



California Children's Services Whole Child Model Workshop Glossary

authorization request – written request from provider to Partnership HealthPlan for a service to be approved for coverage. Once it is approved, a claim for payment can be issued by the provider.

California Children's Services (CCS) – A state program for children with certain diseases or health problems. Through this program, children up to 21 years old can get the health care and services they need. CCS will connect you with doctors and trained health care people who know how to care for your child with special health care needs.¹

care coordination – the organization of your child's care. Care coordination is always carried out by a team made up of families and providers; sometimes that team is led by a professional like a nurse case manager, and sometimes it is led by a parent or caregiver. It is family-centered and addresses all aspects of a child's health including medical, social, developmental, behavioral, educational and financial. The goal of care coordination is to achieve optimal health and wellness outcomes.²

continuity of care – consistency in the quality of your child's medical care ensured by provisions in Senate Bill 586 including keeping your child's providers for 12 months. Families will receive a notice 60 days before that 12 months is over with instructions on how to petition for an extension after the 12 months.

Department of Health Care Services (DHCS) – a state department that funds and manages health care delivery programs like Medi-Cal and CCS

fee for service – A method in which doctors and other health care providers are paid for each service performed. Examples of services include tests and office visits.³ Whole Child Model counties are moving from a fee-for-service model to a managed care model.

formulary – a list of medications. The Partnership HealthPlan formulary is a detailed list of medications that are covered by the managed care plan.

grievance – an documented challenge or concern with the provision of care by Partnership HealthPlan documented and submitted to the Grievance Unit at Partnership HealthPlan. There are two types of grievances: a complaint and an appeal

complaint – a grievance surrounding an incident including information about who, what, when, and where the incident occurred, and any steps taken to resolve the issue

appeal – a challenge to a denial or modification that you feel was inappropriate or incorrect

managed care plan - Managed care plans are a type of health insurance. They have contracts with health care providers and medical facilities to provide care for members at reduced costs. These providers make up the plan's network.⁴

medical therapy unit (MTU) – physical and occupational therapy services that are administered at public school sites. Your county CCS program will continue administering medical therapy services after the Whole Child Model rolls out on January 1, 2018.

nurse case manager – assigned to all CCS patients, helps coordinate healthcare and related services by managing and authorizing your child's care.

Partnership HealthPlan (PHP) – the managed care plan that will administer CCS healthcare services to the 14 Northern California counties enrolled in the Whole Child Model (Del Norte, Humboldt, Lake, Lassen, Marin, Mendocino, Modoc, Napa, Shasta, Siskiyou, Solano, Sonoma, Trinity, Yolo)

Senate Bill 586/SB 586 – The legislation introduced by Senator Hernandez and signed into law by Governor Jerry Brown in September 2016. The bill authorized the Whole Child Model to begin, and laid out protections that addressed a lot of concerns that families and advocates had leading up to its authorization.

Whole Child Model (WCM) – a new way of delivering CCS services by a managed care plan

1. "California Children's Services." *Department of Healthcare Services*, State of California, 2018, <https://www.dhcs.ca.gov/services/ccs/Pages/default.aspx>
2. Kuo, Dennis Z. et al, "Care Coordination for Children With Medical Complexity: Whose Care Is It, Anyway?" *PEDIATRICS* Volume 141, number s3, March 2018, p. S225, <https://doi.org/10.1542/peds.2017-1284G>
3. "Fee For Service." *Healthcare.gov*, U.S. Centers for Medicare & Medicaid Services, 2018, <https://www.healthcare.gov/glossary/fee-for-service/>
4. "Managed Care." *Medline Plus*, US National Library of Medicine, 2018, <https://medlineplus.gov/managedcare.html>