AMENDED IN ASSEMBLY MARCH 4, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 187

Introduced by Assembly Member Bonta

January 27, 2015

An act to amend Section 14094.3 of the Welfare and Institutions Code, relating to children's services.

LEGISLATIVE COUNSEL'S DIGEST

AB 187, as amended, Bonta. Medi-Cal: managed care: California Children's Services program.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income persons receive health care benefits. The Medi-Cal program is, in part, governed and funded by federal Medicaid provisions. Existing law provides for a demonstration project, California's Bridge to Reform Section 1115(a) Demonstration, under the Medi-Cal program until October 31, 2015, to implement specified objectives, including improved health care quality and outcomes and maximization of opportunities to reduce the number of uninsured individuals.

Existing law provides for the department to enter into contracts with managed care systems, hospitals, and prepaid health plans for the provision of various Medi-Cal benefits. Existing law prohibits services covered by the California Children's Services program (CCS) from being incorporated into a Medi-Cal managed care contract entered into after August 1, 1994, until January 1, 2016, except with respect to contracts entered into for county organized health systems in specified counties.

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This bill would extend the termination of the prohibition against CCS covered services being incorporated into a Medi-Cal managed care contract entered into after August 1, 1994, until the department has completed evaluations of specified pilot programs created as part of California's Bridge to Reform Section 1115(a) Demonstration.

The California Children's Services Program (CCS program) is a statewide program providing medically necessary services required by physically handicapped children whose parents are unable to pay for those services. The State Department of Health Care Services administers the CCS program. Counties, based on population size, are also charged with administering the program, either independently or jointly, with the department. The services covered by the CCS program include expert diagnosis, medical treatment, surgical treatment, hospital care, physical therapy, occupational therapy, special treatment, materials, and the supply of appliances and their upkeep, maintenance, and transportation. Funding for the program comes from county, state, and federal sources. In order to be eligible for the CCS program, an applicant must be under 21 years of age, have or be suspected of having a condition covered by the program, and meet certain financial eligibility standards established by the department.

Existing law prohibits services covered by the CCS program from being incorporated into a Medi-Cal managed care contract entered into after August 1, 1994, until January 1, 2016, except with respect to contracts entered into for county organized health systems in specified counties.

The bill would make technical, nonsubstantive changes to the CCS managed care contract provisions.

Vote: majority. Appropriation: no. Fiscal committee: no-yes. State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 14094.3 of the Welfare and Institutions 2 Code is amended to read:

- 3 14094.3. (a) Notwithstanding this article or Section 14093.05
- 4 or 14094.1, CCS covered services shall not be incorporated into
- 5 any Medi-Cal managed care contract entered into after August 1,
- 6 1994, pursuant to Article 2.7 (commencing with Section 14087.3),
- 7 Article 2.8 (commencing with Section 14087.5), Article 2.9
- 8 (commencing with Section 14088), Article 2.91 (commencing
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1 with Section 14089), Article 2.95 (commencing with Section

2 14092); or either <u>Article 2</u> Article 1 (commencing with Section

3 14200), or Article 7 (commencing with Section 14490) of Chapter

4 8, until January 1, 2016, the department has completed evaluations

5 of the CCS pilot programs created pursuant to subdivision (c) as

6 part of California's Bridge to Reform Section 1115(a)

7 *Demonstration developed pursuant to Section 14180*, except for 8 contracts entered into for county organized health systems or

8 contracts entered into for county organized health systems or9 Regional Health Authority in the Counties of San Mateo, Santa

10 Barbara, Solano, Yolo, Marin, and Napa.

(b) Notwithstanding any other provision of this chapter, providers serving children under the CCS program who are enrolled with a Medi-Cal managed care contractor but who are not enrolled in a pilot project pursuant to subdivision (c) shall continue to submit billing for CCS covered services on a fee-for-service basis until CCS covered services are incorporated into the Medi-Cal managed care contracts described in subdivision (a).

(c) (1) The department may authorize a pilot project in Solano
County in which reimbursement for conditions eligible under the
CCS program may be reimbursed on a capitated basis pursuant to
Section 14093.05, and provided all CCS program's guidelines,
standards, and regulations are adhered to, and CCS program's case
management is utilized.

(2) During the time period described in subdivision (a), the 24 25 department may approve, implement, and evaluate limited pilot 26 projects under the CCS program to test alternative managed care 27 models tailored to the special health care needs of children under 28 the CCS program. The pilot projects may include, but need not be limited to, coverage of different geographic areas, focusing on 29 30 certain subpopulations, and the employment of different payment 31 and incentive models. Pilot project proposals from CCS 32 program-approved providers shall be given preference. All pilot 33 projects shall utilize CCS program-approved standards and 34 providers pursuant to Section 14094.1.

(d) For purposes of this section, CCS covered services include
all program benefits administered by the program specified in
Section 123840 of the Health and Safety Code regardless of the
funding source.

(e) Nothing in this section shall be construed to exclude orrestrict CCS eligible children from enrollment with a managed

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- 1 care contractor, or from receiving from the managed care contractor
- 2 with which they are enrolled primary and other health care
- 3 unrelated to the treatment of the CCS eligible condition.
- 4 SECTION 1. Section 14094.3 of the Welfare and Institutions
 5 Code is amended to read:
- 6 14094.3. (a) Notwithstanding this article or Section 14093.05
- 7 or 14094.1, CCS covered services shall not be incorporated into
- 8 any Medi-Cal managed care contract entered into after August 1,
- 9 1994, pursuant to Article 2.7 (commencing with Section 14087.3),
- 10 Article 2.8 (commencing with Section 14087.5), Article 2.9
- 11 (commencing with Section 14088), Article 2.91 (commencing
- 12 with Section 14089), Article 2.95 (commencing with Section
- 13 14092); or either Article 1 (commencing with Section 14200), or
- 14 Article 7 (commencing with Section 14490) of Chapter 8, until
- 15 January 1, 2016, except for contracts entered into for county
- 16 organized health systems or Regional Health Authority in the
- 17 Counties of San Mateo, Santa Barbara, Solano, Yolo, Marin, and 18 Nope
- 18 Napa.
- 19 (b) Notwithstanding any other provision of this chapter,
- 20 providers serving children under the CCS program who are enrolled
- 21 with a Medi-Cal managed care contractor but who are not enrolled
- 22 in a pilot project pursuant to subdivision (c) shall continue to
- 23 submit billing for CCS covered services on a fee-for-service basis
- 24 until CCS covered services are incorporated into the Medi-Cal
- 25 managed care contracts described in subdivision (a).
- 26 (c) (1) The department may authorize a pilot project in Solano
- 27 County in which reimbursement for conditions eligible under the
- 28 CCS program may be reimbursed on a capitated basis pursuant to
- 29 Section 14093.05, and provided all CCS program's guidelines,
- 30 standards, and regulations are adhered to, and CCS program's case
- 31 management is utilized.
- 32 (2) During the time period described in subdivision (a), the
- 33 department may approve, implement, and evaluate limited pilot
- 34 projects under the CCS program to test alternative managed care
- 35 models tailored to the special health care needs of children under
- 36 the CCS program. The pilot projects may include, but need not be
- 37 limited to, coverage of different geographic areas, focusing on
- 38 certain subpopulations, and the employment of different payment
- 39 and incentive models. Pilot project proposals from CCS
- 40 program-approved providers shall be given preference. All pilot

- 1 projects shall utilize CCS program-approved standards and
- 2 providers pursuant to Section 14094.1.
- 3 (d) For purposes of this section, CCS covered services include
- 4 all program benefits administered by the program specified in
- 5 Section 123840 of the Health and Safety Code regardless of the
- 6 funding source.
- 7 (e) This section shall not be construed to exclude or restrict CCS
- 8 eligible children from enrollment with a managed care contractor,
- 9 or from receiving from the managed care contractor with which
- 10 they are enrolled primary and other health care unrelated to the
- 11 treatment of the CCS eligible condition.

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