

West Virginia

Children with Special Health Care Needs (CSHCN)

(Formerly: Handicapped Children's Services (HCS))

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MISSION STATEMENT

The goal of the West Virginia Division of Children's Specialty Care (CSC) is to support the family and community in the care of children with special health care needs through:

- Facilitation of early care
- Diagnostic evaluation/consultation
- Clinical intervention
- Care coordination

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

Age: Birth to 21 years of age.

Residency:

Must live in West Virginia, no length of residency requirement.

Medical:

CSHCN provides medical services to patients with:

- Diagnosed congenital disorders
- Chronic residuals of acute illness or trauma
- Specified chronic illnesses/disabilities

Eligible Conditions:

Program covered conditions include, but are not limited to:

Cleft lip/palate and other conditions requiring plastic surgery, such as burns
Chronic renal disease
Conditions such as hemophilia, cystic fibrosis or sickle cell anemia
Disorders of bones, joints or muscles
Ear, nose and throat conditions requiring plastic surgery, such as burns
Epilepsy/seizure disorders
Hearing loss requiring hearing aids
Heart defects
Myelodysplasia or Spina bifida
Neurological disorders

Excluded Conditions:

Acute fractures or illness
Asthma
Behavioral/psychological disorders
Childhood malignancies
Diabetes

Financial:

General Financial Eligibility:

The allowable income level for eligibility is set at 185% of the Federal Poverty Level. All would-be eligibles are referred for income eligibility to the local Department of Health and Human Resources office to determine eligibility for Medicaid/CHIP. All children determined to be Medicaid or CHIP eligible, and who have a program-covered diagnosis are deemed financially eligible.

Financial Eligibility for Initial Screening:

None, initial evaluation is provided to all applicants regardless of income.

Family Co-Payment or Financial Participation Requirements:

None, if limited services are provided for families who are over income, the family may be asked to pay for some services.

DIRECT CARE SERVICES (PROVIDED OR PAID FOR):

Direct health care services provided include, but are not limited to, the following:

- Diagnostic evaluation
- In-patient services
- Physical, Occupational and Speech Therapy
- Prescription drugs
- Surgery

Excluded Direct Care Services:

Direct care services excluded include, but are not limited to, the following:

- Behavioral health
- Cosmetic surgery
- Custodial services
- Dental treatments except for craniofacial malformations- Cleft palate
- Experimental or investigational services/devices/drugs

HOW/WHERE DIRECT CARE SERVICES ARE PROVIDED:

Services are provided in partnership with tertiary care facilities and private physicians. Community-based clinics located throughout the state are the primary care service sites with services provided by teams of physicians, nurses, and social workers.

Specialty Clinics/Programs:

- Cardiac
- Cystic Fibrosis
- ENT
- Genetics
- Myelodysplasia
- Neurology
- Orthopedic
- Plastic Surgery

Coordination of Financial Benefits:

Private insurance, Medicaid, CHAMPUS, etc. will be used to maximum extent. Whenever appropriate, joint care planning occurs to maximize all resources available to program participant/family. In order to facilitate coordination of benefits, formal consent for this function is obtained from program participating families.

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

- Options Improved Through Collaborative Efforts and Services (CHOICES) project, assures that children treated at Shriners receive follow-up treatment through our community-based service network.
- Mountaineer Spina Bifida Camp is a summer camp program for children with spina bifida. The camp is a collaborative venture made possible by the multiple partners, including support and donated time of CSHCN personnel.
- In collaboration with West Virginia University Center for Excellence in Disabilities (WVUCED), nutrition services are provided at the West Virginia University Feeding and Swallowing Clinic, and by presentations on basic nutrition topics at the CSC myelomeningocele, orthopedic, and cardiac clinics in Morgantown, WV. A nutritional screening form was developed for use in CSC clinics to identify children and teenagers needing further nutritional assessment.

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 provided through CSHCN include, but are not limited to:

- Care coordination
- Durable medical equipment and supplies
- Non-emergent medical transportation
- Resource information and referral

- Social service support including transition planning

Coordination of Services:

Children with Special Health Care Needs has a formalized care management component consisting of health care professionals (physicians, nurses, social workers) working alongside the family to develop agreed upon care plans. An independent quality assurance unit performs periodic reviews of charts to assure standards of practice are being met and that each child has an individual child/family assessment and signed treatment plan.

Coordination with Medicaid Managed Care Enrollees:

Specialty clinic services are provided by CSHCN if the child's PCP refers the child, and the clinic service is authorized by the managed care organization.

Excluded Enabling Services:

Not addressed. 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.:

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

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 provided through CSC include, but are not limited to:

- Information and referral
- Outreach/public education

HOW/WHERE POPULATION-BASED SERVICES ARE PROVIDED:

Population-based services are provided through the following:

- Informational mailings to West Virginia health care and social service providers
- Media display board for use at conferences, public forums, and WV legislature
- Parent Network Specialists located in regions throughout the state
- Presentation at public forums and parent groups
- Toll-free hotline

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

- The Single Point of Entry (SPE) serves as the intake unit for referral services to the Office of Maternal, Child and Family Health. There are no eligibility criteria for receiving referral services through Single Point of Entry. Referrals based on identified needs of the child and/or family are made to health, education and social service programs internal and external to OMCFH. Materials from SPE’s resource library of educational information and application resources are continually shared with potential customers.
- In collaboration with West Virginia University Center for Excellence in Disabilities (WVUCED), CSHCN funds the Parent Network System (PNS). Working through organized parent groups and CSHCN clinic settings, the PNS serves as parent advocates to assist in linking families to resources. A Care Notebook, which is a care management tool for families, is supplied to each family.

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 CSC:

- A centralized database for tracking, follow up, reporting, program planning, community needs assessment, evaluation and monitoring purposes.
- Credentialing of physicians of specialty care and other medical providers.
- Internal and external quality assurance
- Review by West Virginia Medical Institute (WVMI), a peer review organization, of durable medical equipment, inpatient hospital services, organ transplant services, among other services in conjunction with WV Bureau of Medical Services, Medicaid Program.

HOW/WHERE INFRASTRUCTURE BUILDING SERVICES ARE PROVIDED:

Not addressed. Contact the Program directly for more information.

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

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

OUT-OF-STATE SERVICES FUNDED BY THE PROGRAM:

Treatment services may be considered for out-of-state referral on an individual basis if any of the following are present:

- Medical specialty needed is not practiced/offered in West Virginia
- Medical treatment is not available in-state, and the CSHCN Medical Director approves out-of-state treatment
- An emergency treatment is required for a program participant while out-of-state

Note: Provider of services must be enrolled as a vendor with the West Virginia Medicaid Program.

STATUTORY/REGULATORY AUTHORITY OF THE PROGRAM:

W. Va. Code § 49-4-1, et. seq. (Supp. 1996)