

New York

Children with Special Health Care Needs Program (CSHCN)

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The Children with Special Health Care Needs Program (CSHCN) is a public health program which promotes access to high quality systems of care and support; identifies gaps, barriers, and trends; and engages families in health policy development. The program provides information and referral services in health and related areas for families of CSHCN. Information and referral services are provided by local CSHCN Programs that can be accessed through the Growing Up Health Hotline. The program also has an insurance component named the Physically Handicapped Children's Program. The eligibility for the insurance program is described below.

ELIGIBILITY CRITERIA

Note: For Physically Handicapped Children's Program.

AGE:

Under age 21; treatment authorized and initiated prior to the individual's 21st birthday may continue up to expiration of authorization (12-18 months).

RESIDENCY:

Domiciled in New York State.

MEDICAL ELIGIBILITY CRITERIA:

A medically eligible child is one who is handicapped because of a defect or disability, whether congenital or acquired by accident, injury, or disease, or who suffers from a long-term disease, or from any disease or condition likely to result in a handicap in the absence of treatment, and who may be expected to benefit from medical services. There are some county variations in the conditions and services covered.

Eligible Conditions:

Varies by county, but may include:

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|------------------|---|
| Blood dyscrasias | Convulsive disorders |
| Brain injury | Cystic fibrosis |
| Cancer | Diabetes mellitus |
| Cerebral palsy | Nephrosis |
| Chronic asthma | Rheumatic fever and rheumatic heart disease |

Excluded Conditions:

- Developmental delay
- Mental retardation
- Other exclusions depend on county

FINANCIAL ELIGIBILITY CRITERIA:

General Financial Eligibility:

There are no statewide eligibility criteria for treatment services. The PHCP is a county based program with offices in most counties and New York City. The individual programs establish the financial eligibility standards. The county standards are designed to assist families with low incomes or inadequate private health insurance obtain medical services for their children.

Financial Eligibility for Initial Screening:

There is no Financial Eligibility criteria for Diagnostic Evaluation: The PHCP authorizes and reimburses health care providers for the diagnosis and evaluation of children who have or are suspected of having physically disabling conditions or severe chronic illness. Providers must bill Medicaid or private insurance first. A total of three outpatient visits, three outpatient clinical evaluation visits, or an inpatient hospital stay may be eligible for reimbursement.

Family Co-Payment or Financial Participation Requirements:

Some counties may require financial participation for the treatment program.

SCOPE OF SERVICES

SERVICES:

Eligible Services: *

Drugs and special formulas
Durable medical equipment
Engineered foods for inborn errors of metabolism (for example PKU)
Inpatient hospitalization
Laboratory tests
Physician services
Supplies
Surgical procedures
Therapies including: occupational, physical, speech
Transportation

* Reimbursement is limited to services directly related to the covered condition, and may vary by county.

Excluded Services:

Not specifically addressed. Contact County or New York City Program directly.

HOW/WHERE SERVICES ARE PROVIDED:

Program standards require that PHCP eligible children obtain needed services from specialty centers approved by the State Program or physician specialists listed on the New York State roster of medical specialists.

Specialty Clinics/Programs:

Blood Dyscrasia/Leukemia	Cystic Fibrosis
Cancer	Diabetes Mellitus
Chronic Asthma	Hearing and Speech
Chronic Renal Disease	Inborn Errors of Metabolism
Cleft Palate	Infant Apnea
Congenital & Acquired Heart Disease	Orthopedics
Congenital Hypothyroidism	Premature Infant Care
Convulsive Disorders	

Out-of-State Services:

The Commissioner of Health may approve out-of-state services: (1) to ensure continuity of services if the child requesting out-of-state services was born/previously treated in another state, (2) if the child requesting emergency out-of-state services is visiting in and physically located in another state, or (3) necessary services, procedures, or providers are unavailable within the state.

COORDINATION OF FINANCIAL BENEFITS AND SERVICES:

Coordination of Financial Benefits:

The PHCP is the payor of last resort. The county program determines the family's health insurance status or Medicaid coverage and notifies the provider accordingly. Third party insurance and/or Medicaid must be billed first. Medicaid payment is considered payment in full. Where appropriate, a family will be referred to local agencies to determine if the family is eligible to receive Medicaid, Child Health Plus, Supplemental Security Income, WIC, etc.

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

State Systems Development Initiative:

This federal grant's goal is to increase state and local knowledge of health status of Children with Special Health Care Needs (CSHCN); and to develop local capacity to address the comprehensive needs of CSHCN and their families. The objectives of the project are to: (1) identify the population of CSHCN within New York State, (2) to collect and report core data on the CSHCN population including access to and delivery of health care, and (3) to develop performance measures for CSHCN programs.

STATUTORY/REGULATORY AUTHORITY:

N.Y. Pub. Health Law §§ 2580-2583 (McKinney 1985, Supp. 1993)
N.Y. Comp. Codes R. & Regs. tit. 10, §§ 46.1 - 46.11