CalOptima
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Whole-Child Model Frequently Asked Questions
For CCS-Paneled and CCS-Approved Providers

We appreciate your partnership and commitment to serve our members. The following will assist in answering questions regarding the Whole-Child Model program.

1. **What is the Whole-Child Model (WCM) program?**

   The WCM program is designed to help children ages up to 21 years eligible for California Children's Services (CCS) and their families get better care coordination, access to care and improved health results. Prior to July 1, 2019, children with CCS-eligible diagnoses were enrolled in and received care from both the county CCS program for their CCS condition and CalOptima for their non-CCS conditions.

   Senate Bill (SB) 586 authorized the Department of Health Care Services (DHCS) to establish the WCM program in designated counties. Twenty counties are affected by the WCM program:

WCM Managed Care Health Plans	WCM Counties
Phase 1 — July 1, 2018	
CenCal Health	San Luis Obispo, Santa Barbara
Central California Alliance for Health	Merced, Monterey, Santa Cruz
Phase 2 — January 1, 2019	
Partnership Health Plan	Del Norte, Humboldt, Lake, Lassen, Marin, Mendocino, Modoc, Napa, Shasta, Siskiyou, Solano, Sonoma, Trinity and Yolo
Phase 3 — July 1, 2019	
CalOptima	Orange

2. **What will happen to children currently receiving CCS who are not CalOptima members?**

   CCS services for non-CalOptima members will remain the responsibility of the local CCS program administered by the Orange County Health Care Agency (OC HCA).

3. **Who will determine CCS eligibility?**

   The local CCS program will retain responsibility for determining CCS program eligibility. Note that CCS eligibility is separate from Medi-Cal eligibility. Members will need to continue to work with the Orange County Social Services Agency regarding Medi-Cal eligibility.

4. **What is the provider process to refer for CCS eligibility?**

   If the condition needing treatment is for a new, CCS-potentially eligible condition, the provider should submit a completed CCS Service Authorization Request (SAR) and pertinent medical reports needed to the member's health network (including CalOptima Direct and CalOptima Community Network).

For CalOptima members, SARs submitted directly to the local CCS program will be processed for medical eligibility determination only. Authorization for treatment must be directed to the member's health network (including CalOptima Direct and CalOptima Community Network).

5. **Who will provide CCS services under the WCM program?**

In Orange County, CalOptima and its delegated health networks will be responsible for coordinating and authorizing CCS services consistent with its current processes.

CCS-paneled and CCS-approved providers will provide CCS services. If a specialist is not a part of CalOptima's network and/or located outside the county, CalOptima or one of its health networks will be responsible for coordinating and approving those services, as appropriate.

6. **Is a CCS-paneled specialist able to act as a primary care provider (PCP) for their CCS-eligible member?**

Yes, a CCS-eligible member, or their parent/guardian, may request their CCS-paneled specialist act as their PCP. Call CalOptima or the member's assigned health network for more information, as this arrangement is contingent on the specialist provider's contract.

7. **What if I am not a CCS-paneled provider?**

DHCS requires certain provider types to be CCS-paneled or CCS-approved in order to treat CCS-eligible conditions. This requirement will continue to apply under WCM. Not all provider types have to be paneled. You can find CCS program participation requirements by provider type at the DHCS webpage: https://www.dhcs.ca.gov/services/ccs/Pages/default.aspx

Details about how to become a CCS-paneled provider are at the DHCS webpage: http://www.dhcs.ca.gov/services/ccs/Pages/ProviderEnroll.aspx

8. **What do I do if I am not part of CalOptima's network?**

All CCS providers are encouraged to contact CalOptima and its delegated health networks about contracting. Our provider manual includes contact information for our internal departments and our delegated health networks. You can also contact the CalOptima Provider Relations department to speak to a representative at **714-246-8600**.

9. **How will my patients know if their CCS benefits will transition under WCM?**

CalOptima members currently receiving CCS services will receive a 90-day notice from CalOptima starting around April 1, 2019, and a 60-day notice starting around May 1, 2019. CalOptima will send notices prior to the effective date with a similar message approved by DHCS. Beginning May 10, 2019, CalOptima will also reach out by phone (up to five calls) to impacted members to inform them of any changes.

10. **Will the same benefits be covered in the WCM program?**

CCS benefits remain the same under WCM. Most CCS benefits will be provided through CalOptima and its health networks.

Services carved-out of coverage by CalOptima will continue to be administered as they are today. The carved-out benefits include the Medical Therapy Program (MTP), and all CCS services for non-Medi-Cal members. Please contact the local CCS program administered by OC HCA at 714-347-0300 for questions related to carved-out benefits.

11. Will children still receive Palliative Care Services through the Pediatric Palliative Care Waiver?

The Pediatric Palliative Care Waiver program ended on December 31, 2018. Beginning January 1, 2019, children enrolled in CalOptima receive palliative care services through CalOptima or their health network.

12. Will existing CCS members be able to continue to receive care from their current CCS doctors?

CalOptima and its delegated health networks will provide continuity of care for WCM members for up to 12 months. Continuity of care means that a member can continue receiving care from their CCS-paneled providers, if certain criteria are met:
- Member has existing relationship with the provider
- Provider accepts CalOptima's (or health network's) reimbursement rate or the applicable Medi-Cal or CCS fee-for-service rate, whichever is higher, unless otherwise agreed
- Provider has no quality and credentialing issues

Continuity of care applies to specialists, special care centers and custom durable medical equipment (DME) providers. In addition, continuity of care may also apply to the CCS public health nurse, if available. There is also a provision for continued access to medication until the provider has discontinued the medication or it is no longer needed.

13. As a provider, can I request continuity of care for my patient?

Yes. If you are a CCS-paneled provider currently providing services to a CalOptima member who is CCS-eligible, you may request continuity of care on the member's behalf. Contact CalOptima Customer Service at **714-246-8500** for more information.

14. Will children be able to continue care from their current durable medical equipment (DME) providers?

If the WCM transitioning member has an established relationship with a custom DME provider, CalOptima and its delegated health networks will provide access to that DME provider for up to 12 months. Continuity of care criteria is met if the custom DME:
- Is uniquely constructed or substantially modified solely for the use of the WCM transitioning member
- Is made to order or adapted to meet the specific needs of the WCM transitioning member
- Is uniquely constructed, adapted or modified such that it precludes use by another person and cannot be grouped with other items meant for the same use for pricing purposes

Continuity of care may be extended beyond 12 months for custom DME still under warranty and deemed medically necessary.

15. How do I get authorization for CCS services to be rendered on or after July 1, 2019?

CalOptima Care Network (CCN)/CalOptima Direct (COD)
Requests for COD and CCN members for services requiring prior authorization should be submitted to CalOptima's Utilization Management department by facsimile or through the CalOptima Link portal.

Health Networks
Requests for treatment requiring prior authorization should be submitted to the member's health network.

16. How will claims processes change?

Claims for services provided on and after July 1, 2019, should be sumitted to the member's health network (including CalOptima Direct or CalOptima Community Network), except for the carved-out benefits, such as MTP-related services, which will continue to be authorized by the local CCS program.

For claims directed to CalOptima, both electronic and hard copy formats are accepted.

> For questions regarding the submission of claims, contact CalOptima's Claims department at **714-246-8885**

Electronic claims submission: CalOptima has a contract with a clearinghouse to receive electronic data interchange (EDI) claims. There is no cost to you for services provided by our clearinghouse. To register and submit electronically, contact:

Office Ally
866-575-4120
www.officeally.com

(See question #18 for a list of CalOptima health networks and their contact information.)

17. Will CCS rates apply under WCM after the transition?

CalOptima and its health networks are required to pay CCS-paneled providers at rates that are at least equal to CCS fee-for-service rates, unless the provider enters into an agreement on an alternative payment methodology mutually agreed upon.

18. Who do I contact if I have questions about WCM?

Health Network	Phone Number
AltaMed Medical Group	855-848-5252
AMVI Care Health Network	888-747-2684
Arta Western Health Network	310-354-4200
CalOptima Community Network	**714-246-8600**
Children's Hospital Orange County Health Alliance	800-387-1103
Family Choice Health Network	800-611-0111
Heritage Provider Network – Regal Medical Group	800-747-2362
Kaiser Permanente	800-464-4000
Monarch Family HealthCare	888-656-7523
Noble Mid-Orange County	888-880-8811
Prospect Medical Group	800-708-3230
Talbert Medical Group	310-354-4200
United Care Medical Group	800-708-3230

19. How can I stay informed about these changes?

More information about CalOptima's WCM program is available at:
https://www.caloptima.org/en/CCS_Info.aspx