

THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS  
ACTION AGENDA SUMMARY

DEPT: Health Services Agency *max*

BOARD AGENDA # \*B-11

Urgent  Routine

AGENDA DATE December 21, 2010

CEO Concurs with Recommendation YES  NO   
*gnt*  
(Information Attached)

4/5 Vote Required YES  NO

SUBJECT:

Approval to Certify Compliance of the Stanislaus County California Children's Services (CCS) and Child Health and Disability Prevention (CHDP) Programs for Fiscal Year 2010-2011

STAFF RECOMMENDATIONS:

Authorize the Chairman of the Board of Supervisors to sign the Certification Statements for California Children's Services and Child Health and Disability Prevention programs.

FISCAL IMPACT:

The California Children's Services program is funded by \$2,697,522 in State and Federal funding and requires a County match of \$294,388. The Child Health and Disability Prevention program is funded by \$705,661 in State and Federal funding and requires a County match of \$137,526. Appropriations and estimated revenues are included in the approved Health Services Agency Public Health Division Fiscal Year 2010-2011 budget. There is no additional impact to the General Fund.

BOARD ACTION AS FOLLOWS:

No. 2010-775

On motion of Supervisor Chiesa, Seconded by Supervisor O'Brien  
and approved by the following vote,

Ayes: Supervisors: O'Brien, Chiesa, Monteith, DeMartini, and Chairman Grover

Noes: Supervisors: None

Excused or Absent: Supervisors: None

Abstaining: Supervisor: None

1) X Approved as recommended

2) \_\_\_\_\_ Denied

3) \_\_\_\_\_ Approved as amended

4) \_\_\_\_\_ Other:

MOTION:

*Christine Ferraro*

ATTEST: CHRISTINE FERRARO TALLMAN, Clerk

File No.

Approval to Certify Compliance of the Stanislaus County California Children's Services (CCS) and Child Health and Disability Prevention (CHDP) Programs for Fiscal Year 2010-2011

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**DISCUSSION:**

The California Children's Services (CCS) and the Child Health and Disability Prevention (CHDP) programs are State mandated and operated under State and Federal guidelines. Every County in the State of California is required to CCS and CHDP programs. CCS is mandated by the Welfare and Institutions Code and the California Code of Regulations (Title 22, Section 51013), and the CHDP program is fulfills the federal mandate under Title XIX for Early and Periodic Screening, Diagnosis and Treatment.

The CCS program provides diagnostic and treatment services, medical case management, and physical and occupational therapy services to children under age 21 with certain physical limitations and chronic health conditions or diseases. Examples of CCS-eligible conditions include, but are not limited to, chronic medical conditions such as cystic fibrosis, hemophilia, cerebral palsy, cancer, traumatic injuries and infectious diseases. CCS also provides medical therapy services that are delivered at public schools.

Children eligible for CCS must be residents of California, have CCS eligible conditions, and have family adjusted gross income of \$40,000 or less in the most recent tax year. Children in families with higher incomes may still be eligible for CCS if the estimated cost of care to the family in one year is expected to exceed 20 percent of the family's adjusted gross income. In addition, the CCS program is responsible for authorization of medically necessary services and medical case management of Medi-Cal beneficiaries with no share of cost who meet CCS medical and age criteria.

The CHDP program provides complete health assessments for the early detection and prevention of disease and disabilities in children and youth. A health assessment consists of a health history, physical examination, developmental assessment, nutritional assessment, dental assessment, vision and hearing tests, a tuberculin test, laboratory tests, immunizations, health education/anticipatory guidance, and referral for any needed diagnosis and treatment. The CHDP program also oversees the screening and follow-up components of the federally mandated Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program for Medi-Cal eligible children and youth. The eligible population for the CHDP Program includes all Medi-Cal eligible children/youth under age 21 and low-income non-Medi-Cal eligible children/youth under age 19 with family incomes below 200 percent of the federal income guidelines.

The CHDP Program is responsible for resource and provider development to ensure that high quality services are delivered and available to eligible children/youth. In addition, the program informs the target populations to increase their participation, and community agencies and residents to increase the knowledge and acceptance of preventive services.

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Local CHDP programs are also responsible for carrying out community activities which include planning, evaluation and monitoring, case management, providing health education materials, provider recruitment, quality assurance, and client support services such as assistance with transportation and medical, dental, and mental health appointment scheduling and encouraging the completion of an application for ongoing health care coverage. Local CHDP Programs are also responsible for oversight of the Health Care Program for Children in Foster Care (HCPCFC).

State and local CHDP programs maximize the use of federal funds and use state and/or county/city funds to match funds claimable under Title XIX of the Social Security Act. Services and administrative support costs claimable under federal law may include but are not limited to outreach, health education, case management, resource development, and training at state and local levels. Any federal funds received are used to augment, not replace funds appropriated from State General Fund (Health and Safety Code, Section 124075).

In order to receive State and Federal funds for the CCS and CHDP program, the Chairman of the Board of Supervisors is required to certify program compliance with Federal and State laws and regulations related to the Health and Safety Code, Welfare and Institutions Code, Children's Medical Services Plan and Fiscal Guidelines Manual, and Titles V and XIX of the Social Security Act. This must be done on an annual basis as the certification is valid for one year.

**POLICY ISSUES:**

Approval of this item supports the Board of Supervisors' priority of A Healthy Community through the provision of healthcare and case management services for children in Stanislaus County.

**STAFFING IMPACT:**

Existing staff of the Health Services Agency will perform services associated with this item.

**DEPARTMENT CONTACT:**

Phoebe Leung, Assistant Director, 209-558-7116

**Certification Statement - Child Health and Disability Prevention (CHDP) Program**

County/City: Stanislaus/ Modesto

Fiscal Year: 2010-2011

I certify that the CHDP Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 6 (commencing with Section 124025), Welfare and Institutions Code, Division 9, Part 3, Chapters 7 and 8 (commencing with Section 14000 and 14200), Welfare and Institutions Code Section 16970, and any applicable rules or regulations promulgated by DHCS pursuant to that Article, those Chapters, and that section. I further certify that this CHDP Program will comply with the Children's Medical Services Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CHDP Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.). I further agree that this CHDP Program may be subject to all sanctions or other remedies applicable if this CHDP Program violates any of the above laws, regulations and policies with which it has certified it will comply.



Signature of CHDP Director

10-12-10

Date Signed



Signature of Director or Health Officer

10-15-10

Date Signed

Signature and Title of Other – Optional

Date Signed

I certify that this plan has been approved by the local governing body.

  
Signature of Local Governing Body Chairperson

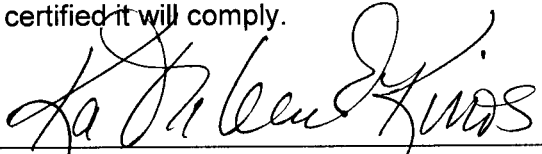
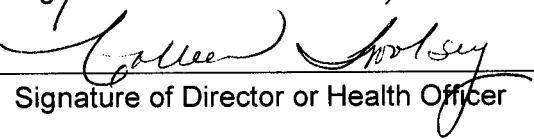
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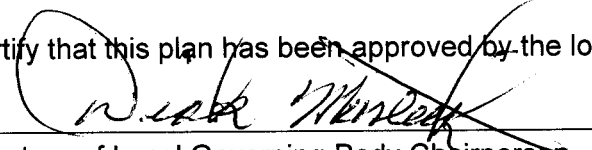
**Certification Statement - California Children's Services (CCS)**

County/City: Stanislaus County Fiscal Year: 2010-2011

I certify that the CCS Program will comply with all applicable provisions of Health and Safety Code, Division 106, Part 2, Chapter 3, Article 5, (commencing with Section 123800) and Chapters 7 and 8 of the Welfare and Institutions Code (commencing with Sections 14000-14200), and any applicable rules or regulations promulgated by DHCS pursuant to this article and these Chapters. I further certify that this CCS Program will comply with the Children's Medical Services Plan and Fiscal Guidelines Manual, including but not limited to, Section 9 Federal Financial Participation. I further certify that this CCS Program will comply with all federal laws and regulations governing and regulating recipients of funds granted to states for medical assistance pursuant to Title XIX of the Social Security Act (42 U.S.C. Section 1396 et seq.) and recipients of funds allotted to states for the Maternal and Child Health Services Block Grant pursuant to Title V of the Social Security Act (42 U.S.C. Section 701 et seq.). I further agree that this CCS Program may be subject to all sanctions or other remedies applicable if this CCS Program violates any of the above laws, regulations and policies with which it has certified it will comply.

 _____ Signature of CCS Administrator	<u>1/5/2011</u> _____ Date Signed
 _____ Signature of Director or Health Officer	<u>1/5/2011</u> _____ Date Signed
_____ Signature and Title of Other – Optional	_____ Date Signed

I certify that this plan has been approved by the local governing body.

 _____ Signature of Local Governing Body Chairperson	<u>1/6/11</u> _____ Date
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