



Children with Medical Handicaps Program (CMH Program)



Jennifer Combs, RN, BSN, CCM
Ohio Department of Health
CMH Field Nurse Case Manager



Teresa Flower RNII, BSN, CPN
Cincinnati Children's Hospital Medical Center
CMH Service Coordinator Cerebral Palsy Clinic

Program Outcomes




Participants will:

- Understand the mission of the CMH program
- Identify how to link families of children with special health care needs to a network of quality providers and associated financial services for the children.




What is Children with Medical Handicaps Program (CMH)?

Children with Medical Handicaps Program is a tax-supported health care program within the Ohio Department of Health.




What is Children with Medical Handicaps Program?

- A program for families of children with special health care needs.
- A program that:
 - helps families obtain payment for needed medical services.
 - links families to a network of medical providers (12,000+)
 - collaborates with public health nurses in local health departments to assist in increasing access to care.





Children with Medical Handicaps Program Mission

CMH Program's mission is to assure, through the development and support of **high quality, coordinated systems**, that children with special health care needs and their families obtain **comprehensive care and services** that are **family centered, community based** and **culturally sensitive**.



Funding Sources

- Federal Maternal and Child Health Block Grant
- State general revenue funds
- County tax funds/assessments
- Third-party reimbursements
- Donations

CMH Program Medical Providers

All services authorized and paid by CMH must be provided by CMH-approved providers.

- To be enrolled as a provider, an applicant must:
 - Complete the CMH Provider Application Form
 - Complete the Internal Revenue Service (IRS) W-9 Form
 - Document professional training and experience in treating children with handicapping conditions
 - Provide verification of credentials
 - Sign the CMH Provider Agreement
 - Be an Ohio Medicaid provider
 - Have active staff privileges at a CMH approved hospital



Children with Medical Handicaps Programs


- Diagnostic Program
- Treatment Program
- Service Coordination Program
- PHN Consultative Services



Diagnostic Program

Authorization period – 6 months


- To rule-out a handicapping condition
- To diagnose a handicapping condition
- To establish a plan of treatment



Diagnostic Program Eligibility


- The applicant must be:
 - under the age of 21
 - a resident of Ohio
 - under the care of a CMH-approved physician
- And:
 - Have a suspected special health care need

NO financial eligibility requirement



Diagnostic Program Ineligible Conditions/Services

- Acute conditions
- Assessment of emotional or behavioral problems
- Routine well child care/physical exams/sports physical exams
- Physical and psychological exams for school or adoptive placement
- Evaluation for learning disabilities
- Any service considered to be research or experimental in nature
- Out-of-state services



Diagnostic Services

Automatically Authorized Services

- Basic outpatient services
 - Lab tests, x-rays, special tests
 - PT, OT, ST *evaluations*
- Basic physician services
 - Consults/office visits to CMH-approved providers
- Public Health Nurse services
- Community nutritional consult







Diagnostic Services


Major Services (must be requested)

- Up to 5 days inpatient hospitalization
- Biopsies/anesthesia
- Psych/neuropsych evaluations
- Emergency room
- Emergency transportation
- Dental consult

Treatment Program

- To provide on-going services for **medically** and **financially** eligible children, based on recognized standards
- Authorization period: 1 year
- Cases can be renewed yearly to age 21 with continued medical and financial eligibility




Treatment Program Eligibility

- The applicant must:
 - Be under the age of 21
 - Separate program for adults with cystic fibrosis
 - Be a resident of Ohio
 - Be under the care of a CMH-approved physician
 - Have an eligible medical handicap
 - The family must be financially eligible




Treatment Program Examples of Eligible Conditions (not a complete list)

• Cleft lip/palate	• Birth defects
• Hemophilia	• Cerebral palsy
• Sickle cell disease	• Spina bifida
• AIDS	• Congenital heart defects
• Scoliosis	• Hearing loss
• Epilepsy	• Cystic fibrosis
• Cancer	• Diabetes
• Chronic pulmonary disease	• Severe vision disorders



Treatment Program Ineligible Conditions/Services



• Acute or infectious conditions	• Routine well-child care
• Common refractive errors	• Experimental care
• Emotional/behavioral problems	• Routine orthodontia problems
• Psychological/emotional disorders	• Well child care/physical exam
• Learning disabilities	• Developmental delay



Examples of Services on Treatment Program


(Not a complete list as it varies with each medically eligible condition)

- Inpatient hospitalization
- Medical supplies/equipment
- Special formula
- Surgery/anesthesia
- Prescription medications
- Therapies
- Orthodontia services
- Orthotics/prosthetics
- Dental care


CMH Financial Guidelines

- The CMH Treatment Program has a financial eligibility requirement.
- Financial eligibility for CMH is determined case by case.
- Families that meet the income standards for Medicaid and/or Healthy Start/Healthy Families are required to apply.
- A child receiving benefits through Medicaid, SSI or WIC is automatically financially eligible for CMH treatment services.




CMH Financial Guidelines

- If the child is not active in the Medicaid program, CMH will send the parent or legal guardian a financial application packet.
- Financial eligibility is based on
 - 185% of Federal poverty level
 - does not count the income of stepparent
 - family size
 - the family's taxable income
 - the medical care the child needs
 - amount spent on private health insurance
 - amount spent on weekly child care




CMH Financial Guidelines

- According to the Ohio Revised Code
 - Providers are prohibited from charging co-pays or deductibles for services authorized by the CMH program.
 - Providers may not charge families for any portion of the cost of services that are authorized by the CMH program.
 - Balance billing of families is not permitted
 - Providers are to accept the CMH program payment as payment in full.
 - The CMH program is payer of last resort (insurance, Medicaid, CMH)




What happens if a family is determined to be “over Income” for the CMH Program?

- CMH sends the family a denial letter, stating they are over-income for the Treatment Program.
- They will receive information about the CMH’s cost share program, such as:
 - cost share dollar amount
 - CMH Information Sheet, Steps to Meet your Cost Share on how they can meet that cost share amount



Hospital Based Team Service Coordination Program

- CMH Program supports 62 teams located in 3 tertiary centers and 8 children’s hospitals.
- Teams designated to provide special care to children with specific conditions such as:
 - cancer and hemophilia anomalies
 - craniofacial anomalies
 - cystic fibrosis



Hospital Based Team Service Coordination Program

Help families identify, obtain and
coordinate needed services for their child.

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graph TD
    A((Client/Family)) --- B((Service Coordinator))
    A --- C((Public Health Nurse))
    B --- C
    
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Service Coordination Eligibility


- The applicant must:
 - Be under the age of 21
 - Be a resident of Ohio
 - Be under the care of a recognized specialty team that is approved by CMH to provide service coordination
- There is no financial eligibility criteria.

Hospital Based Team Service Coordination Program

- Authorization period: 1 year
- Cases can be renewed yearly to age 21
- Services include:
 - Service coordination services by a hospital-based service coordinator and a local public health nurse
 - Development of a plan by the team service coordinator, public health nurse and the family to meet the needs of the child

Hospital Based Team Service Coordinators at Cincinnati Children's

- Cerebral Palsy – 2 Service Coordinators
- Craniofacial – 2 Service Coordinators
- Hemophilia – 2 Service Coordinators
- Myelomeningocele – 2 Service Coordinators




PHN Consultative Services

Eligibility

- 0-3 years of age
- Part C eligibility through Help Me Grow
- Enrolled in HMG


Services

- Public Health Nursing Services for 1 calendar year (8 hours of service)




Application to Children with Medical Handicaps Program

- In order to enroll in CMH Program...
 - For diagnostic and treatment programs, a Medical Application Form must be submitted by a CMH-approved physician
 - Application must have parent/legal guardian's signature before case can be processed
 - If client is 18 or over, they must sign a release and consent form
- Local health department public health nurses can provide a referral to start the enrollment process.




Letter of Approval

- Parent is mailed letter of approval once child is approved for services
- Managing physician, hospital (if known) and local health department have access to letter through CMH Provider Portal.



Letter of Approval


- Contains
 - Demographic information about the child, parent, and managing physician
 - Information about insurance/Medicaid coverage
 - Name of local health department
 - Type of program, e.g. diagnostic, treatment
 - Child's diagnosis/diagnoses
 - Authorization period
 - Services authorized



Children with Medical Handicaps Website

Go to


- <http://www.odh.ohio.gov/>
- Click on Letter "C"
- Click on Children with Medical Handicaps (BCMh)
 - CMH Programs
 - Information for Parents
 - Information for Providers
 - Forms, Materials, Resources
 - Advisory Committees
 - FAQs




Do Other States have A Program Like Children with Medical Handicaps Program?

YES!
Federal Maternal and Child Health Bureau

- Go to
 - <http://mchdata.hrsa.gov/TVISReports/ContactInfo/StateContactSearch.aspx>
 - Use the arrow key from the drop down box and select the state you are looking for
 - Click on start search
 - This will provide contact information for that state




Contact Information for FNCM

Jennifer Combs, RN, BSN,CCM
Ohio Department of Health
Children with Medical Handicaps (CMH Program)
Office of Health Improvement and Wellness/Bureau of Health Services

Charles R Drew Health Center
1323 West 3rd Street
Dayton, OH 45402
Telephone - (937) 285-6292
Email – jennifer.combs@odh.ohio.gov



Contact Information for Hospital Based
Team Service Coordinator

Teresa Flower RNII, BSN, CPN
CMH Service Coordinator
Cerebral Palsy Clinic
Cincinnati Children's Hospital
(P) 513-636-7480
Email - Teresa.Flower@cchmc.org

