

# Contra Costa Health Plan

## Utilization Management.

### Title: California Children Services (CCS) Formerly CCS Special Authorization & Payment

Policy #: UM15.050

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Author: Judith Louro, Administrative Consultant

Reviewed: Lynn Soloway RN, Auth & UM Director

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Reviewed: Dennis Hsieh, MD, JD, CMO

Revised: Jill Perez, RN, Auth UM Director

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Presented in UM Committee: 5/2022. 06/2024, 06/2025

#### Applies to:

Medi-Cal

Medicare

Commercial

BHC

State Sponsored

All

N/A

#### Regulatory/Accreditation:

DMHS:

HCFA:

DHS:

Other Reg. References:

NCQA:

N/A

#### Units:

Administration

Advice Nurses

All Staff

Business Services

Case Management

Health Ed/Cultural Ling.

Marketing

Member Services

Planning, Survey, Reg Affairs

Provider Affairs

Quality Management

Auth/Utilization Management

## POLICY

All children under 21 with potentially eligible CCS diagnosis are reviewed, identified and referred to the CCS Program for review and eligibility determination. Network Providers complete appropriate baseline health assessments and diagnostic evaluations to assist in the identification of CCS cases.

On a limited basis, when a CCS client requires a service for which no CCS paneled provider can be found, CCS may ask CCHP to authorize and pay for service, to be reimbursed by CCS to assure client is appropriately served.

## PROCEDURE

1. CCS identifies CCHP member client needing service which CCS is unable to find CCS paneled provider.
2. CCS asks CCHP UR liaison if CCHP can/is willing to authorize and pay for service to be reimbursed by CCS. CCS gives CCHP liaison the CPT codes for services needed.
3. CCHP agrees. CCHP Liaison sends CPT codes and name of selected provider to CCHP Provider Relations to obtain estimate of service cost.
4. CCHP liaison informs CCS of estimate. If \$1,000 or less for service (one or more visits combined), CCS agrees to pay for CCHP to authorize care, and notifies Public Health Finance. If over \$1,000, CCS reviews case with Public Health Finance, and with their approval, agrees that CCHP can authorize care.
5. CCHP authorizes care and sends approval letter to member and notifies CCS of provider name, location and appointment date. Authorization must contain this note for claims processing, "Special agreement between CCS/CCHP: Case initiated by CCS and agreed upon by CCHP. Please process

claims and notify Alycia/Sylvia.”

6. CCHP pays provider at CCHP provider rate. CCHP sends requests to CCS for reimbursement to the CCS Program Administrator or designee. CCS reviews and approves for reimbursement and forwards requests and all back up documents to Public Health Finance for fund transfer journal. Back up documents needed should include proofs of payments, copies of posted payments from General Ledger, cost centers, sub-accounts, and reimbursement amounts.

7. CCS tracks Special Authorization and Payment cases on Administrative Office log.