

<u>Delegated IPA California Children's Services Review Tool</u> Medi-Cal

IPA:		
Reviewer:		
Service Year:	Service Month:	
Review Year:	Review Month:	

	File Review: #1	Comments:	File Review: #2	Comments:	File Review: #3	Comments:	File Review: #4	Comments:	File Review: #5	Comments:
Member Full Name										
Member ID#										
File Type										
IEHP Enrollment Date										
IPA Eligibility Date										
CCS Referral Date										
CCS Status										
Date Case Closed										
Reason for Closure										
Identification of Potential CCS eligible conditions										
Documentation of a referral to CCS program										
Submission of supportive medical documentation to CCS										
Documentation of CCS status										
Care Coordination Facilitation										
Notification to PCP/Specialist upon Member transitioning out of CCS										
Individual Score	Case not A	Applicable								
File Summary										



IEHP Care Management Delegation Oversight: California Children's Services File Review - Data Dictionary

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Element Letter	Element Description	Regulatory Criteria/ Citation/ Policy	Methodology	Benchmark	Look-back Period	Data Source	Frequency	Sample Size
А	Identification of Potential CCS eligible conditions	IEHP Provider Policy and Procedure Manual Medi-Cal MC_12B	Review of clinical documentation to ensure that Members with CCS eligible diagnosis or condition is assessed for potential CCS program enrollment.	≥ 90%	9 Months	Care Management Clinical Documentation	Monthly	5 Cases
		DHCS Contract. Exhibit A. Attachment 11 Case					·	
		Management and Coordination of Care. 9. California Children's Services (CCS)	Review of clinical documentation to ensure Member was referred to CCS for program enrollment via telephone, same day mail, or fax. CCS form to be					
		IEHP Provider Policy and Procedure Manual Medi-Cal MC_12B	reviewed if applicable.					
D	Documentation of a referral to CCS program	IEHP Provider Policy and Procedure Manual Medi-Cal MC_25C2		≥ 90%	9 Months	Care Management Clinical Documentation	Monthly	5 Cases
	Submission of supportive	DHCS Contract. Exhibit A. Attachment 11 Case Management and Coordination of Care. 9. California Children's Services (CCS) IEHP Provider Policy and Procedure Manual Medi-Cal	Review of evidence to ensure all medical documentation pertinent to Members medical condition is submitted to CCS for program enrollment.			Care Management Clinical	·	
Е	medical documentation to CCS	MC_25C2		> 90%	9 Months	Documentation	Monthly	5 Cases
			Review of documented evidence indicating timely follow up to assess status of CCS referral 1. Approved					
		IEHP Provider Policy and Procedure Manual Medi-Cal MC_25C2	2. Pending 3. Denied			Care Management Clinical		
F	Documentation of CCS status	ADI 10 010: Beguirements for Coverage of Early and	4. Closed	<u>≥</u> 90%	9 Months	Documentation	Monthly	5 Cases
		APL 19-010: Requirements for Coverage of Early and Periodic Screening, Diagnostic, and Treatment Services for Medi-Cal Members Under the Age of 21	Review of clinical documentation to ensure that care coordination needs were facilitated between Member, PCP/Specialist and family/caregiver in coordinating available services.					
		DHCS Contract. Exhibit A. Attachment 11 Case Management and Coordination of Care. 9. California Children's Services (CCS) A. 5	This includes the review of documentation demonstrating care is established with an adult PCP when the Member is turning 21 years of age and					
		IEHP Provider Policy and Procedure Manual Medi-Cal	transitioning out of CCS.			Care Management Clinical		
G	Care Coordination Facilitation	MC_25C2		<u>≥</u> 90%	9 Months	Documentation	Monthly	5 Cases
	Notification to PCP/Specialist	IEHP Provider Policy and Procedure Manual Medi-Cal MC_12A.2	Review of documented evidence that the IPA notified Members PCP of CCS					
L	upon Member transitioning out of CCS	IEHP Provider Policy and Procedure Manual Medi-Cal MC_25C2	services ending due to Member turning 21 years of age	≥ 90%	9 Months	Care Management Clinical Documentation	Monthly	5 Cases