

California Children's Services (CCS) High Risk Infant Follow-up (HRIF) Program

Integrated Systems of Care Division February 20, 2020



HRIF Program and the Whole Child Model (WCM) Program



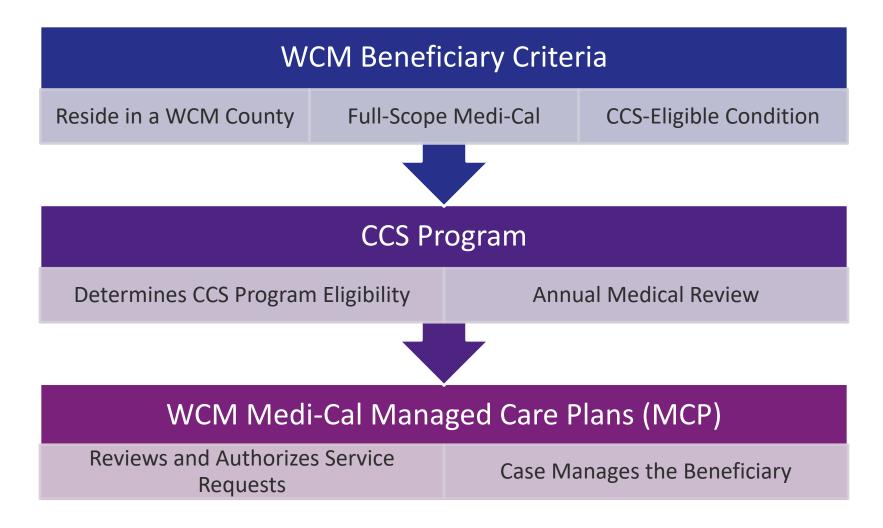
WCM Program

Senate Bill (SB) 586

Authorized the Department of Health Care Services to establish the WCM program in designated County Organized Health Systems (COHS) or Regional Health Authority counties to incorporate CCS Program-covered services for Medi-Cal-eligible CCS Program members into Medi-Cal Managed Care









WCM HRIF Guidance

CCS Program NICU/Hospital

- Complete Referral/Registration Form and submit via HRIF Quality Care Initiative Reporting System
- Submit service request to WCM plans for review and authorization



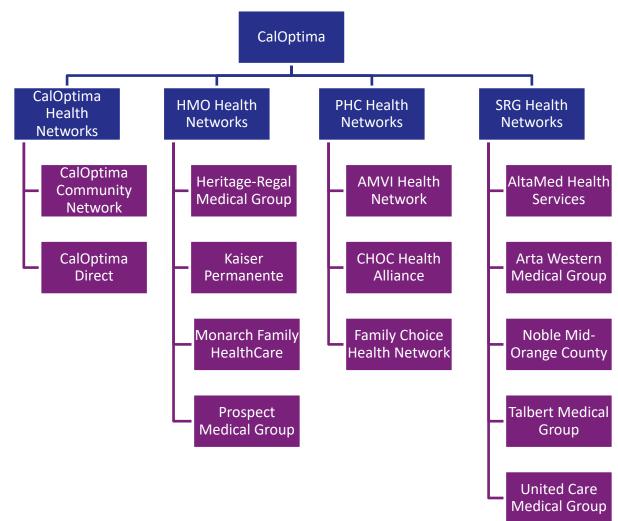
- Determine HRIF Program eligibility
- Share Program eligibility with county CCS
- Review and authorize HRIF service request

County CCS Program

• Enter HRIF Program eligibility into CMS Net



CalOptima and WCM





WCM MCP Provider Services

CenCal Health	• (877) 814-1861 • (833) 556-2560 TYY
Central California Alliance for Health	• (800) 700-3874 • (877) 548-0857 TYY/TDD
CalOptima	 (888) 587-8088 (800) 735-2929 TTY/TDD
Health Plan of San Mateo	 (650) 616-2106 (650) 616-8037 TTY
Partnership Health Plan	 (800) 863-4155 (800) 226-2140 TTY/TDD



HRIF Program Requirements



HRIF Program Required Team Members

HRIF Program Medical Director	
HRIF Coordinator	
Ophthalmologist	
Audiologist	
Social Worker	
Individual performing developmental assessment: pediatrician or neonatologist, PNP, nurse specialist, PT, OT, or psychologist	



HRIF Diagnostic Services

Comprehensive History and PE

Developmental Assessment

Family Psychosocial and Needs Assessment

Hearing Assessment

Ophthalmologic Assessment

Home Assessment

Reference: HRIF Program Letter 01-1016



HRIF Program Medical Eligibility



Medical Eligibility

Congenital Heart Disease

- Requires admission to a NICU or directly to a PICU or CVICU within the neonatal period, and
- Surgery or minimally invasive therapeutic intervention (such as catheter-based balloon angioplasty) during that hospitalization



Medical Eligibility (cont.)

Examples of patients who would not meet HRIF eligibility:

Infant diagnosed with Atrioventricular Canal Defect but never admitted to a NICU, did not meet other HRIF eligibility criteria, discharged home with outpatient follow-up, and subsequently admitted to a CVICU at 3 months of age for surgical intervention

Infant diagnosed prenatally with Tetralogy of Fallot, admitted briefly to a NICU for monitoring and evaluation, did not meet other HRIF eligibility criteria, discharged home without intervention, and subsequently admitted to a CVICU at 4 months of age for surgical intervention



Medical Eligibility (cont.)

Hypoglycemia

Requires admission to a NICU or directly to a PICU or CVICU within the neonatal period

Intervention (IV boluses and/or IV glucose infusion) is required in an intensive care setting specifically for the treatment of hypoglycemia for at least 48 hours

Diagnosis of congenital hyperinsulinemia or other congenital endocrinopathy associated with hypoglycemia

Evidence of seizures or brain injury by neuroimaging with hypoglycemia meets HRIF medical eligibility regardless of etiology

HIE complicated by hypoglycemia meets HRIF medical eligibility; neonatal encephalopathy alone meets eligibility



Medical Eligibility (cont.)

Other documented problems that could result in a neurologic abnormality, such as:

History of cardiovascular instability, as determined by NICU medical staff, due to sepsis, congenital heart disease, patent ductus arteriosus, necrotizing enterocolitis, and other documented conditions

Neonatal Abstinence Syndrome

• not included in medical eligibility criteria



HRIF Billing and Coding



Commercial Health Insurance

If applicable, providers must request authorization from a client's third party health insurance carrier or HMO prior to providing services and bill the client's other commercial health insurance carrier or HMO **prior** to billing CCS.



A denial of benefits or an explanation of benefits (EOB) must be attached to the claim.



CCS/Medi-Cal is the payor of last resort.



Coding and Billing

Coding

 SCG 06 table has been updated to include the new developmental screening codes (96112 and 96113)

Billing

Contact Medi-Cal

- Phone Support: 1-800-541-5555
- Website: <u>https://www.medi-</u> <u>cal.ca.gov/contact.asp</u>



Thank you for joining the CCS HRIF Program Webinar!

For questions on the HRIF Reporting System: Submit a Help Desk ticket to <u>www.cpqcchelp.org</u>

For questions on HRIF Program policy: Email <u>HRIF@dhcs.ca.gov</u>