

# Protecting California Children's Services

Since 1994, legislators have led a bipartisan effort to protect California Children's Services. They have supported a carve-out that maintains CCS as a separate organized system that meets the needs of infants, children, and teens with catastrophic or chronic medical conditions.

Here are the facts you need to know to continue supporting this vital lifeline for our most vulnerable patients.

## Legislation

- Section 14094.3 of the Welfare and Institutions Code states that CCS-covered services shall not be incorporated into Medi-Cal managed care contracts. *This language sunsets on September 1, 2008.*
- Section 12693.62 of the Insurance Code states that CCS-covered services shall not be incorporated into Healthy Families managed care contracts. *This language does not have a sunset.*

## Protecting a partnership

California Children's Services works closely with health plans in California to efficiently deliver medical care to our state's sickest children. While primary care is provided through managed care, CCS independently provides the specialty care that these young patients need to survive and thrive.

Now, however, new proposals are under discussion that would expand Medi-Cal managed care. Any new proposal must explicitly include language that continues the carve-out that maintains CCS as a separate program.

## Why It Matters

California Children's Services is an organized delivery system specifically designed to provide medical care services for catastrophically and chronically ill children. The sole mission of CCS is to save and improve the lives of the sickest pediatric patients.

CCS directs eligible children into a regionalized pediatric provider network. This network only allows pediatric-trained specialists who meet specific quality standards to participate in the program. Doctors in the program are all trained to provide life-saving and life-enhancing treatment adapted to the physical, developmental, and emotional needs of children.

CCS sends eligible children directly to the appropriate specialist to receive the care they need. A child with leukemia, for example, can go directly to a CCS-approved pediatric oncologist without having to check in with a primary care physician first—access that saves lives and improves care.

Other state health care services are designed to serve a larger population, including adults, pregnant women, and the elderly. The programs are not designed around the special challenges of caring for medically fragile children.

CCS already partners with managed care plans to keep costs down and coordinate services. CCS providers coordinate with managed care plans to meet children's primary health care needs, reserving CCS dollars and services for the specialty care these children need to live and thrive.

CCS is an organized delivery system for the state's sickest children, ensuring that young patients get the care they need from the right person at the right time.

Data shows medical outcomes are better for children in CCS-type programs. For example, children with cancer treated at regional pediatric tertiary centers had a 93 percent survival rate, compared to just 52 percent for children treated outside these centers (*Journal of Medical and Pediatric Oncology*).