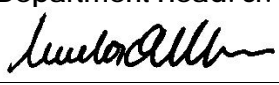
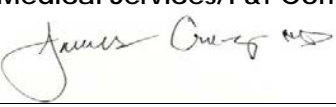


Policy Title: Child Health and Disability Prevention (CHDP) Program		POLICY #: 10.2.6	
		Line of business: Medi-Cal	
Department Name: Utilization Management	Original Date 11/97	Effective Date 5/19	Revision Date 12/18, 3/22, 9/22
Department Head: Sr. Director, UM 			Date: 10/22
Medical Services/P&T Committee: (If Applicable) PHP CMO 			Date: 10/22

PURPOSE

To ensure the delivery of Child Health and Disability Prevention (CHDP) services to members under 21 and to establish efficient guidelines for effective linkages between the school district, school health services and the Blue Shield of California Promise Health Plan (“Blue Shield Promise”) managed care system.

POLICY

All members under 21 years of age have access to CHDP services in accordance with State and Federal requirements for providing preventive services to children. Blue Shield Promise will coordinate with school based CHDP services to support appropriate member access.

Blue Shield Promise is responsible for the facilitation and oversight of this process as well as for the overall successful implementation of the CHDP program in its network.

PROCEDURE

1. Primary Care Physicians (PCPs) are responsible for completing the CHDP assessment for members under the age of 21. The CHDP assessment may also be completed through a school-based program or a local health department.
2. The CHDP assessment consists of the following unless medically contraindicated:
 - a. Health History
 - b. Unclothed physical exam
 - c. Dental assessment
 - d. Nutrition Assessment
 - e. Developmental assessment
 - f. Vision & Hearing Testing
 - g. Immunization
 - i. Immunizations necessary at the time of the health care visit shall be given in accordance with the most recent childhood immunization schedule and recommendations published by the Advisory Committee on Immunization Practices (ACIP).
 - ii. If immunizations cannot be given at the time of the visit, the member must be instructed as to how to obtain necessary immunizations or a scheduled and documented appointment must be made.
 - iii. Appropriate documentation shall be entered in the Member’s medical record that indicates all attempts to provide immunizations, or proof of

voluntary refusal of vaccines in the form of a signed statement by the Member (if an emancipated minor) or the parent(s) or guardian of the Member.

1. If the responsible party refuses to sign this statement, the refusal shall be noted in the member's medical record.
- iv. In the event the Federal Food and Drug Administration (FDA) approves any vaccine of childhood immunization purposes, policies and procedures for the provision and administration of the vaccine will be developed within sixty (60) calendar days of the vaccine's approval date.
- h. Tuberculin skin testing
- i. Laboratory screening tests, including tests for blood lead
- j. Anticipatory guidance
- k. Appropriate health education including the harmful effects of using tobacco products and exposure to second hand smoke.

A. Blue Shield Promise Responsibilities:

1. Blue Shield Promise Health Plan will cover and ensure the provision of the vaccine from the date of its approval regardless of whether or not the vaccine has been incorporated into the Vaccines for Children (VFC) Program. Policies and procedures will be in accordance with any Medi-Cal Fee-For-Service guidelines issued prior to the final Advisory Committee on Immunizations Practices recommendations. Blue Shield Promise will provide information to all network providers regarding the VFC Program.
2. PCPs are required to follow-up on any identified condition(s) during a CHDP assessment through further diagnostic testing, treatment, or referrals. PCP's can request assistance from Blue Shield Promise Case Management to assist in coordination of these services.
3. Providers are to document CHDP assessments on the State approved Confidential Screening/billing Report form, PM-160, used to report all children's preventive services encounters.
 - a. If a PM-160 form is received from School Based Services, it will be reviewed by Case Management to determine any care coordination needs.
 - b. If the need for follow-up is identified, Blue Shield Promise Case Management will contact PCP to inform him/her and coordinate the provision of services.
 - c. A copy of PM-160 form will be retained in the Members medical record. A copy will be mailed to the State CHDP office and a copy mailed to Blue Shield of California Promise Claims Department.

B. School District Responsibilities:

1. School districts operating school-based clinics are authorized to provide CHDP services to L.A. Care/Blue Shield Promise members according to the CHDP periodicity schedule without prior authorization.
2. School districts shall bill LA Care Health Plan using the PM 160 for CHDP services rendered to LA Care /Blue Shield Promise members that had active Medi-Cal eligibility during the month CHDP services were rendered.

C. LA Care Responsibilities:

1. LA Care Health Plan shall reimburse school district for CHDP services at the current Medi-Cal fee for service rates and such payments shall be deducted from Blue Shield Promise prospective capitation payments.
2. LA Care Health Plan shall submit CHDP PM 160s received for Blue Shield Promise members to Blue Shield Promise Health Plan for distribution to respective member's PCP.

REFERENCES

Medi-Cal Provider Manual Medical Services
Health & Safety Code Sections 104395, 105300, 105305, and 124025-124110
California Code of Regulations Title 17 Sections 6800-6874
California Code of Regulations Title 22 Sections 51340 and 51532