

# California Children's Services (CCS) Redesign

Eligibility and Health Conditions  
Technical Workgroup (TWG)

Meeting #2

Monday, May 18, 2015

12-2pm PST

# Webinar Agenda

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1. Welcome, Introductions, and Roll Call – Jessica Padilla (UCLA)
2. Opening Remarks – Anastasia Dodson (DHCS)
3. Stanford Data Presentation on Preliminary Findings – Lee Sanders (Stanford)
  - a. Presentation on Findings from CCS Administrative Data
  - b. Q & A about possible areas of exploration using existing data
4. Review and Discuss Principles/Criteria for Eligibility Criteria Review – Claudia Crist (DHCS)
5. Wrap-up and Next Steps – Neal Kohatsu (DHCS)

# Eligibility and Health Conditions TWG Members

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## Co-Chairs:

- **Claudia Crist** – DHCS
- **Neal Kohatsu, MD** – DHCS

## Members:

- **David Alexander, MD** – Lucile Packard Foundation for Children's Health
- **Maya Altman** – Health Plan of San Mateo
- **Edward A. Bloch, MD** – Children's Medical Services, LA County
- **John Patrick Cleary, MD** – California Association of Neonatologists
- **Stuart Cohen, MD** – American Academy of Pediatrics
- **Nathan Davis** – California Children's Hospital Association
- **Margi Dragomanovich** – Valley Children's Hospital
- **Chris Dybdahl** – Santa Cruz County
- **Louis Girling, Jr., MD** – Alameda County California Children's Services
- **Kelly Hardy** – Children Now
- **Domonique Hensler** – Rady Children's Hospital, San Diego
- **Katie Schlageter** – Alameda County
- **Christopher Wecks** – Parent Representative

# Opening Remarks

Anastasia Dodson, DHCS



# Findings from CCS Administrative Data

CCS RSAB Data TWG  
May 18, 2015

Lee M. Sanders, MD, MPH, Stanford CPOP

# Overview

- 1. Policy Facts, 2015, Issue 3 from Stanford CPOP**
- 2. Data Requests from the CCS RSAB**



## Methods: Design

Retrospective, population-based analysis of all paid claims for the CCS Program (FY12), abstracted from the state's Management Information System / Decision Support System

**Use of care:** Total capture

**Spend:** Total capture of CCS-related spend

Partial capture of non-CCS-related costs (FFS)



# Methods: Definitions

**Enrollment (FY12):** "CCS enrollee" is any child enrolled in California Children's Services from 7/1/2001 to 6/30/2012. Data pulled January 2013. <http://www.dhcs.ca.gov/services/ccs>.

**Regions:** 5 geographic regions, as defined by [California Department of Social Services](#), and as designated by child's primary residence in CCS enrollment file.

**Counties:** All California counties labeled by number. Data for county excluded if cell size < 25 children.

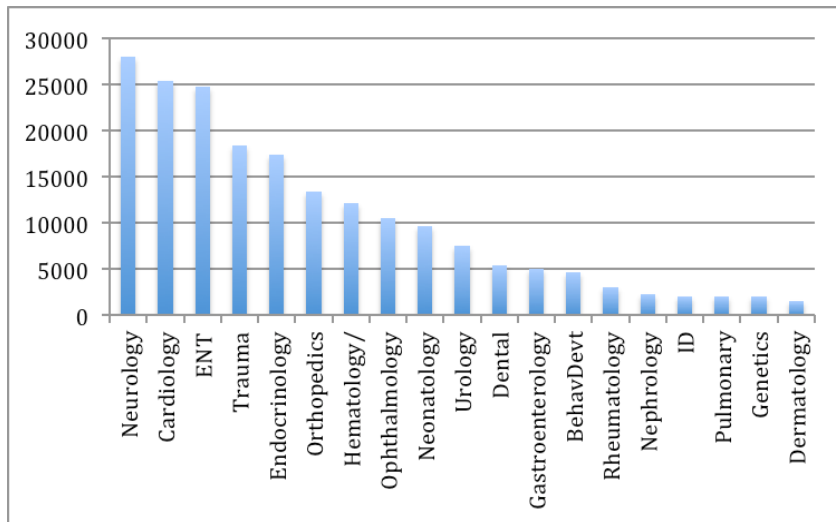
**Types of Care:** Broad categories based on claim type: Inpatient, Residential Facility, MD visit, Pharmacy, DME, Home Health, ED visit, Dental, Other Outpatient.



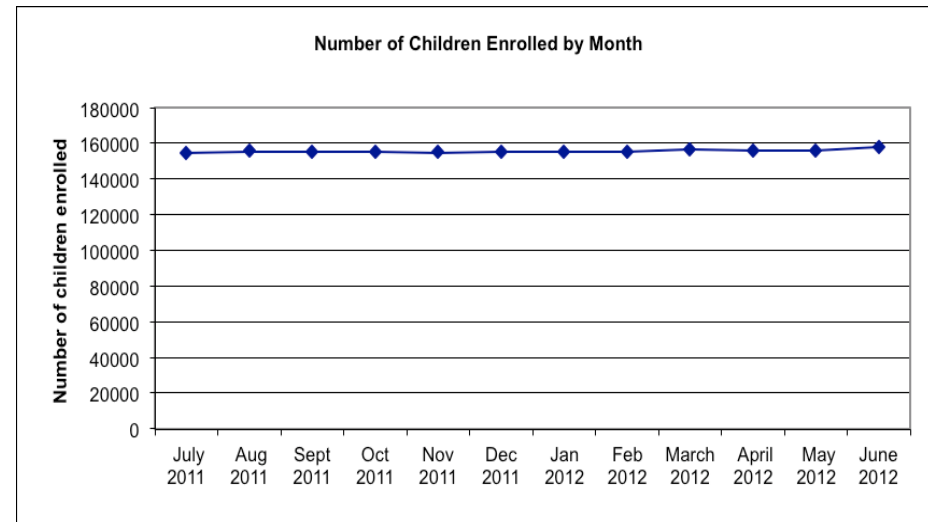
# Policy Facts, 2015, Issue 3:

## Number of Children Enrolled

**Figure 1: Number Enrolled, By Diagnostic Category**



**Figure 2: Number Enrolled, Over Time (Month-to-Month)**

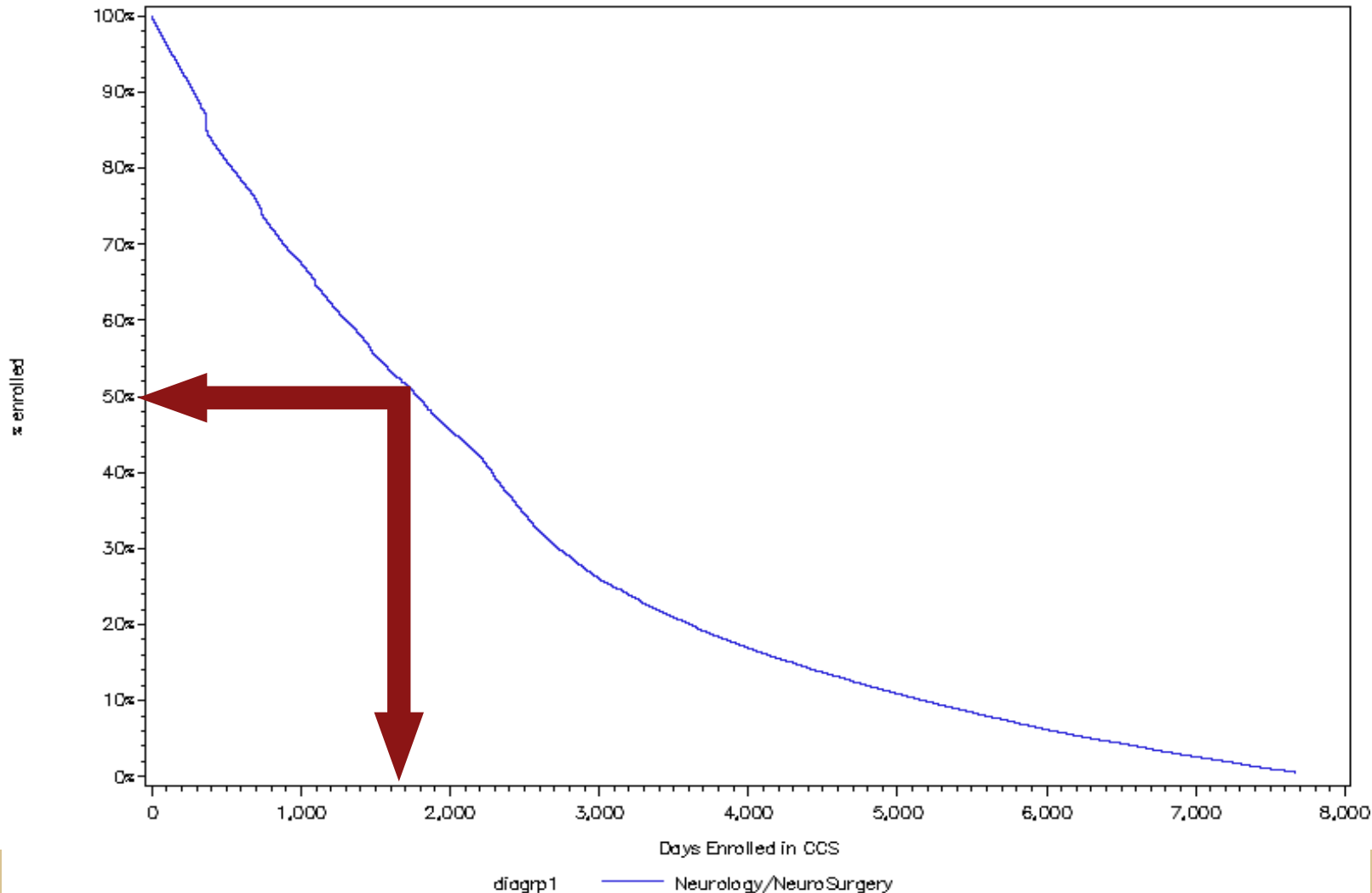


# Data Requests from CCS RSAB

1. Denied claims, by diagnostic type
2. Enrollment period per child (days), by diagnosis and county
3. NICU use of care, by diagnosis, severity, region
4. Outpatient use of care, by type and by site
5. Number of enrollees and spend, by type of care
6. Paid claims to non-CCS providers

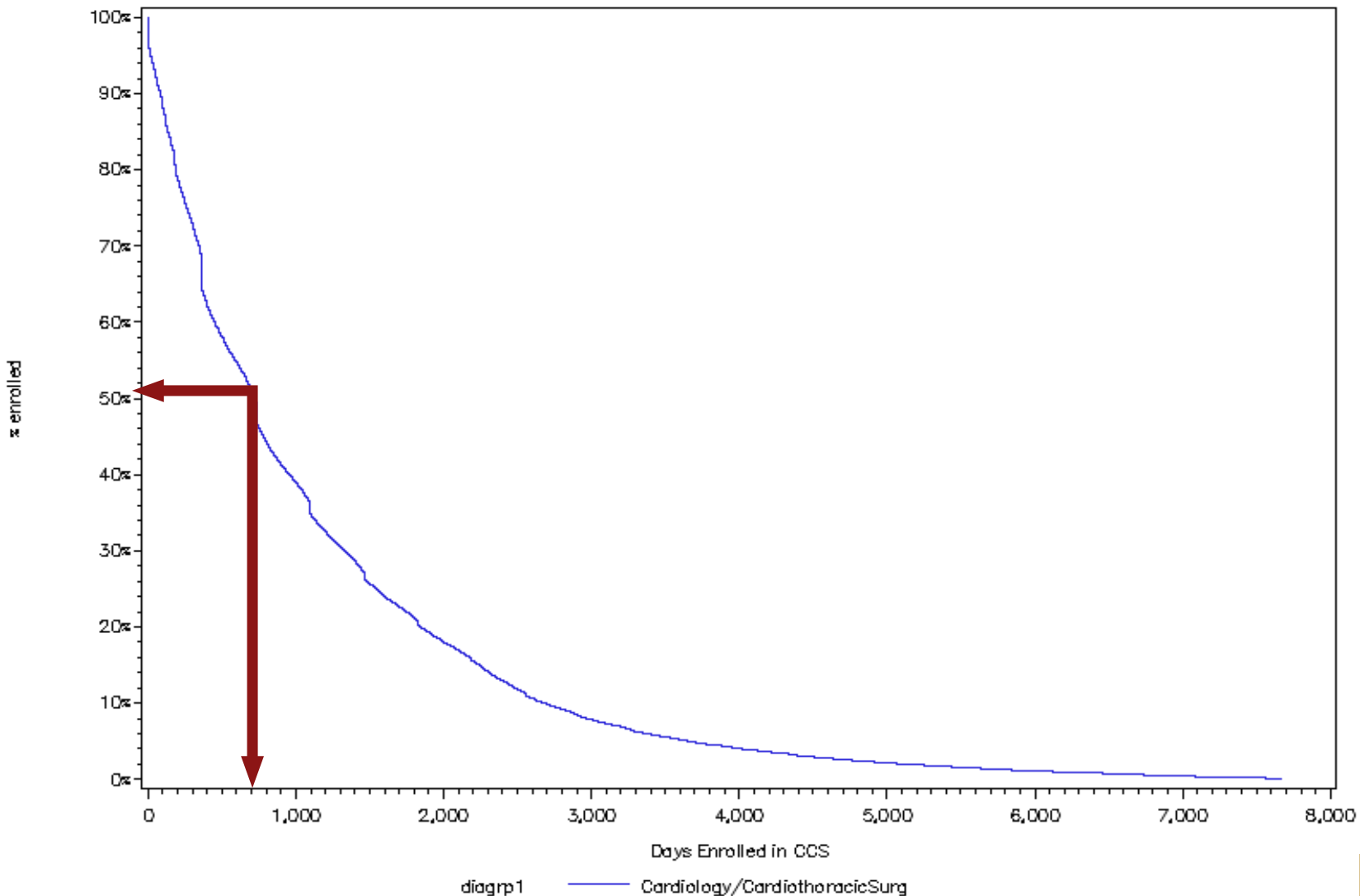
# Data Request #2: Enrollment period, by diagnostic category

## Neurology: Days Enrolled in CCS



# Data Request #2: Enrollment period, by Diagnostic Category

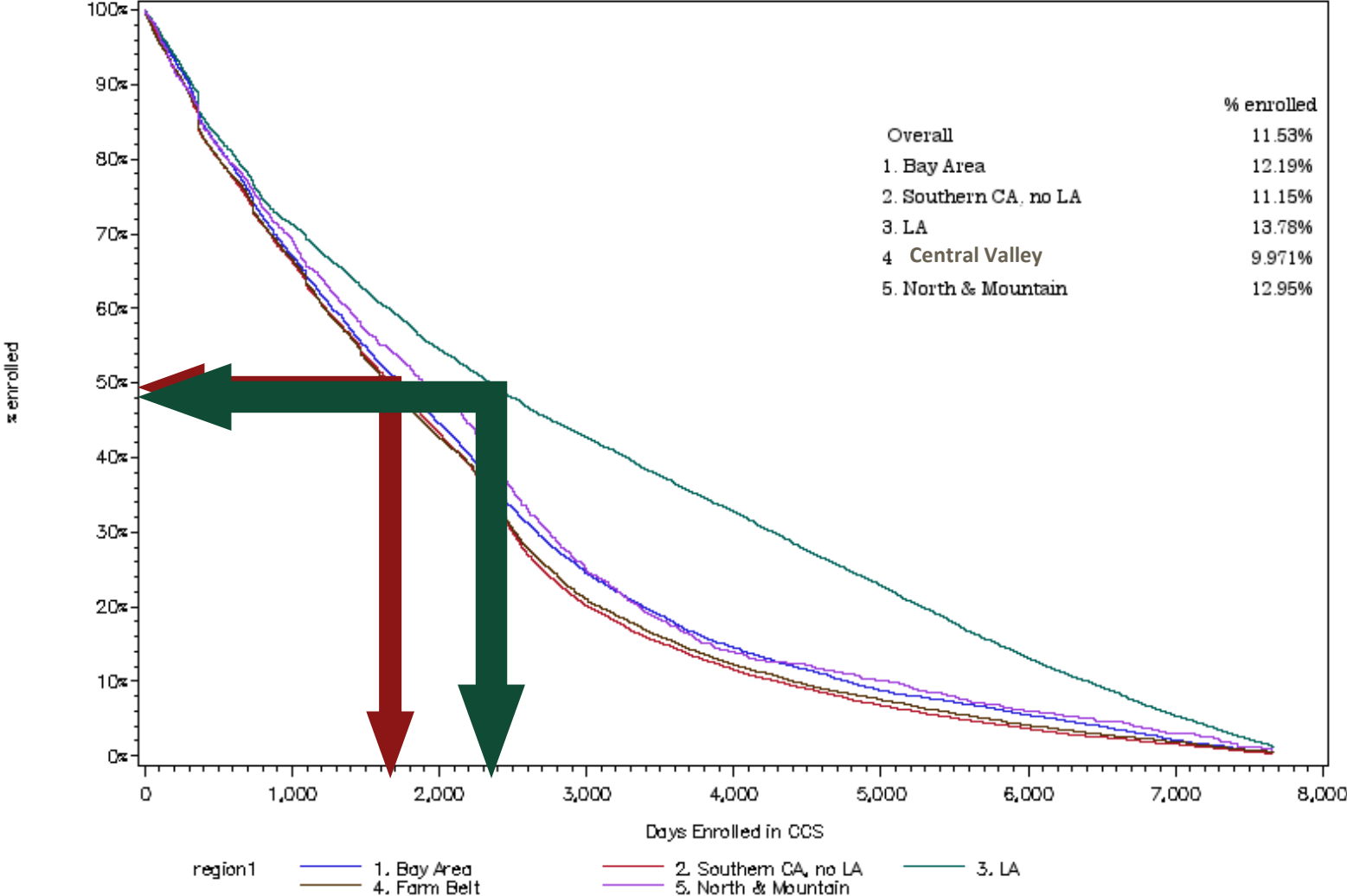
## Cardiology: Days Enrolled in CCS



# Data Request #2:

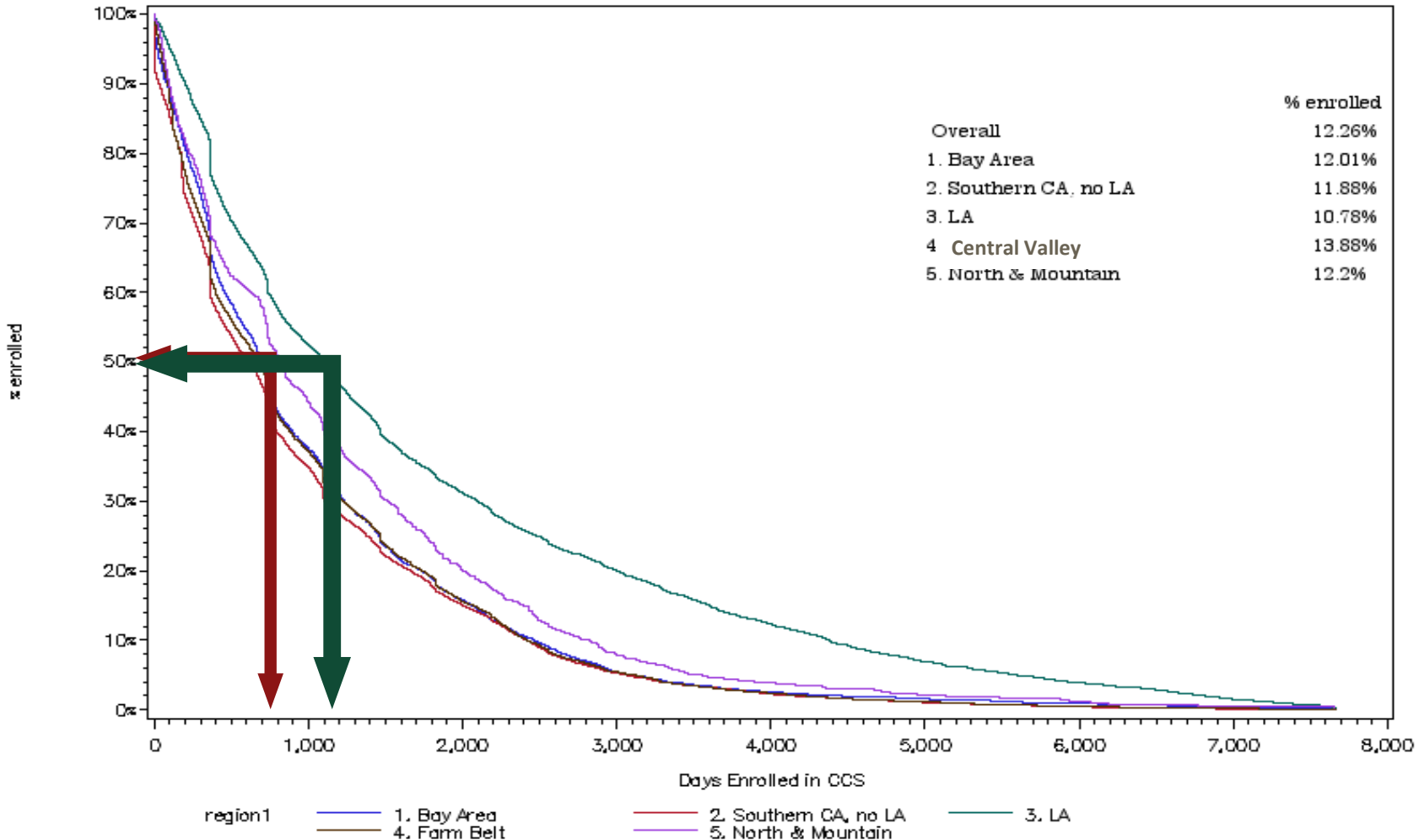
## Enrollment period, by Region

Neurology: Days Enrolled in CCS, by Region



# Data Request #2: Enrollment period, by Region

## Cardiology: Days Enrolled in CCS, by Region



# Data Request #3:

## NICU Use of Care – Analytic Plan

**By Region, By Hospital, Over Time**

### **Characteristics of CCS infants enrolled during NICU stay**

Length of Stay

Level of NICU (at discharge)

CCS eligibility category (diagnosis v. resource use)

Clinical Severity

Birthweight category

Comorbid conditions (IVH, ROP, CLD, NEC, surgery)

# Questions?

Lee Sanders, DHCS



# Data requests to inform Eligibility TWG?

- **Data Request Form**
  - Formal process for submitting requests to the Data TWG
- **Opportunity to request specific data analyses from existing data**
  - FY 2010-2011 to FY 2013-2014 on CCS Program paid claims, encounters, eligibility files, and other related data
- **Submit requests via email to Michaela Ferrari at [michferrari@ucla.edu](mailto:michferrari@ucla.edu) with the subject heading “CCS Redesign Data TWG Information Request.”**

**California Children's Services (CCS) Redesign  
Data Technical Workgroup (TWG)  
Data/Information Request Form**

Personal and Organizational Information:

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

When is the best time to reach you? \_\_\_\_\_

Organizational Affiliation: \_\_\_\_\_

RSAB member?     Yes     No

CCS Redesign TWG member?     Yes     No    If yes, what TWG? \_\_\_\_\_

This data request is meant only to provide you the opportunity to request specific data analyses from existing data (fiscal year 2010-2011 to fiscal year 2013-2014) on CCS Program paid claims, encounters, eligibility files, and other related data, with the goal of informing your TWG's activities in the CCS Redesign. The Data Workgroup will work to prioritize these requests and release findings publicly as soon as possible, but we cannot ensure a specific timeframe. We will also assure that the analyses adhere to existing data-use agreements, including IRB and HIPAA standards.

Data Request for Existing Eligibility and Paid Claims Data:

What is your specific question?

\_\_\_\_\_

\_\_\_\_\_

What are the policy implications/changes that this information could be used for? (How might this information be used to inform the CCS Redesign?)

\_\_\_\_\_

\_\_\_\_\_

What specific outcomes (e.g., length-of-stay, charge) are required to address this question?

\_\_\_\_\_

\_\_\_\_\_



# Review & Discuss Principles for Eligibility Criteria Review

Claudia Crist, DHCS

# Review Guidelines

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1. CCS eligibility falls within the original intent of CCS, with consideration to medical/technological advances;
2. CCS eligibility is based on clinically evidence-based criteria; in absence of clinical evidence, utilize expert opinion
3. New conditions to be added to the CCS eligibility list must demonstrate value added;
4. CCS designation adds value to member with consideration to current landscape/changes in delivery systems; must demonstrate value added.

# Wrap Up & Next Steps

Neal Kohatsu, DHCS

# Wrap Up & Next Steps

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- Plan going forward
- Timeline for Eligibility and Health Conditions TWG activities
  - Next TWG meeting will be scheduled after RSAB Meeting #4 on 6/22 (all-day meeting)
- Co-Chairs will provide an update of this workgroup's progress during the upcoming RSAB Webinar on 5/29 from 10am-12pm

# Thank You!