



***Residency:***

Alabama residents. Residency is defined as physically residing within the state of Alabama at the time of enrollment. The enrolled individual must remain within the state for continued eligibility.

***Medical:***

Any child with a special health care need is eligible for services based on individual needs and the availability of the service within the agency. The seven programs in CRS are: the Information and Referral Program, the Specialty Clinical Medical Program, the Specialty Clinical Evaluation Program, the Client/Family Education Program, the Care Coordination Program, the Early Intervention Program, and the Parent Connection Program.

***Eligible Conditions:***

Treatment in the CRS Clinical Medical Program is provided for the following conditions:

Cardiac conditions *	Neurosurgical/neurological conditions
Cerebral palsy	Orthopedic impairments
Cleft lip and palate	Plastic surgical conditions
Craniofacial conditions	Seizures
Cystic fibrosis	Scoliosis
Hearing loss	Spina bifida
Hemophilia	Traumatic brain injury
Juvenile rheumatoid arthritis	Urological conditions
Limb deficiency	Visual impairments

\* Excluding transplantation

***Excluded conditions:***

None specifically excluded. Contact the Program directly for more information

***Financial:***

***General Financial Eligibility:***

Any child with a special health care need is financially eligible for services. Parents are asked to financially participate in the medical care of their child on a sliding fee scale and to utilize any third party coverage they may have available such as Medicaid, private health insurance, Civilian Health and Medical Program of the Uniformed Services (CHAMPUS), State Child Health Insurance Program (ALL-Kids), etc.

***Financial Eligibility for Initial Screening:***  
See “General Financial Eligibility.”

***Family Co-Payment or Financial Participation Requirements:***  
See “General Financial Eligibility.”

**DIRECT CARE SERVICES (PROVIDED OR PAID FOR):**

The following direct health care services are provided through CRS programs:

Appliances	Nursing services
Assistive technology	Nutritional counseling
Audiological services	Physical therapy
Care coordination services	Physician services
Client/family education services	Occupational therapy
Early intervention services	Social work services
Hospitalization	Special dental/orthodontic services
Laboratory services	Speech/language therapy
Low Vision services	Surgery
Medications	Transportation reimbursement

***Excluded Direct Care Services:***

None specifically listed. Contact the Program directly for more information.

**HOW/WHERE DIRECT CARE SERVICES ARE PROVIDED:**

Services are provided at CRS clinics, approved hospitals, rehabilitation centers, the client’s home or school, and other appropriate agency and community settings as needed.

***Specialty Clinics/Programs:***

CRS conducts clinics for the following conditions:

Cerebral palsy	Neurosurgical/neurological conditions
Cleft lip and palate	Orthopedic impairments
Craniofacial conditions	Scoliosis
Cystic fibrosis	Seizures
Hearing loss	Spina bifida
Hemophilia	Urological conditions
Juvenile rheumatoid arthritis	Visual impairments

***Coordination of Financial Benefits and Services:***

CRS acts as payor of last resort after Medicaid, SCHIP, private insurance and family co-payment.

**SPECIALIZED OR UNIQUE DIRECT CARE SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC:**

CRS sponsors committees to advise in the development and enhancement of the program, promote public awareness, and advocate for individuals with special health care needs. These include the Medical Advisory Committee, Hemophilia Advisory Committee, and the State and Local Parent Advisory Committees.

CRS employs parent as parent coordinators in the state and local offices to provide information and support to families of children with special health care needs, coordinate the Local Parent Advisory Committee, and participate in program planning activities. CRS publishes a Parent Connection Newsletter and has developed a Parent-to-Parent Network and Parent Resource Centers complete with internet connections.

***Specialized Evaluation Services:***

CRS provides specialized evaluation services to address unique client needs related to specific medical problems.

Augmentative Communication/Technology (ACT) Evaluation

The multidisciplinary ACT Team offers evaluation and intervention planning for clients of all ages with chronic, disabling conditions who may require assistive technology to reach their maximum potential. This evaluation service is offered jointly with other divisions within the Department of Rehabilitation Services.

Feeding Evaluation

The multidisciplinary Feeding Team offers evaluation, prevention and intervention services for infants and children with medical conditions which result in feeding problems that interfere with adequate nutrition.

Infant/Toddler Developmental Evaluation

CRS provides multidisciplinary evaluation services related to and in accordance with the IDEA, Part C Program.

Seating and Positioning Evaluation

The Seating and Positioning Team offers evaluation and recommendations for adaptive seating and positioning equipment in order to maximize client functioning.

***Special Grants:***

Hemophilia Service Grant

CRS receives one grant from Hemophilia of Georgia. It provides funds for comprehensive care for persons with bleeding disorders through the Maternal and Child Health Bureau.

## **II. ENABLING SERVICES**

Enabling services are defined as services that allow or provide for access to and the derivation of benefits from the array of basic health care services and includes such things as transportation, translation services, outreach, respite care, health education, family support services, purchase of health insurance, case management, coordination of Medicaid, WIC and education.

### **ELIGIBILITY CRITERIA FOR ENABLING SERVICES**

***Age:***

Same as "Direct Health Care Services" above.

***Residency:***

Same as "Direct Health Care Services" above.

***Medical:***

Same as "Direct Health Care Services" above.

***Financial:***

Same as "Direct Health Care Services" above.

### **ENABLING SERVICES (PROVIDED OR PAID FOR):**

The following enabling services are provided through CRS programs:

Appliances	Social work services
Assistive technology	Translation assistance
Care coordination services	Transportation reimbursement
Client/family education services	

***Coordination of Services:***

CRS provides care coordination to all enrolled clients. Essential components of care coordination include a comprehensive assessment of client/family resources and needs, development of a Patient/Family Care Plan (PCP), coordination of service delivery by multiple providers, review of services received, evaluation of outcomes, and periodic revision of the PCP.

***Excluded Enabling Services:***

None specifically listed. Contact the Program directly for more information.

**HOW/WHERE ENABLING SERVICES ARE PROVIDED:**

Same as "Direct Health Care Services" above.

***Specialty Clinics/Programs:***

Same as "Direct Health Care Services" above.

**SPECIALIZED OR UNIQUE ENABLING SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC:**

CRS coordinated a series of workshops across the state regarding special education services provided through the Individuals with Disabilities Education Act (IDEA), including Individualized Education Plan development. Families as well as the general public were encouraged to attend.

**III. POPULATION-BASED SERVICES**

Population-based services are defined as prevention services and personal health services that are developed and available for the entire MCH/CSHCN population of the state rather than for individuals on a one-on-one situation. Disease prevention, health promotion, and statewide outreach are major components. Common among these services are newborn screening, lead screening, immunizations, SIDS counseling, oral health, injury prevention, nutrition, and outreach/public education.

**POPULATION-BASED SERVICES (PROVIDED OR PAID FOR):**

The following population-based services are provided through CRS:

None specifically listed. Contact the Program directly for more information.

**HOW/WHERE POPULATION-BASED SERVICES ARE PROVIDED:**

Not applicable.

**SPECIALIZED OR UNIQUE POPULATION-BASED SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC.:**

None specifically listed. Contact the Program directly for more information.

**IV. INFRASTRUCTURE BUILDING SERVICES**

Infrastructure building services are defined as services that address the development and maintenance of comprehensive health services systems. Infrastructure building services include: needs assessment, evaluation, planning, policy development, coordination, quality assurance, standards development, monitoring, training, applied research, development of information systems and systems of care (which are family-centered, community-based, etc.), development and maintenance of health services standards/guidelines, training, data, and planning systems, etc.

**INFRASTRUCTURE BUILDING SERVICES:**

The following infrastructure building services are provided through CRS:

None specifically listed. Contact the Program directly for more information.

**HOW/WHERE INFRASTRUCTURE BUILDING SERVICES ARE PROVIDED:**

Not applicable.

**SPECIALIZED OR UNIQUE INFRASTRUCTURE BUILDING SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC:**

***Special Grants:***

Pediatric Traumatic Brain Injury Grant

CRS received a three-year grant from the Maternal and Child Health Bureau to develop a statewide system of care for pediatric survivors of traumatic brain injury (TBI). Grant activities began in FY 1998 and include developing and implementing the following: (1) strategies to increase interagency collaboration; (2) education and training programs for survivors, families, and/or professionals; and (3) a replicable pre-discharge model to be used in acute care settings for long-term resource and service planning. An additional fourth year of funding was awarded for FY 2001. A one-year post demonstration grant was awarded for FY 2002.

Genetics Demonstration Grant

CRS received a three-year grant from the Maternal and Child Health Bureau to improve health outcomes for young children with genetic conditions through early access to an integrated system of services within a three county area. Grant activities began in September 1999. CRS' partner in this effort is the University of South Alabama, Department of Medical Genetics. A one-year no-cost extension was granted for FY 2002 to complete evaluation activities.

**OUT-OF-STATE SERVICES:**

A child currently in the Clinical Medical Program may be eligible to receive services out-of-state if the treating CRS physician requests services not currently available in Alabama.

**STATUTORY/REGULATORY AUTHORITY OF THE PROGRAM:**

Ala. Code §§ 21-3-1, et. seq.; 16-38-1, et. seq. (Supp. 1992)

Ala. Admin. Code r. 290-070-010, et. seq. (1990)