

# Texas

## ***Children with Special Health Care Needs (CSHCN) Services Program***

***Formerly: Chronically Ill and Disabled Children's (CIDC) Services Program***

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**Contact Person:** Lesa Walker, MD  
Acting Division Director

**Telephone:** (512) 458-7355  
ext. 2576

**Fax:** (512) 458-7238

**Address:** Children with Special Health Care Needs  
Planning and Policy development Division  
Bureau of Children's Health  
Texas Department of Health  
1100 West 49<sup>th</sup> Street  
Austin, TX 78756-3179

**Email Address:** lesa.walker@tdh.state.tx.us

**Web Site:** <http://www.tdh.state.tx.us/cshcn/cshcnhome.htm>

**Toll-free Hot Line:**

**Telephone:** 1-800-252-8023  
(Texas only)

### ***MISSION STATEMENT***

To support family-centered, community-based strategies for improving the quality of life for children with special health care needs and their families.

\*CSHCN Program rules are currently under revision. New rules are anticipated by the end of 2002.

### **I. DIRECT HEALTH CARE SERVICES**

Direct health care services are defined as services generally delivered between a health professional and a patient in an office, clinic or emergency room. For example, well child care visit; visit to doctor for an acute health care condition (e.g. earache); follow-up visit to a specialist for a chronic condition (e.g. asthma, diabetes, sickle cell disease), physical therapy, occupational therapy, respiratory therapy, inpatient and outpatient medical services, allied health services, lab, etc.

## ELIGIBILITY CRITERIA FOR DIRECT CARE SERVICES

The 76<sup>th</sup> Texas Legislature enacted legislation that will expand the CSHCN Program effective July 1, 2001. Excerpts:

- Expanded program medical eligibility criteria from children with specific diagnosis to special needs children under 21 who have a chronic physical or developmental condition. Coverage of adults with cystic fibrosis was retained.
- Expanded diagnosis-specific medical benefits to a comprehensive package similar to the Texas Children's Health Insurance Program (CHIP).
- Removed the assets test for financial eligibility.
- Authorized family support services.
- Allowed waiting lists for services as needed to stay within budget.

### *Age:*

Birth to 21 years of age, except for applicants with cystic fibrosis. Documentation of date of birth is a required attachment to the application. It must be submitted one time only.

### *Residency:*

The applicant must be a bona fide resident of the state of Texas and attach proof of residency to the application. That is, the applicant: must be physically present within the geographic boundaries of the state; has intent to remain within the state, whether permanently or for an indefinite period; actually maintains an abode within the state (i.e., a house or apartment, not merely a post office box); has not come to Texas from another country for the purpose of obtaining medical care, with the intent to return to the person's native country; and is a minor child residing in Texas whose parent(s) or managing conservator or guardian of the child's person is a bona fide resident; is a person residing in Texas who is the legally dependent spouse of a bona fide resident; or is an adult residing in Texas including an adult whose legal guardian is a bona fide resident who is his/her own guardian.

### *Medical:*

A physician or dentist must certify annually that the person meets the definition of "child with special health care needs" as defined below. The CSHCN Program must receive a medical diagnosis code on each condition for statistical and referral purposes.

Child with Special Health Care Needs- A person who is younger than 21 years of age who has a chronic physical or developmental condition:

- That will last or is expected to last for at least 12 months; **and**
- That results or, if not treated, may result in limits to one or more major life activities; **and**
- That requires health and related services of a type or amount beyond those required by children generally; **and**
- That must have a physical (body, bodily tissues or organ) manifestation; **and**
- That may exist with accompanying developmental, mental, behavioral, or emotional conditions; **but**
- That is not solely a delay in intellectual development or solely a mental, behavioral, and/or emotional condition; **or**
- A person of any age who has cystic fibrosis.

***Examples of some Eligible Conditions:***

Aplastic Anemia  
Asthma  
Blood disorders, including hemophilia and sickle cell disease  
Bone, muscle, and joint problems  
Cancer  
Cardiovascular disorders  
Certain neurological disorders  
Cleft lip, cleft palate, or other craniofacial anomalies  
Congenital adrenal hyperplasia  
Congenital anomalies of the gastrointestinal tract  
Congenital anomalies of the genitalia and genitourinary tract including kidney problems  
Cystic fibrosis  
Diabetes mellitus  
Eye disorders  
Hearing disorders  
HIV infection and AIDS  
Hypothyroidism  
Neurological disorders  
Pituitary dwarfism  
Severe burns

***Excluded Conditions:***

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

***Financial:***

***General Financial Eligibility:***

Financial need is established on the basis of household income available to the family. The income level for eligibility currently is established at 200% of the federal poverty guidelines. If the household income exceeds this level, and it can be shown that the applicant is responsible for medical bills equal to or greater than the amount in excess of the 200% level, the client may be financially eligible from the eligibility date for a twelve month period. Figures below are effective 4/01/02.

<b>FAMILY SIZE</b>	<b>YEARLY INCOME</b>	<b>MONTHLY INCOME</b>	<b>FAMILY SIZE</b>	<b>YEARLY INCOME</b>	<b>MONTHLY INCOME</b>
1	\$17,720	\$1,477	6	\$48,520	\$4,044
2	23,880	1,990	7	54,680	4,557
3	30,040	2,504	8	60,840	5,070
4	36,200	3,017	9	67,000	5,584
5	42,360	3,530	10	73,160	6,097
For each additional family member, add \$6,160/year or \$514/month					

***Medicaid and TexCare (TCP) Determination:***

A Medicaid/TCP Determination or letter is a required attachment to the application and no payment of services will be provided until the application is complete. Clients/applicants are required to apply to Medicaid and TCP for Children's Health Insurance Program health benefits and are given 60 days to provide all of the necessary documentation to make the application complete and coverage will begin from the date the application was first received, when received within 60 days. If received after the 60 days have ended, coverage will begin 15 days retroactive to the date received.

Those clients/ applicants eligible for CHIP, Medicaid, or other state programs which meet financial and residency requirements of the CSHCN Program will be considered financially eligible and will meet residency requirements.

Clients with expenditures over 2,000 are required to apply for Medicaid and the Medically Needy Program (MNP). The client will be given 60 days to apply and send in the Medicaid/MNP determination.

***Diagnosis and Evaluation Services:***

The process of performing specialized examinations, tests, and/or procedures to determine whether a CSHCN Program client/applicant meets the CSHCN program definition of a child with special health care needs and has a chronic physical or developmental condition as determined by a physician or dentist.

***Family Co-Payment or Financial Participation Requirements:***

None. Contact the Program directly for more information.

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

The following direct health care services are provided through the CSHCN Program:

- Ambulatory surgery
- Audiological services/devices
- Care management services
- Dental evaluation and treatment
- Drug co-payments
- Durable medical equipment
- Emotional/mental health services
- Family support services
- Hemophilia blood factor products
- Home health/nursing services (limited)
- Hospice care
- Inpatient hospital care
- Inpatient rehabilitation care
- Insurance premium payment assistance
- Laboratory or radiology services
- Meals, lodging, and transportation
- Medical evaluation and treatment
- Medical supplies

Medical nutrition services  
Orthotics/prosthetics  
Orthodontic services  
Outpatient physical/occupational therapy  
Outpatient speech/language pathology  
Outpatient care  
Outreach services  
Physician services  
Podiatry services  
Prescribed/over-the-counter medications  
Prescription shoes  
Psychiatric care  
Renal dialysis  
Respiratory care  
Respite care  
Transportation of deceased  
Vision services/eye wear

***Excluded Direct Care Services:***

Experimental treatments  
Solid organ transplants

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

The CSHCN Program is not a direct provider of treatment services. Covered services are provided in communities across the state in the offices and facilities of CSHCN approved providers, including physicians, dentists, podiatrists, dieticians, therapists, hospitals, specialty centers, and other providers. Some are in the private sector and others in the public sector. Meals, transportation, and lodging are provided for families through the Texas Medical Transportation Program to receive medical care. Limited services are provided in the home. Case management services are provided by CSHCN regional staff and by approved independent contractors. Providers who are qualified to enroll in the Title XIX Medicaid Program must participate as Medicaid providers in order for clients to utilize Medicaid coverage.

***Specialty Clinics/Programs:***

Bone Marrow Transplant Centers  
Cleft/Craniofacial Centers

***Coordination of Financial Benefits:***

Any health insurance or other benefits, including commercial health insurance, health maintenance programs, preferred provider organizations, TriCare *formerly* Civilian Health and Medical Program of the Uniformed Services (CHAMPUS), health insurance benefits provided through the state's Children's Health Insurance Program (CHIP), or Medicaid, which are available to the client, must be used prior to payment by CSHCN.

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

### **CSHCN Direct Services Contracts**

- Provides screening, diagnosis and evaluation services, treatment services, and rehabilitation services.
- Targets limited unserved or undeserved areas of the state, i.e. areas without specialty services resources but with significant demand for them.

### **CSHCN Wellness Center Contracts**

- Provides, or serves as a broker for inclusive support services and activities for CSHCN and their families.
- Significant family/parent/stakeholder input in rule making process and in model development.
- Activities offered by contractors include career and life planning, nutrition education, health education, recreation, camps, adaptive exercise, sports, and life skills.

## **II. ENABLING SERVICES**

Include 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 except for case management services. Case management services may be provided to any CSHCN in need of such. However, priority is given to children who qualify for the program’s direct health care services.

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

Case Management (planning and coordination of service); Family Support Services (including respite and the broad array of services covered under IDEA); Meals, transportation, and lodging; Health Education; Purchase of Health Insurance Premiums; Outreach; Community/Family Resources (Activities and services that build community infrastructure and/or educate and

support CSHCN and their families in promoting their health and well-being).

***Coordination of Services:***

The Texas Department of Health’s CSHCN Program has extensive collaboration with other health and human services agencies as well as the education agency regarding delivery of services to children with special health care needs and their families. The program has an 18 member statewide Advisory Committee that ensures involvement of families, providers and other stakeholders and collaboration between the public and private sectors.

***Excluded Enabling Services:***

Family Support Services are limited by a dollar cap per child.

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

Case management services are provided through Regional staff and local contractors; Family Support Services are provided through locally-based CSHCN enrolled providers.

***Specialty Clinics/Programs:***

Parent case management contracts.

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

Family Health Services Information and Referral Hotline 1-800-422-2956  
Federal grants-contact Program directly for more information.

**III. POPULATION-BASED SERVICES**

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

Outreach/Public Education.

Contact Program directly for more information.

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

Statewide information sharing through conferences, website, trainings, inservices, newsletters, bulletins, etc.

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

Contact the Program directly for more information.

#### **IV. INFRASTRUCTURE BUILDING SERVICES**

Needs assessment; Evaluation; Planning; Policy Development; Coordination; Quality Assurance/Improvement; 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

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

Through central office and regional office staff and contractors.

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

Contact program directly for more information.

#### **OUT-OF-STATE SERVICES FUNDED BY THE PROGRAM:**

Enrolled children may receive services from providers located within fifty miles of the Texas border. In addition, the Commissioner of Health may allow CSHCN payment to out-of-state providers in unique circumstances in which a CSHCN provider (Texas Physician) and the child, parent, or guardian and the CSHCN medical director agree that an out-of-state provider is the provider of choice for quality care, the same treatment or another treatment of equal benefit or cost is not available through Texas CSHCN providers, and the treatment results in a decrease in the child's cost of treatment to the CSHCN program. The medical literature must indicate the treatment is accepted medical practice (i.e. not experimental) and is anticipated to improve the child's quality of life.

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

Texas Health and Safety Code Ann. Ch. 35 (West 1992)