

Hemophilia Council of California
Advocacy & Policy Webinar

California Children's Services (CCS) - What You Need to Know

*Presented by
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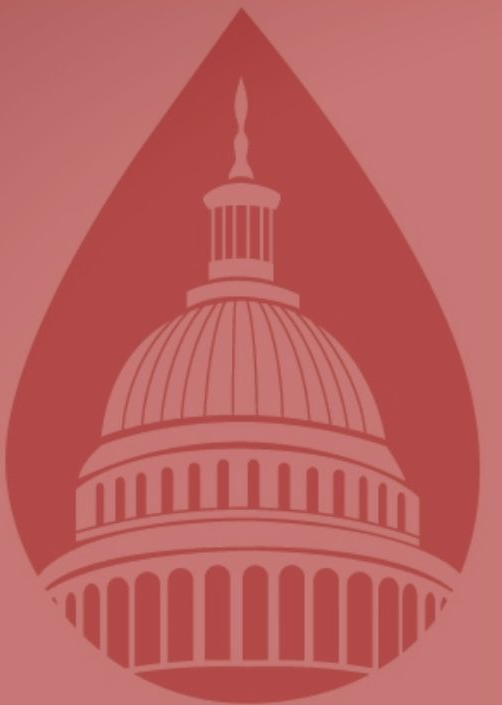


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Mission & Vision

- **Mission** – to improve access to care and treatment options in order to advance the quality of life for people with bleeding disorders through advocacy, education, and outreach in collaboration with our founding member organizations
- **Vision** – open access to quality innovative care and choice of treatment for all people with bleeding disorders



Who am I?



Meredith Wolfe
CCS Administrator
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and

Hemophilia Sister and Mother

What is CCS?



- California Children's Services (CCS) is a statewide program that arranges, directs, and pays for medical care, equipment, and rehabilitation.
- CCS covers only those health care needs related to your child's CCS eligible condition.
- Each county in CA has a local CCS office.

Who is eligible for CCS?



- Under **21 years old**.
- Has a health condition **covered by CCS** (including Hemophilia, von Willebrand's Disease & other coagulation disorders).
- Must be a resident of **California**.
- Meets one of **six qualifying financial criteria**.

What does CCS cover?



- Doctor visits and care, hospital stays, surgery, physical therapy and occupational therapy, tests, X-rays, medical equipment, and medical supplies
- Medical case management to help get special doctors and to refer you to other agencies, such as public health nursing and regional centers
- Medical Therapy Program, which provides physical therapy and/or occupational therapy in public school
- Travel Assistance to get to appointments

****Note – Each service has specific criteria for approval and must be medically necessary to be approved.**

How Do You Apply?



- First a “referral” must be made and application completed. Anyone can refer, including parents.
- CCS application and referral forms are available on the [CCS “How to Apply” page](#).
- Documents must be submitted to your [local \(county\) CCS Office](#). **Always keep a copy of what you submit and document when and how you submitted it.**

The Eligibility Process – Two Parts



- Medical Eligibility
 - A CCS medical consultant or nurse case manager will review medical records that document your child's medically eligible condition.
- Financial Eligibility
 - Automatic if already enrolled in Medi-Cal
 - If not enrolled in Medi-Cal
 - Proof of Residence
 - Income verification
 - Other health coverage information
 - Proof of application to Medi-Cal
 - Assessment and enrollment fee

Accessing Services



In most counties, your child's CCS-eligible condition is the responsibility of CCS, but in **Whole Child Model Counties**, it is the responsibility of the managed care plan.

CenCal Health	Central California Alliance for Health	Health Plan of San Mateo
San Luis Obispo, Santa Barbara	Merced, Monterey, Santa Cruz	San Mateo

CalOptima	Partnership HealthPlan of California
Orange	Del Norte, Humboldt, Lake, Lassen, Marin, Mendocino, Modoc, Napa, Siskiyou, Shasta, Solano, Sonoma, Trinity, Yolo

Accessing Services



- HTCs are generally designated Special Care Centers and patients on CCS should have access to an HTC:
<https://dbdgateway.cdc.gov/HTCDirSearch.aspx>
- Treatment is provided when prescribed by a CCS-approved doctor and authorized by CCS.
- For other reference, you can check CCS' website for providers.
<https://www.dhcs.ca.gov/services/ccs/Pages/CCSProviders.aspx>

Accessing Services



FYI...

In Whole Child Model counties...

- If your child is enrolled in the health plan, the Health Plan covers everything except for medications, including Factor and emicizumab-kwh (aka Hemlibra).
- In all counties, medications are the responsibility of Medi-Cal Rx.
- 800-977-2273

- **Exception for Factor:**
- If you get factor through your HTC, it may still be authorized by the County or State.
- If you get factor through a specialty pharmacy and some HTC pharmacies, it will go through Medi-Cal Rx/Magellan.

Beneficiary Responsibilities



- Must meet eligibility requirements – including application and yearly redetermination
- Notify CCS program staff and providers of any health insurance coverage at the time of coverage and agree to ask your insurance to pay for services before asking CCS
- Apply for Medi-Cal when requested by CCS staff
- **Update contact information** and any changes (i.e. financial or insurance changes) that may affect eligibility right away
- Pay any required fees

Beneficiary Responsibilities



- Notify CCS when your child is receiving services from a medical provider if they are not already aware
- Keep all appointments
- Follow all treatment plans
- Inform CCS of any medical emergency or non-scheduled hospitalization
- Remind your provider to notify CCS of changes to the treatment plan, termination of treatment and to send reports to the local CCS office

What if I get a Bill?



- Do Not Pay!
- Notify CCS right away if you get a bill and it is related to your child's CCS eligible condition.
- Sometimes billing errors happen. CCS can contact the biller and make sure they have the correct coverage information.

How Do You Renew?

**RENEWAL
REMINDER**

- Typically the County will notify you by mail when your eligibility is up for review/renewal, but you should also mark your calendar and contact the county to ensure no lapse in eligibility.
- **All the same documentation is required.**

Common Causes for Enrollment or Renewal Delay



- Lapse in Medi-Cal coverage.
- Missing verification of proof of residence.
- Missing verification of income (previous year's tax returns). **Keep in mind that if sources of income have changed since last year's taxes, that should be documented and included.**
- Pending Medi-Cal Eligibility.

What to Watch for...



- **BIC Card** – why did I get this?
- **Don't depend on CCS to send you your renewal information** – you should know your renewal date and mark your calendar to contact the county if you don't receive a reminder.
- **Appeals** – know your rights and how to appeal if a treatment or service is denied.

Who can you call for help?



- Contact your County Office for more information
- Or call HCC at 916-572-7771 or lkinst@hemophiliaca.org if you're having difficulty finding the right contact.

Information for CCS Providers



- New service authorization requests (SAR)s should be sent to the local County CCS Office.
- For patients already active in CCS:
 - Is the child in a WCM county?
 - Requests for physician services, lab work, studies go to Health Plan
 - Requests for Factor/Hemlibra go to DHCS
 - SAR Fax cover sheet is on the CCS webpage under CCS SAR Updates, or
 - Submit E-SAR
 - All pharmacy switches to Magellan as of 1/1/2022.
 - All other counties: request for all of the above is faxed to the county
 - Except after 1/1/2022 when all pharmacy switches to Magellan!
- CCS Numbered Letter for Treatment Drugs for Bleeding Disorders: NL 07-1120

Questions



Use **chat** or **unmute** (*6) to ask your questions.

Hemophilia Council of California

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Facebook: HemophiliaCouncilCA

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Overview of Upcoming Webinars



Upcoming webinars will take a deeper dive into...

- **July 20 – Graduate to Taking Charge of Your Own Care: Transitioning Young Adults with a Bleeding Disorder**
- **August 17– Health Care Access: GHPP**
- **September 28– Understanding Health Insurance: Speak My Language**
- **October 26– Women with Bleeding Disorders**

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Questions?

**HCC's 2022
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series**

Thank you for joining us!

Reminder: this webinar is part of a series of educational webinars presented by the Hemophilia Council of California.

A recording and slides will be available in a few weeks at

<http://www.hemophiliaca.org/education/webinars/>

NEED HELP? Contact Lynne Kinst at (916) 572-7771 or lkinst@hemophiliaca.org

