

CHDP NEWS

San Francisco Child Health and
Disability Prevention (CHDP) Program



Volume VI Issue IV

Winter 2013

SF CHDP's quarterly newsletter - a great way to stay abreast of CHDP updates to assist your practice!

Contact Tina by email at tina.panziera@sfph.org, if you prefer an e-copy.

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**CHDP Nurses,
Dental Hygienist,
and
Health workers
need a current
PM160 form to
do care
coordination!**

CHDP Success Story: How your CHDP Nurse Can Case Manage a Developmental Delay Referral

We received a PM 160 on a 3 year old that was referred to GGRC for an expressive language delay. Using our Cantonese speaking health worker as an interpreter, the CHDP Public Health Nurse was able to contact the mother regarding the referral. As the client was now 3 years of age, the case was transferred to SFUSD. Together with mom on the line, a telephone call was placed to the SFUSD Pre-school Intake Unit. There was no record of this client in the system. A telephone call was then made to GGRC to inquire about the referral. It turned out the referral was never made as the family never responded to GGRC's telephone calls or outreach. The case was closed prior to the transition plan. The CHDP PHN was notified, however, that the client was receiving some therapy through the Hearing and Speech Center of Northern California. Again, with mother on the line, the PHN called the therapist at the Hearing and Speech Center. She acknowledged that the client needed further treatment, and agreed to send the latest speech evaluation report to mother so she could bring it with her to the school district.

As a new referral to SFUSD was needed, the CHDP nurse, using the Cantonese interpreter, assisted mother in completing the 5 page long SFUSD Special Education Unit Preschool Intake Unit Questionnaire. The nurse was able to explain to mom the exact process on where to deliver the forms and what to expect from the school district. Once the client was assigned to a case worker at the school district, the CHDP nurse was then able to contact the worker to inquire about timelines and advocate for services. The client is now receiving Speech Therapy through the school district and per mother, the child is doing very well. Feedback was provided to the child's referring provider and the case was closed to CHDP case management.

In addition to the above, the CHDP nurse was also able to assess the family for additional needs. It turned out that the family was in transitional housing (had a history of homelessness) and needed assistance with childcare. Information for APA Family Support Services, Wu Yee Children Services, and Support for Families of Children with Disabilities was provided to the mother. The PHN was also able to follow-up on these referrals.

Healthy Smiles: CHDP Helps Your Patients Get Dental Care

Un-insured patients?

CHDP helps our most vulnerable children receive well child medical exams and coordinates identified needed follow-up treatment. The most needed follow-up treatment continues to be dental referrals. If a child “falls off” of their insurance, or is un-insured, SF CHDP can still help your patients get their needed dental treatment. But only if the PM160 form is completed for this child. If you have a CHDP or former CHDP patient, they may qualify.

What is the CHIP/CHDPT Program?

In an effort to serve the indigent population of San Francisco, the California Healthcare for Indigents Program (CHIP), managed by the San Francisco Dept. of Public Health **AB 75 Project** pays to provide necessary medical or dental services to low-income children identified through the Child Health and Disability Prevention Follow-up Treatment Program (CHDPT). With coordination by the **AB75 Project**, the dental follow-up treatment services are provided in two ways: 1. through the Dept. of Public Health dental clinics and 2. through dentists enrolled in the CHDP Physician Program. <http://www.sfdph.org/dph/comupg/oservices/medSvs/AB75/AB75CHDPT.asp>



Who is eligible for the CHIP/CHDPT Program?

Any CHDP screened child who is under 21 years of age and Medi-Cal eligible with a share of cost; or who is **under 19 years of age**, not covered by health insurance or any publicly-funded program, and whose family income is not more than 200% of the Federal poverty level.

What must the AB 75 Project receive from you, the medical provider?

- PM160 must have, (on line 2, column C) code 5 on the form, **OR**
- Indication of a dental referral needed in the comments' section of PM160 form
- PM160 form is valid for one year from date of service

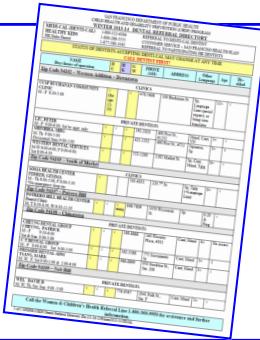
Children may only be referred to a CHIP dentist from the SF CHDP office!

*If you have a current or former CHDP patient who needs dental care, and
who may qualify for the CHIP/CHDPT program,
please call AB75 CHIP/CHDPT Case Manager: Sandra Gomez 575-5704*

UPDATED Winter 2013/14 CHDP Dental Directory Available Now On-line

<http://www.sfdph.org/dph/comupg/oservices/medSvs/dentalSvcs/dentalSvcs.asp>

CHDP Dental Referral Directory: [English](#), [Chinese](#), [Spanish](#)



Welcome New Dentist!

ADRIANA GREENE 285-6966
2480 Mission St., # 106 94110
Spanish Language
Sees age 3 and up

New Poster to Fight Tooth Decay ~ Now Available in 3 languages

(English, Spanish and Chinese)

Call: 575-5719 to receive Free posters for
your clinic

Healthy Kids need Healthy Teeth!

It hurts baby's teeth to "Sip" juice, soda or milk while sleeping or sitting for



a long time in a car seat or stroller.



Give Tap Water *
Instead!



- How to classify tooth decay during a well child dental health assessment?
- Which key oral health messages make the biggest impact?
- Where to refer a toddler who has beginning tooth decay?

IF NOT ~ It's time to schedule a
Free CHDP Oral Health Training
for you and your staff ! Call: **575-5719**

Check This Out!



CA CHDP Dental Training!

[http://www.dhcs.ca.gov/services/chdp/Pages/
CHDPDentalTraining.aspx](http://www.dhcs.ca.gov/services/chdp/Pages/CHDPDentalTraining.aspx)

This is a great way to review information
taught in our IN-Office Training!
Contains Links to: Videos, Brochures,
Guidelines and Research Studies!!





Vision and Hearing Re-Check Guidelines



CHDP requires that providers screen for visual and hearing problems at each health assessment visit. For children 3 through 20 years and 11th months of age, a visual acuity exam using the appropriate vision chart and a hearing exam using a pure tone air conduction audiometer must be performed.

VISION re-checks and referrals:

- For 3 years olds: if they are uncooperative or fail, bring them back in 6 months. If they fail the screen or can't complete the second screen, refer to a specialist.
- For 4 years olds: if they are uncooperative or fail, bring them back in 1 month. If they fail the screen or can't complete the second screen, refer to a specialist.
- For 5 years and up: If they can't cooperate or they fail the first screen, refer to a specialist.

Refer if there is a two line difference or more in visual acuity between the eyes on a standardized chart (e.g. 20/25 in one eye and 20/40 in the other eye).

HEARING re-checks and referrals:

Refer children who fail to respond to any frequency on two screenings separated by an interval of at least 2 weeks and no later than 6 weeks after the initial screening.

**** Fill out a PM 160 if you bring them back for the re-screen, marking the 'screening procedure re-check' box to get reimbursed for this visit. ****

Please contact your CHDP Provider Relations Nurse for any questions regarding Vision and Hearing Screenings. You may also refer to your CHDP Health Assessment Guidelines, Section 600, Sensory Screening for more information.

Attached with this newsletter are the optometrist and hearing referral resources. Please call to make sure provider still accepts Medi-Cal patients prior to scheduling an appointment.

CHDP Providers Information

REMINDER

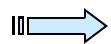
<http://www.dhcs.ca.gov/services/chdp/Pages/CHDPPLPIN.aspx>



CHDP PIN # 12-08:

By November 30, 2013, ALL CHDP providers MUST integrate the use of the WHO growth charts for CHDP exams. NO Provider Information Notices in 2013 yet!

CHDP Bulletin



<http://www.medi-cal.ca.gov/> click on Provider Bulletins, scroll to bottom.

Bulletin # 106 – August 2013

1. **ACA Self Attestation Form Now Available** on the [ACA Increased Medicaid Payment for Primary Care Physicians](#) page of the Medi-Cal website. Physicians **must** attest online to be eligible for the increased payments. Physicians must meet the following criteria: A physician with a specialty designation of family medicine, general internal medicine, pediatric medicine or a subspecialty within one of the listed specialties **AND** Meeting at least one of the following qualifications: Board certified in a specialty or subspecialty as recognized by the American Board of Medical Specialties, the American Osteopathic Association and the American Board of Physician Specialties; **OR** at least 60% of the services billed to Medi-Cal for the most recently completed calendar year fall within the Evaluation and Management (E&M) or vaccine administration codes covered by the regulation. Services provided at FQHCs and RHCs are NOT eligible.
2. **Get the Latest Medi-Cal News: Subscribe to MCSS Today.** Medi-Cal Subscription Service (MCSS) is a free service that keeps you up-to-date on the latest Medi-Cal news. Go to MCSS Subscriber Form, enter your email address and ZIP code, then customize by selecting subject areas for your preference.
3. **Drug Safety Communication: Post-Operative Codeine Use in Children**
To read the full MedWatch safety alert, please see the “Codeine Use in Certain Children after tonsillectomy and/or Adenoidectomy: Drug Safety Communication. Life-threatening adverse events or death” article can be found on the FDA Safety Information Web page at <http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm315627.htm>
4. **Drug Safety Communication: Valproate Use in Pregnant Women** – valproate anti-seizure products are contraindicated and should not be taken by pregnant women for the prevention of migraine headaches. The article can be found on the FDA web page at <http://www.fda.gov/Drugs/DrugSafety/ucm350684.htm>
5. **New Aid Codes for Safety Net and Drug/Freeing Felon Families** – K1 and 3F identify CalWORKs Safety Net and Drug/Fleeing Felon Families effective on or after April 1, 2013.

Bulletin # 107 – September 2013

1. **ACA Rate Increase to Medicare Equivalent for Specified Primary Care Services**
To facilitate these increased payments, a crosswalk of HCPCS local codes to CPT4 will be required. Please go to the Medi-Cal website for a detailed list of crosswalk and modifiers.
2. **ICD-10 Testing Results to be Addressed in Medi-Cal Update**
Medi-Cal will select stakeholders for limited testing in the quarter of 2014 and will conduct testing in the 2nd quarter of 2014. Results will be published in August of 2014. For more information, providers may email questions to ICD-10Medi-Cal@xerox.com

Bulletin # 108 – October 2013

1. **ACA Expansion of Medi-Cal Beneficiaries to include Low-Income Adults.** Additional information will be released in a future *Medi-Cal Update*.
2. **ACA Increased Medi-Cal Payments for Primary Care Physicians**
The increased payments are retroactive for dates of service on or after January 1, 2013. The first interim payment will be issued in October. A final settlement of payment owed but not reimbursed by the interim payment will be issued as early as February 2014. The increased payments are **not** automatic. Providers **must** attest to their eligibility online.
3. **ICD-10 Provider Readiness Survey**
While participation is not required, Medi-Cal encourages providers and submitters, including Family PACT to take the readiness survey. Responses will help Medi-Cal to assess any issues or concerns that may hinder ICD-10 compliance. All responses will be kept confidential and anonymous.

Bulletin # 109 – November 2013

1. **CHDP Pre-Enrolment Application (DHCS 4073, English) has been Updated** to remove Healthy Families, as Healthy Families is no longer enrolling children. The application has also been updated to include premium assistance programs under Covered California.
2. **Hot New Enhancement Added to the Medi-Cal Website** to help providers easily access important policy and program information.
3. **Twenty New Aid Codes** – as a result from the ACA, 20 aid codes in three new series relative to children, adults, inmates, pregnant women as well as parents and other caretaker relatives are implemented effective for dates of service on or after January 1, 2014. Changes will be released in a future *Medi-Cal Update*.
4. **New Aid Codes for Hospital Presumptive Eligibility Determined Coverage**
5. **New Aid Code L1 Transitions From LIHP/MCE to Medi-Cal**
6. **New Aid Codes for Optional Targeted Low Income Children Program**
T1, T2, T3, T4, T5, T6, T7, T8, T9, T10 will be effective on or after January 1, 2014.

7. **January 2014 Medi-Cal Webinars**

Beginning January 7, 2014, and continuing throughout January, Xerox State Healthcare, LLC, the DHCS Fiscal Intermediary (FI) for Medi-Cal, invites providers to participate in Medi-Cal provider training webinars, which will be as follows:

- Held Tuesdays, Wednesdays and Thursdays at 10 am and 2pm
- Hosted in real-time by one of the provider regional representatives
- Formatted to allow providers to print class materials, ask questions, and hear and view presentations as if in class
- Offered as basic, advanced and specialty classes similar to those offered in the past
- Accessible on the [Medi-Cal Learning Portal page](#) of the Medi-Cal website or the [home page](#) of the Medi-Cal website

NEW Medi-Cal Aid Codes (*Former Healthy Families Program*)

PLEASE NOTE: New Codes (H4, H5) mean these children are covered by Medi-Cal and (Denti-Cal) only through their 18th year and 364 days.

- **H4, H5 only covered from ages 6 to under 19 years old**
- H1 ages 0-1 and H2, H3, ages 1 to 6 y .o.

Most Medi-Cal children are covered through their 20th year, (up until they turn 21)

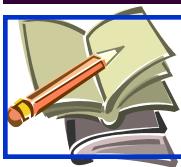
Code	Benefits	SOC	Program/Description
H1	Full	No	Medi-Cal Targeted Low Income Program for Children (Title XXI). Infants. Provides full scope, no-cost Medi-Cal coverage for infants, ages 0 to 1 , whose family's income is above 200 percent up to and including 250 percent of the FPL.
H2	Full	No	Medi-Cal Targeted Low Income Program for Children (Title XXI). Children ages 1 to 6 . Provides full scope, no-cost Medi-Cal coverage to children whose family's income is at or below 133 percent up to and including 150 percent of FPL.
H3	Full	No	Medi-Cal Targeted Low Income Program for Children (Title XXI). Children ages 1 to 6 . Provides full scope Medi-Cal coverage with a premium payment to children whose family's income is above 150 percent up to and including 250 percent of the FPL.
H4	Full	No	Medi-Cal Targeted Low Income Program for Children (Title XXI). Children ages 6 to 19 . Provides full scope, no-cost Medi-Cal coverage to children whose family's income is above 100 percent up to and including 150 percent of the FPL.
H5	Full	No	Medi-Cal Targeted Low Income Program for Children (Title XXI). Children ages 6 to 19 . Provides full scope Medi-Cal coverage with a premium payment to children whose family's income is above 150 percent up to and including 250 percent of the FPL.

WELCOME New CHDP PHN



We would like to welcome our new Public Health Nurse, Amy Au. She received her BSN from Dominican University of California, San Rafael. She has volunteer experience at Glide Health Services and Head Start, and has worked in Field Nursing conducting home visits for high-risk pregnant mothers, children, and families.

Amy plans to continue serving the vulnerable population through CHDP. She is fluent in English, Cantonese, and Mandarin and plans to use her language skills in case management for the medically underserved children and youths of San Francisco.



Upcoming Events & Trainings

ATTN:

An **Audiometric Screening Training** is being planned for CHDP providers in 2014. Stay tune for more information.

What:

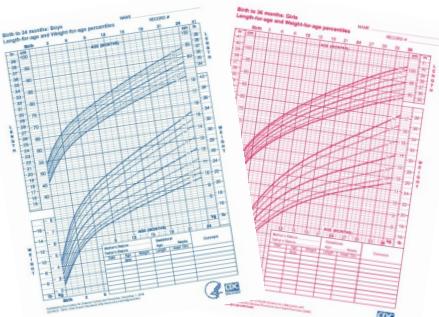
A two-part training with lecture and skill session.

Participants will learn proper techniques to screen your CHDP patients.

Participants must attend the lecture and one skill session.

This training meets the requirements of the CHDP Health Assessment Guidelines.

Who: Health care professionals who conduct hearing screening on children. Priority given to SF CHDP providers.



Remember To Use the Updated Growth Charts

WHO Growth Standards Now Recommended by AAP, CDC and the CHDP Program for use for Infants and Children Aged 0 to 24 Months

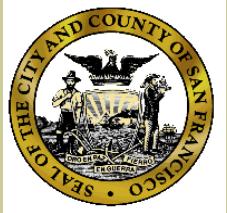
SF CHDP webpage!

Bookmark the SF CHDP Website for:

- Answers to your frequently asked questions
- Forms
- Patient Resources
- Updates

<http://www.sfdph.org/dph/comupg/oprograms/MCH/CHDP.asp>

The screenshot shows the CHDP Program page with sections for 'Our Programs' (Maternal, Child & Adolescent Health Section, Child Health & Disability Prevention (CHDP) Program), 'What we Offer' (Child health services, dental services, school health exams, sports physicals, low-income children birth through 18 years, Head Start & State Preschool programs), 'Who is Eligible' (Children up to age 21), and 'What is the CHDP Gateway?' (Information about the CHDP Gateway). The page also includes links for 'Provider Information', 'Quick Search', and a 'How does this restaurant rate?' section.



SAN FRANCISCO
DEPARTMENT OF
PUBLIC HEALTH

CHDP PROGRAM

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Fax: (415) 558-5905
Toll-Free Line:
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CHDP website: <http://www.dhcs.ca.gov/services/chdp/Pages/default.aspx>

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Vacant Nursing Position