



KERN HEALTH SYSTEMS POLICY AND PROCEDURES			
Policy Title	Services for Children with Special Health Care Needs	Policy #	3.56-P
Policy Owner	Utilization Management	Original Effective Date	05/2006
Revision Effective Date	7/2024	Approval Date	3/3/2025
Line of Business	<input checked="" type="checkbox"/> Medi-Cal <input type="checkbox"/> Medicare <input type="checkbox"/> Corporate		

I. PURPOSE

- A. To outline Kern Health System (KHS) standardized processes and procedures utilized for the identification of Children with Special Health Care Needs (CSHCN) for identification of CSHCN at enrollment and on a periodic basis thereafter to ensure timely access to pediatric specialists' sub-specialists, ancillary therapists, transportation, and specialized durable medical equipment (DME) and supplies.

II. POLICY

Kern Health Systems (KHS) has a program for Children with Special Health Care Needs (CSHCN), which includes the following elements:

- A. Standardized procedures for the identification of CSHCN, at enrollment and on a periodic basis after enrollment.
- B. Methods for ensuring and monitoring timely access to pediatric specialists, sub-specialists, ancillary therapists, transportation, and specialized durable medical equipment (DME) and supplies.
- C. Consideration of assignment to a specialist to act as a Primary Care Physician (PCP) and standing referrals or other methods for services.
- D. Monitoring that each new member receives an initial health assessment that identified and specialized health care needs. A program for case management or care coordination for CSHCN, including coordination with other agencies which provide services for children with special health care needs (e.g., mental health, substance abuse, Regional Center, California Children's Services (CCS), local education agency, child welfare agency, California Department of Developmental Services (DDS)); and,

- E. Methods for monitoring and improving the quality, Health Equity, and appropriateness of care for children with special health care needs.

Services for CSHCN will be provided in accordance with the contractual requirements outlined in the following source:

1. Department of Healthcare Services (DHCS) Contract Exhibit A – 11 (7)

III. DEFINITIONS

TERMS	DEFINITIONS
Children with Special Healthcare Needs (CSHCN)	Those who have or are at increased risk for a chronic physical, behavioral, developmental, or emotional conditions and who also require health or related services of a type or amount beyond that required by children generally.

IV. PROCEDURES

A. IDENTIFICATION

Children under the age of 21 who may be identified to qualify for services:

1. Have or are at an increased risk for a chronic physical, developmental, behavioral, or emotional condition.
2. May have a disability or chronic medical condition due to complications of prematurity, metabolic disorder, chromosomal abnormalities, or congenital abnormalities.
3. Require health and related services of a type or amount beyond that required by children generally.

B. PROVISION OF SERVICES

KHS requires its contracted Primary Care Physicians (PCP) on a periodic basis to identify their assigned members who are CSHCN and to manage their care and referrals. When a CCS eligible condition is identified, the information is forwarded to CCS with appropriate documentation for review for care coordination by CCS. Treatment for CCS-eligible conditions is not covered under KHS' Medi-Cal plan for members less than 21 years of age but is covered by the State of California under the CCS Program.

C. COORDINATION OF CARE

1. Upon identification of a CSHCN, the PCP will perform as the member's medical home and will be responsible for:
 - a. Monitoring, care coordination, and case management requirements in relation

- to the member's ongoing special health care needs.
 - b. Documentation of all tests, referrals to specialist, consultation notes, follow-up services and recommendations, pertaining to the member are to be filed as part of the member's medical record.
2. KHS Utilization Management (UM) Department will identify CSHCN through the following:
- a. Referral and authorization request submitted by the PCP or specialists with any qualifying diagnosis.
 - b. Medical record review with documentation supporting the clinical indications for additional services.
 - c. KHS' UM Health Services Department will forward any identified services that may be provided through the KHS Health Education Case Management, Disease Management or Quality Improvement Department for coordination of care.

D. TRACKING AND MONITORING

KHS UM Health Services Department will evaluate the process on an ongoing basis to implement improvements to the identification, referral, care coordination processes and to identify potential quality improvement issues.

KHS tracking and monitoring activities will include:

- 1. UM staff will monitor timely access to pediatric Specialists, sub-Specialists, ancillary therapists, transportation, and DME and supplies.
- 2. Monitor member's assignment to a Specialist acting as PCP, and utilization of Standing Referrals, or other methods, as necessary.
- 3. Monitoring and improving the quality, Health Equity, and appropriateness of care for children with special health care needs.

V. ATTACHMENTS

Attachment A:	N/A
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VI. REFERENCES

Reference Type	Specific Reference
DHCS Contract (Specify Section)	Approved by DHCS 1/26/2023 per R.0123 for 2024 OR.

Choose an item.	
Choose an item.	

VII. REVISION HISTORY

Action	Date	Brief Description of Updates	Author
Revised	7/2024	Purpose statement was added to the policy.	UM
Review	03/2024	Policy was due for annual review. No revisions needed.	E.E. – HS Manager
Revised	10/2022	Updated per 2024 DHCS contract. Exhibit A Attachment III Section 4.3.9. A, B, C. Approved by DHCS 1/26/2023 per R.0123 for 2024 OR.	UM
Revised	03/2015	Routine review initiated by Compliance Department.	UM
Revised	01/2011	Policy revised by Director of Health Services	UM
Revision	11/2005	Created to comply with DHCS Contract 03-76165 DHCS Contract A-11 (7)	UM

VIII. APPROVALS

Committees Board (if applicable)	Date Reviewed	Date Approved
Choose an item.		
Choose an item.		

Regulatory Agencies (if applicable)	Date Reviewed	Date Approved
Department of Health Care Services (DHCS)	01/26/2023	01/26/2023
Choose an item.		
Choose an item.		

Chief Executive Leadership Approval *		
Title	Signature	Date Approved
Chief Executive Officer		
Chief Medical Officer		
Chief Operating Officer		
Choose an item.		
*Signatures are kept on file for reference but will not be on the published copy		



KERN HEALTH SYSTEMS

Policy and Procedure Review

KHS Policy & Procedure: 3.56-P Services for Children with Special Healthcare Needs

Previous implemented version: 03/2015

Reason for revision: The Policy was due for annual review; a purpose statement was added.

Director Approval		
Title	Signature	Date Approved
Cristine Pence Senior Director of Health Services		
Dr. Maninder Khalsa Utilization Management, Medical Director		
Dr. Sukhpreet Sidhu Population Health, Medical Director		
Michelle Curioso Director of Population Health Management		

Date posted to public drive: _____

Date posted to website ("P" policies only): _____