

Whole-Child Model (WCM)

MEMBER GUIDE



CalOptima
Health

What is the California Children's Services (CCS) program?

California Children's Services (CCS) is a state program that determines medical eligibility, provides authorizations for medical care, case management, financial assistance, and medically necessary physical and occupational therapy services to children with certain acute and chronic health conditions who meet the CCS eligibility criteria. CCS covers services for children from birth to age 21.

For CalOptima Health members, CCS is jointly managed by CalOptima Health, the Department of Health Care Services (DHCS) and the Orange County Health Care Agency (HCA). CalOptima Health manages all other Medi-Cal services.



What is the Whole-Child Model (WCM) program?

The WCM program means CalOptima Health, as a managed care plan, is responsible for providing all CCS-covered medical services and case management for CCS-eligible members. The WCM program helps CalOptima Health members up to 21 years of age who are eligible for CCS and their families get better care coordination, access to care and improved health results.

The HCA is still responsible for deciding CCS medical eligibility, CCS redetermination, and Medical Therapy Program (MTP) eligibility. HCA provides MTP services for members with MTP-eligible conditions in the Medical Therapy Units.

How does the CCS or Medi-Cal eligibility process work?

For CCS eligibility and redetermination, CalOptima Health will work with members and their doctors to get the clinical documents needed and then submit them to HCA for their review. For Medi-Cal eligibility and redetermination, members will work with the OC Social Services Agency. To avoid having a member's health care services delayed or stopped, it's important to respond to any requests from HCA and OC Social Services Agency.

Medical Therapy Program (MTP)

HCA continues to coordinate and provide MTP services. If members have any questions about MTP services, please call HCA at 1-714-347-0300. CalOptima Health or our health networks can help coordinate any medical supplies or Durable Medical Equipment like customized wheelchairs.

Will members be able to keep seeing their CCS paneled provider?

Most CCS providers in Orange County have a contract to work with CalOptima Health and our health networks. If members have just moved to Orange County and are CCS eligible, they can ask their child's CCS doctor if they work with CalOptima Health. If they do, their child can keep seeing the same doctor. If the doctor doesn't work with CalOptima Health, members have the right to keep the same CCS doctor for up to 12 months after becoming a CalOptima Health member. They may need to find a new doctor when that time is up. They can call CalOptima Health or their health network to ask to keep the same CCS doctor. If they are not sure if their child's doctor works with CalOptima Health, call CalOptima Health Customer Service toll-free at **1-888-587-8088 (TTY 711)**.

Will members be able to continue using their medicine?

Members should keep using the medicine they are taking as part of their treatment until their CCS doctor decides it is no longer needed.

What is available to members with WCM?

Case Manager (CM) or Personal Care Coordinator (PCC)

WCM members get support from either a CM or PCC from the case management team. A CM or PCC helps members navigate the health care system by working with the member's doctor(s). The CM or PCC is the primary contact for making sure the member gets the care and services they need.

Health Needs Assessment (HNA)

We will contact WCM members to complete the HNA. The HNA is a survey that asks questions about:

- ◆ Member information
- ◆ General physical and mental health status and care received
- ◆ Health history
- ◆ Specialty provider referral needs
- ◆ Current medicines and history
- ◆ Durable Medical Equipment needs
- ◆ Specialized therapy needs
- ◆ Activities of daily living like bathing, getting dressed and eating



Care Plan

Completing the HNA helps us create the member's care plan. A care plan tells members and their doctors what services they need and how to get them. The care plan is updated at least once a year or more often based on the member's health needs and shared with the member's doctors.

Provider Services Authorization

Before a member can get services for some types of care, their doctor or specialist needs to ask their health network or CalOptima Health for permission. This process is called prior authorization, prior approval or pre-approval. Prior authorization is not needed for emergencies or urgent care.

The CCS Service Authorization Request (SAR) is **not** the same as prior authorization. The health network, if applicable, or CalOptima Health must be contacted to start the prior authorization process if: (1) there is a scheduled appointment or procedure before moving to the CalOptima Health WCM program; or (2) receiving incontinence, nutritional or medical supplies. The member's doctor or specialist must contact the health network, if applicable, or CalOptima Health as soon as possible for any X-ray, lab or new health care service needs.

Age-out process

Members will age out and no longer be eligible for the CCS program once they are 21 years old. CalOptima Health will provide early notice starting at age 14. This helps members start to plan the next steps since they may not be able to continue seeing their current doctor(s). The member's CM or PCC will help them find a new doctor and specialist who works with adults to make sure their care continues. Members who are already 21 years old and have Medi-Cal with CalOptima Health will still get care under their Medi-Cal benefits.

Inter-county transfers

If members move, or are thinking of moving out of Orange County, they can call the HCA for help. CalOptima Health will work with the HCA to make sure the member's care plan and other medical records are sent to the CCS program in their new county.

For children with hemophilia, end-stage renal disease or those who are getting a transplant

All members who have a diagnosis of hemophilia, end-stage renal disease or are getting a transplant are assigned to CalOptima Health's network called CalOptima Health Community Network (CCN). CalOptima Health, or the member's current health network, will work with the member to change the health network to CCN.

CONTACTS

CalOptima Health Customer Service 1-888-587-8088 (TTY 711)

Call toll-free Monday–Friday, 8 a.m. to 5:30 p.m.
We have staff who speak your language.
Visit Customer Service
Monday–Friday, 8 a.m. to 5 p.m., at
500 City Parkway West, Orange, CA 92868.

California Children's Services County of Orange 1-714-347-0300

Call Monday–Friday, 8 a.m. to 5 p.m.
200 West Santa Ana Blvd., Suite 950
Santa Ana, CA 92701

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