

County of San Diego

Health and Human Services Agency



CCS Family Handbook





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Definitions of Common Terms



CCS – [California Children's Services](#) is a medical program for qualifying medical conditions from birth to 21 years of age.

MTP – [Medical Therapy Program](#) provides occupational therapy and/or physical therapy that is determined to be medically necessary.

MTU – [Medical Therapy Unit](#) is the physical location of the Medical Therapy Program.

NOA - [Notice of Action](#) Letter may state that CCS is possibly reducing, ending or denying services. The process to appeal this decision will be included within the letter.

PSA – [Program Services Agreement](#) is the application signed yearly and proves eligibility for the CCS program.

SAR – [Service Authorization Request](#) (SAR#); important paperwork provided by CCS that allows payment for services in regard to your child's CCS eligible condition. A copy will be sent to you, please keep for your records.

California Children's Services (CCS)

At CCS, you can expect Family Centered Care. We believe the best way to care for a child is to help the family.



Family Centered Care is.....

- Treating you with respect.
- Giving you the information and support you need for your child's health and well being.
- Working with you to provide high quality healthcare for your child.

We care about your child's health

What is CCS?



CCS is a statewide program that coordinates and pays for medical care and therapy services for children under the age of 21 with certain health care needs (“a CCS eligible condition”).



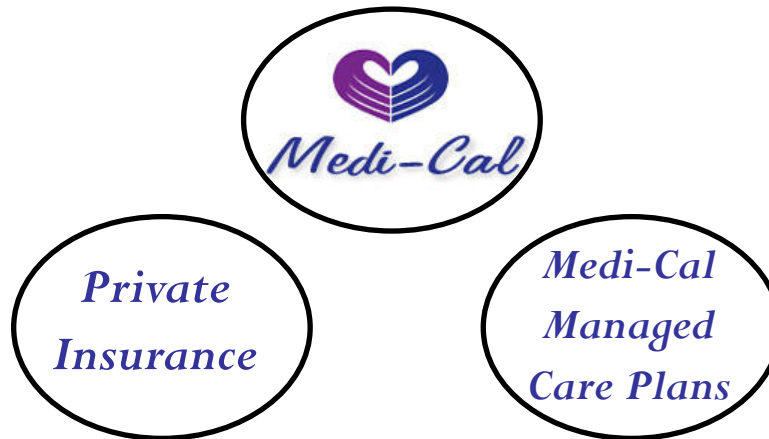
CCS is not a health insurance program. It will not meet all of your child’s health care needs, only those related to the CCS eligible condition.

San Diego County CCS is part of the County of San Diego Health and Human Services Agency, Public Health Services.

CCS is NOT Child Welfare Services, otherwise known as CWS or CPS.



CCS works with:



If your child is covered under Medi-Cal, California Health and Safety Code Law **requires** CCS to manage his/her CCS eligible condition. Be sure to let CCS or your Health Plan know of any questions regarding individual program benefits.



<https://www.dhcs.ca.gov/>

CCS Staff Introduction

- **Human Services Specialist (HSS)** – Eligibility worker who assists families with the application process and determines financial and residential eligibility for the CCS program.
- **Nurse Case Manager** – Makes decisions regarding your child's CCS eligibility based on child's doctor's reports. If eligible, your Nurse Case Manager will issue authorizations (a SAR#) for CCS approved doctors to provide treatment and/or other services.
- **Office Assistant (OA)** – Provides case management support and interacting directly with customers and providers.
- **Social Worker** – Assists families in locating services needed to support your child's CCS condition. Assists families with advocacy, health insurance information, transition planning, and referrals to community resources. Also assists with counseling, support groups, or transportation needs.



- **Office Support Specialist (OSS)** – Provides reception services at MTU. Maintains patient records and data for therapy status and medical direction.
- **Occupational Therapist (OT)** – If advised, evaluates your child's fine motor development, range of motion, strength of arms and hands, and self-care skills. If indicated, will provide therapy to assist in becoming as independent as possible in his/her "Activities of Daily Living" (ADLs), i.e. dressing, feeding, self-help skills. Will also assist in evaluating for any equipment that may be needed to help in daily activities. Therapy sessions will be scheduled on an "active" (once a week or more) or "monitor" basis, depending on your child's needs and potential to benefit from occupational therapy.
- **Physical Therapist (PT)** – If advised, evaluates your child's overall gross motor development, range of motion, strength and functional mobility. If indicated, will provide therapy to assist in becoming as independent as possible in his/her functional mobility, monitor range of motion and promote strengthening. Will also assist in evaluating for any equipment that may be needed. Therapy sessions will be scheduled on an "active" (once a week or more) or "monitor" basis, depending on your child's needs and potential to benefit from physical therapy.

How does a child qualify for CCS?



CCS covers many serious health and physical conditions. If needed, your child's doctor will make a referral to CCS. At that time the CCS medical team will determine if your child has a CCS eligible condition.

To receive CCS services your family needs to meet **all four** of the CCS eligibility rules:

1. **Age eligibility**: your child must be under 21 years of age.
2. **Medical eligibility**: your child must have a physical disability or medical condition that is covered by CCS (because of the extensive list, it is not provided in the booklet). For more information about medical conditions covered by CCS, visit <https://www.dhcs.ca.gov/services/ccs/Pages/medicaleligibility.aspx> or you can call your local CCS office for information.
3. **Residential eligibility**: children receiving San Diego County CCS services must reside in the county. Each county in California has a CCS program. If you move to another county, we will help you transfer your child to that county's CCS program.
4. **Financial eligibility**: your child must have:
 - Medi-Cal,
 - The family's adjusted gross income be less than \$40,000

OR

 - If your family earns more than \$40,000, it is estimated that more than 20% of your annual income (AGI) will be spent on medical services for your child's CCS eligibility.



CCS pays services for the eligible condition only.

Once your child has been determined to be medically eligible, you will need to schedule an appointment with your HSS to complete the financial and residential eligibility process to receive services not covered by Medi-Cal. You can make an appointment with your HSS during normal office hours. Your HSS and your Nurse Case Manager work together.

Should you have any questions about your CCS coverage, please call your HSS. If you cannot speak with your HSS right away, please leave a message. If it is urgent, you can ask to speak with someone else in the office to help answer your question.

HSS Required Documents to bring in:

- Proof of address (utility bill, driver's license, etc.)
- Proof of income (Copy of CA tax return)
- Proof of any insurance



Please notify your HSS if you have:



- Changed your address
- Changed your phone number
- Changed your insurance

We cannot provide services if we cannot reach you, or if we have the wrong information. Please keep us updated with your contact information.

Once financial & residential eligibility have been established you will be asked to sign a PSA. This is your contract with CCS for the year and must be signed yearly.



Your signed PSA form gives you the legal right to appeal.



Fees: Some families may pay:

- An annual assessment fee of \$20 **AND**
- An enrollment fee, using a sliding scale based on family income and size. Your HSS has a chart of the fees

A family will not pay these fees if the child has one of the following:

- Full-scope Medi-Cal with \$0 share of cost
- Diagnostic services only
- CCS MTP services only



A family in need can request to waive or reduce fees by proving evidence of financial hardship.



If your family earns less than \$40,000 but is 200% above the Federal poverty level, you will be required to apply for Medi-Cal.

Case Management

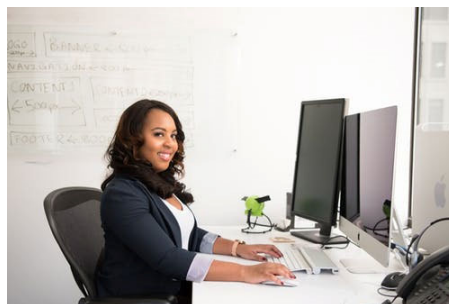
The Nurse Case Manager's role is to work with you to coordinate your child's CCS medical services. Your Nurse Case Manager relies on your child's doctor's report to make decisions. With the information in the report, the Nurse Case Manager will authorize CCS paneled doctors to provide treatment and other services. CCS can access your child's records electronically if your physician is part of UCSD, Rady, Sharp or Kaiser. CCS cannot authorize services without a doctor's report.

Remember to ask the doctor, therapist, or medical supplier for a copy of the doctor's report for your own records. If you have this information you can send a copy to CCS when it is requested. You will not have to wait for the doctor's office to send it.

Your Nurse Case Manager will be happy to talk with you about any concerns you may have about your child. If she or he cannot help you, other resources such as Regional Center, a Family Resource Center or your child's school may be available.



Please call your local CCS office at (619) 528-4000 if you need information.



Make sure your
doctors office
knows you have
CCS.

Types of Services

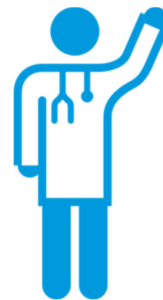
DIAGNOSTIC SERVICES

If there is a good chance that your child has a CCS eligible condition but more information is needed; CCS can pay for more doctor visits and testing. Your Nurse Case Manager can help if you have questions about this. You do not need to go through financial eligibility to receive this service.

TREATMENT SERVICES

Services required to treat your child's CCS eligible condition may include but are not limited to:

- Special Care Center Visits
- Emergency department care
- Hospital stays
- Surgery
- Medicines
- Special Equipment & Supplies
- Medical Therapy Program



LODGING AND TRANSPORTATION

In instances of economic hardship, CCS **may** be able to reimburse expenses related to transportation to CCS-covered medical appointments to your child's center of care and/or hospital stays. Please talk with your Nurse Case Manager.

Special Care Centers

A Special Care Center consists of a team of doctors, nurses, therapists and other professionals who work together with you and your child to provide the best medical care. Your child **must be seen yearly** to maintain CCS eligibility. Depending on your child's medical condition, the center may need to see your child more frequently. Special Care Centers have been reviewed by the State to make sure the care they give a child meets CCS standards.

Examples:

Cardiology Center
 Craniofacial Center
 Cystic Fibrosis and Lung
 Disease Center
 Gastrointestinal Center
 Heart Surgery Center
 Hematology/Oncology Center
 Hemophilia Center
 Immunology/Infectious Disease
 Center
 Metabolic and Endocrine Center
 Neuro/Musculoskeletal Center
 Rehabilitation Center
 Renal Dialysis and Transplant
 Center
 Rheumatology Center
 Speech and Hearing Center
 Spina Bifida Center



Special Care Centers are located at major hospitals in San Diego County.

MTP Services

Medical eligibility for MTP services is different than general CCS program services. Not all children covered by CCS need or are eligible for MTP services.

The CCS MTP serves children with qualifying physical disabilities. The MTP provides physical and occupational therapy, and may include pediatric and orthopedic clinics/conferences. These clinics/conferences are a time to meet with the CCS contracted doctors to evaluate equipment, therapy received, and other important issues pertaining to your child's CCS eligible condition. This is the only CCS program (therapy) that provides direct care, working one-on-one with your child.



The therapy CCS provides is usually different than the therapy your child's school may provide. That is because CCS provides therapy for your child's eligible medical condition, while the school provides therapy for your child's educational needs and goals.



Medical Therapy Units are located in 7 Public Schools throughout San Diego County:



https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/california_children_services.html

CCS Therapy

Your child may start with the **Medical Therapy Program** receiving active therapy, but his or her therapy may **change** over time. To receive active therapy means that your child is **making measurable changes** about every six months, as documented by your occupational and/or physical therapist. The documentation shows that if your child is making gains, they will need the skills of their physical and or occupational therapist to continue to make gains.

Some examples of measurable gains are the ability to:

**Sit
without
Support**

Roll Over



**Drink
from a
sippy cup**

Crawl

If these or other measurable gains level off, or your child no longer needs the skills of a therapist, the therapy team will talk to you about transitioning your child to a different level of therapy services.

The MTP provides several levels of therapy services. There are many variables in each category. Your child may receive a combination of levels of therapy and services while in the MTP.

LEVELS INCLUDE:

EVALUATION

- Initial evaluation to establish the level of services needed.
- Ongoing re-evaluation to assess the child's response to treatment and recommended level of service.
- Evaluation of equipment needs.
- Evaluation of home and/or school environment for accessibility.



ACTIVE SERVICES

- Regularly scheduled visits with the therapist, weekly or more.
- Goals of active therapy treatment require on-going, hands-on contact by the therapist.

MONITOR SERVICES

- Twice monthly to twice yearly check-up appointments at the MTU to assess changes in child's status, equipment/orthotic needs, or home exercise program.
- Utilized when the child has reached a steady functional state and does not require frequent hands-on skilled intervention by the therapist.



EPISODIC TREATMENT SERVICES

- “Short bursts” of weekly therapy with intensive family/caregiver training (up to 12 weeks) interspersed with longer periods of monitoring during a total 12 month plan of care.



CLINIC ONLY SERVICES

- Utilized when a child has reached a stable functional state and no immediate functional therapy needs have been identified.
- No scheduled therapy appointments; child will only require appointment with physician annually, who may refer back to the MTP if indicated.

CONSULTATION

- An integral part of all service delivery models to help identify and address a child's needs through consultation with child, family, teachers, and other community providers.
- Consultation can be requested as the need arises.
- Offer advice and help with equipment and physical barrier issues.
- Consultation acts as a bridge to social, educational, and vocational opportunities.



When your child transitions to a different level of service (e.g. *active therapy to monitor*) it does **NOT** mean that he or she has left the program, nor does it mean they cannot return to active therapy again. As your child's needs change, therapy levels can change as well. Therapists are available for support, to answer questions, to reassess skills and therapy needs, evaluate equipment needs, confer with teachers and **will** remain an important part of your child's team.

The Mission of the CCS MTP is to maximize functional independence of children with physical disabilities through family-centered care.



The physical and occupational therapy CCS provides through the MTP is **provided at no cost to you.** It is not based on your family's income. There is no financial eligibility requirement for occupational and physical therapy services. If you have questions about the therapy services, you can call your child's MTP occupational or physical therapist or the Therapy Supervisor.

Using CCS Services

Will your child need to change doctors?

Maybe, because CCS is only allowed to pay for doctors who are approved by the State CCS Program (“CCS paneled”).

Many doctors who treat children with special health care needs are already CCS paneled. You may ask your child’s doctor if he or she is “CCS paneled,” or you can call us to find out if you need to change to another doctor. If you do not have a doctor or you need to change doctors, we will help you find one.

We will give you an authorization (SAR #) to see a CCS-paneled doctor. [When possible, we will try to authorize the doctor of your choice.](#)



What is an authorization?

A CCS authorization is known as a SAR (Service Authorization Requested) and is used by providers to bill Medi-Cal or the State for medical services for your child.

A SAR# will be used when your child needs:

- A doctor visit for his or her CCS condition
- A special X-ray, medication or laboratory test not covered by the CCS physician SAR *
- A stay in the hospital for his or her CCS condition
- Treatment (medicine, x-ray, or surgery) for your child's CCS condition
- Supplies (i.e. tracheotomy supplies or feeding pumps) for his or her CCS condition
- Equipment (i.e. wheelchairs, orthotics or hearing aids) for his or her CCS condition

Your child's CCS-authorized doctor, therapist, or medical supplier sends us a request describing the service and why it is needed for your child's special healthcare needs. If it is found that the service is medically necessary, we can authorize the treatment, and you will get a copy of an authorization letter in the mail.



**Check the "Special Instructions" section of the SAR for information related to special tests and appointment scheduling.*

How long does an authorization take?

Once your case has been opened and we get a request, an authorization from us should take about a week. There can be exceptions so you may call your Nurse Case Manager if you do not receive an authorization after a week has passed.



Urgent or emergency care can be approved very quickly with a telephone call to your Nurse Case Manager from your child's doctor even if it is a day later. We can work with the provider at the time of need.



Be sure the doctor knows that your child has CCS.

It is important for you to keep the authorization letter. You may need to show it to your doctor or pharmacist so they can refer to the SAR #.

The Annual Review Process

Sixty days before your child's anniversary with us, we start to review your child's case for continued medical and financial eligibility.

The [Annual Review](#) has two parts:

Part 1: Medical Case Review:

Your child's Nurse Case Manager will review all the medical reports received from your child's doctors to see if your child's condition is still medically eligible. If we are missing any current information, the Nurse Case Manager will call your child's doctors to ask for more information. If we find that your child's condition has improved or is no longer CCS eligible, we will close your child's case. If you disagree with this decision, you have the right to appeal.

Please see page 27 for information about the appeal process.

Part 2: Financial and Residential Review:

Changes in your income can affect your financial eligibility. An HSS will mail you an interview letter so an appointment can be made to update your case record. You will need to bring or mail copies of the required paperwork to our administration office for review.



You will need to show proof of:

- Your address (CA Driver License or utility bill)
- Income (your CA tax return)
- Insurance (if you have private insurance)



If you do not have this paperwork, your HSS will work with you to find other ways to get the information we need.

We need this information in a timely manner, or your child could risk losing his or her future coverage!

If your child is adopted and has a known CCS medical condition there is no financial eligibility requirement. Please call your HSS for more details.

Your case can always re-open if your child's medical condition changes.

If you have private insurance, we will check to see if we provide services that your insurance does not. If your insurance covers all the services your child needs, and you do not need us at this time, your child's CCS case will close.



If you have any questions about residential or financial eligibility, you can call your local CCS office at (619) 528-4000.

If you do not agree with a CCS decision

A denial letter (known as a NOA) is our way to deny requested CCS services. If you disagree with a decision made by the CCS office you have the right to appeal.



Instructions for an appeal will be included with your NOA. Please note you have 30 days from the date of the NOA to file an appeal.

If CCS is changing or ending services and you want the services to continue during the appeal process, you **need** to ask for this in your appeal.

We will respond to your appeal within 21 days. MTU service appeals are different, so please ask your Therapy Unit Supervisor for help if needed.

What if my child does not have a CCS eligible condition?

If CCS is unable to provide services, we will do our best to help you find other agencies that may help. Please call CCS if you have any questions. [We are here to help you.](#)



California Children's Services

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Email: CCS.HHSA@sdcounty.ca.gov

https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/california_children_services.html