

Michigan

Children's Special Health Care Services (CSHCS)

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ELIGIBILITY CRITERIA

AGE:

Birth to 21 years of age, except age 21 or over with cystic fibrosis or coagulation defects.

RESIDENCY:

To meet the residency requirements, the child's family or guardian(s) must: (1) reside in Michigan; (2) be working or looking for a job in Michigan; (3) be in Michigan with a clear intent to make Michigan their home; (4) be a college student in Michigan; or (5) if temporarily absent from Michigan, claim Michigan as their state of residence.

The family or legal guardian(s) also must be a citizen of the U.S or be an alien lawfully admitted for permanent residence.

If the child was born in the U.S., he or she is considered an U.S. citizen.

MEDICAL ELIGIBILITY CRITERIA:

Factors considered in making a determination of CSHCS eligibility include type of condition (diagnosis), severity of the condition, long-term effects of the condition on the child and family (chronically), and the treatment plan recommended by CSHCS specialists (need for specialty treatment).

Eligible Conditions:

Eligible diagnostic groups include:

- Certain diseases peculiar to newborn infants
- Congenital anomalies
- Diseases of the blood and blood forming organs
- Diseases of the circulatory system
- Diseases of the digestive system
- Diseases of the genitourinary system
- Diseases of the musculoskeletal system and connective tissue
- Diseases of the nervous system and sense organs
- Diseases of the respiratory system
- Diseases of the skin and subcutaneous tissue
- Endocrinal, nutritional, and metabolic diseases
- Infective and parasitic diseases
- Injury and poisoning
- Neoplasms

Excluded Conditions:

- Autism
- Dyslexia
- Emotional disorders
- Learning disabilities
- Mental retardation

FINANCIAL ELIGIBILITY CRITERIA:

General Financial Eligibility:

Qualified individuals are eligible for full coverage through the CSHCS program regardless of family income. Families with adjusted incomes greater than or equal to 250% of poverty share in the cost of the treatment. See "Family Co-Payment or Financial Participation Requirements" below. No financial assessment and no financial participation is required if the recipient: (1) is a Scope I Medicaid recipient; (2) is a ward of the county, state, or a private placement agency; (3) lives in a foster home; (4) is deceased; (5) was adopted with a pre-existing, CSHCS-eligible medical condition; (6) a family member is enrolled in the Women's, Infants, and Children's Food Program; or (7) is in the Michigan CHIP (MIChild).

Financial Eligibility for Initial Screening:

Any child suspected of having a handicapping condition might have a diagnostic evaluation from a CSHCS-approved clinic or specialist, regardless of income. Insurance, if applicable, is billed first.

Family Co-Payment or Financial Participation Requirements:

If a family's adjusted resources are greater than or equal to 250% of the federal poverty level, the family is required to share in the costs of treatment according to the following payment schedule. This schedule is effective as of 4/1/00

Payment Schedule										
MONTHLY PAYMENT	ANNUAL PAYMENT	FAMILY SIZE/ INCOME BRACKET								
		1	2	3	4	5	6	7	8	OVER 8
\$20.00	\$240.00	20875	28125	35375	42625	49875	57125	64375	71625	+7830
		22544	30374	38204	46034	53864	61694	69524	77354	
40.00	480.00	22545	30375	38205	46035	53865	61695	69525	77355	+8410
		24214	32624	41034	49444	57854	66264	74674	83084	
60.00	720.00	24215	32625	41035	49445	57855	66265	74675	83085	+8990
		25884	34874	43864	52854	61844	70834	79824	88814	
80.00	960.00	25885	34875	43865	52855	61845	70835	79825	88815	+9570
		27554	37124	46694	56264	65834	75404	84974	94544	
100.00	1200.00	27555	37125	46695	56265	65835	75405	84975	94545	+10150
		29224	39374	49524	59674	69824	79974	90124	100274	

Note: Families with income above certain limits must share in the cost of specialty care. This chart will give you an estimate of the amount your family may be asked to pay to share in these costs. If there are more than eight people in your family, call 1-800-359-3722. If your family income is more than the highest amount in your column, call 1-800-359-3722.

SCOPE OF SERVICES

SERVICES:

Eligible Services:

- | | |
|---------------------------|--------------------------------------------------------|
| Care coordination | Outpatient care |
| Dental care * | Physical, occupational, and speech and hearing therapy |
| Equipment and supplies | Respite nursing care |
| Home health care | Surgery |
| Inpatient hospitalization | Vision services |
| Laboratory tests | X-rays |
| Medication | |
| Nutrition counseling | |

* Limited to certain conditions.

Excluded Services:

- Experimental care (certain organ transplants)
- Medical social work
- Mental health
- Skilled nursing and intermediate care facilities

HOW/WHERE SERVICES ARE PROVIDED:

CSHCS services are provided by a variety of health professionals in various settings, including inpatient and outpatient hospitals, field and specialty clinics, and in the home.

Specialty Clinics/Programs:

- Area Child Amputee Center
- Cleft Lip and Palate Services
- Developmental Assessment Clinics
- Hearing and Speech Centers
- Hospice of Southeastern Michigan
- Neonatal Intensive Care Units
- Pediatric Neurology Metabolic Disease Clinic

Children's Multidisciplinary Specialty Clinic Services:

- | | |
|------------------------------------------------|------------------------------------|
| AIDS Clinic | Hemophilia Clinic |
| Amputee/Limb Deficiency Clinic | Immunology Rheumatology Clinic |
| Apnea Clinic | Lead Toxicity Clinic |
| Cardiology Clinic | Metabolic Disease Clinic |
| Cleft Lip/Palate/Facial Anomaly Clinic | Muscular Dystrophy Clinic |
| Cystic Fibrosis Clinic | Myelodysplasia/Spina Bifida Clinic |
| Diabetes Clinic | Nephrology/Urology Clinic |
| Endocrinology Clinic | Neurology Clinic |
| Gastroenterology/Nutritional Deficiency Clinic | Pulmonary/Severe Asthma Clinic |
| Genetics Clinic | Seizures Clinic |
| Hematology/Oncology Clinic | Sickle Cell Disease Clinic |

Out-of-State Services:

Diagnostic services may be provided in border land areas. If the border land provider does not enroll in the program, families may be billed for the balance of the services. Other out-of-state services must be pre-authorized and may be provided for an enrolled child if the needed service is recommended by the child's specialist and cannot be obtained in the state of Michigan.

COORDINATION OF FINANCIAL BENEFITS AND SERVICES:

Coordination of Financial Benefits:

Insurance, if applicable, is billed first. The state of Michigan is surrogated to the rights of recovery which a child, parent, spouse, or guardian may have against a liable third party for the cost of care and treatment provided by CSHCS. Staff can assist a family in determining the extent of available health care insurance coverage and coordinating insurance benefits with services available through the CSHCS program. Children with CSHCS coverage, enrolled with a CSHCS Special Health Plan (SHP) have their financial benefits coordinated by the SHP.

Coordination of Services:

Care coordination includes providing information to the family, assisting them in problem solving, making referrals, coordinating services, and advocating to secure services needed by the child and family. CSHCS provides treatment and case management services to recipients of the Supplemental Security Income Disabled Children's Program (only to SSI when they have CSHCS coverage due to a qualified diagnosis). Children with CSHCS coverage enrolled with a CSHCS Special Health Plan (SHP) have their care coordination by the SHP.

SPECIALIZED OR UNIQUE SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC.:

Family Support Network

The Family Support Network is a coordinated network of parents who have children with special needs. These parents represent a wide variety of disabilities or special health needs. The Network includes a central office located within the Michigan Department of Community Health, Children's Special Health Care Services, as well as local chapters which are organized by County or Local Health Department services areas.

The purpose of the network is to provide information and support to other parents who have children with special needs. Local FSN chapter activities are determined by the expressed needs of families in that particular community. As a general rule however, local FSN chapters assist parents in three ways: (1) by matching the new parents (Referral Parents) with the trained Support Parent who has the most in common with them, (2) by providing the Referral Parent with information about programs and services that may be helpful to their family, and (3) by conducting regular support group meetings. These meetings provide an opportunity for emotional support by exploring shared experiences and can provide education and information through programs and speakers.

CSHCS Special Health Plan (SHP)

Michigan is unique in that we spent over 3 years designing an appropriate program through which to have selected contractors provided health care on a capitated basis for children (and some adults) who participate in the CSHCS program. CSHCS beneficiaries with CSHCS only coverage, are for the first time, able to access the benefits of receiving their special care needs services through a medical home within a managed care system. In addition, those with CSHCS only coverage receive the additional benefit of immunizations and well child visits, which are not a covered benefit through the fee-for-service CSHCS coverage.

SPECIALIZED OR UNIQUE SERVICES, SPECIAL GRANTS, WORKSHOPS, ETC.:

(continued)

Those with CSHCS and Medicaid (or MICHild which is the Michigan CHIP program) receive comprehensive health care coverage. The SHPs maintain a specific and contractually specified focus on the delivery of special care needs. The SHPs are also specifically reimbursed to serve the higher needs of this population. CSHCS beneficiaries who enroll with a SHP receive coordination of their services and benefits, including those not covered through the SHP contract. Each enrollee participates in an Individualized Health Care Plan (IHCP) which identifies within the first 60 days of enrollment all of the known and anticipated services for the enrollee for the upcoming year. This process allows these services to bypass the need for referrals within the SHP during the identified time period. IHCPs may be updated at any time and are required to be updated at least annually.

Enrollment with the SHPs is voluntary. Enrollment for this population became an option in September of 1998 in six counties. Expansion across the state is underway. As of July 2000, there are currently 2,015 CSHCN beneficiaries who have chosen to take advantage of the benefits of enrolling in a SHP.

FUTURE PROGRAM DIRECTION:

The Michigan Department of Community Health is committed to providing the opportunity for all CSHCN beneficiaries to have a choice regarding the method of service delivery by which to receive CSHCN services. Families will have a choice between the current Fee-For-Service Health Plan they have always been able to use, or one of the two CSHCN Special Health Plans (SHP): Kids Care of Michigan or Children's Choice of Michigan. The SHPs are managed care plans designed and contracted specifically to serve the pediatric (and some adults) special needs population. The program is supporting and assisting the SHPs expand their coverage areas across the state.

In addition, the CSHCS program is simplifying the application process for families. The program has developed a streamlined application and process which allows families to complete and submit CSHCS applications directly to the CSHCS Plan Division rather than having to go through the usual procedure with the Local Health Departments. Families still have the option of applying through the Local Health Departments or requesting their assistance on any portion of the application if they choose to do so. Families will just have an additional option of applying directly. The streamlined application process was implemented in 20 counties on June 1, 1999. As of July 2000, the program has expanded the option statewide.

STATUTORY/REGULATORY AUTHORITY:

Mich. Comp. Laws § 333.5801 (1991)