CONDITION, EXCEPT THOSE RESTRICTED BY THE CCS PROGRAM

THIS AUTHORIZATION IS VALID ONLY AS LONG AS CLIENT'S MEDI-CAL ELIGIBILITY IS ACTIVE. IF CLIENT DOES NOT HAVE MEDI-CAL ELIGIBILITY ON THE DATE SERVICES ARE RENDERED, THE CLAIM WILL NOT BE PAID. TO AVOID NON-PAYMENT, YOU MUST VERIFY CLIENT'S MEDI-CAL ELIGIBILITY BEFORE RENDERING ANY SERVICES. AUTHORIZED SERVICES MUST BE BILLED DIRECTLY TO THE MEDI-CAL FISCAL INTERMEDIARY. PLEASE CONTACT THE LOCAL CCS OFFICE FOR QUESTIONS OR ASSISTANCE.

SAR will only authorize services if Medi-Cal is active or a CCS contract is in place for the dates of service requested

Issued By: CCS Worker (SAN DIEGO)

Date Authorized: 02/19/2019