CRISS: Looking Back Over 20 Years

1994  CCS Medi-Cal managed care carve-out established: SB 1371 (Bergeson)

1996  CRISS established as 10-county collaborative, the only multi-disciplinary regional organization in CA focused on CCS. By end of year, split into two entities:
   - “Greater Bay Area Regional CCS Managed Care Pilot” (four counties)
   - CRISS (10 counties) governed by Council, meeting bimonthly

1997  Received 4-year federal MCHB grant to support CRISS

1998  Established precursor to Family-Centered Care Work Group (formal WG established in 1999)

1999  Strategic planning process created Steering Committee and developed consensus voting process

   Established Medical Eligibility Work Group (MEWG)

2000  Established Claims Work Group

2000  Initiated meetings with state CCS (with Family Voices of CA and LA CCS Work Group) to discuss how to make CCS more family-friendly

2001  Received grant from California HealthCare Foundation to support CRISS till dues funding structure in place

2001  Finalized CRISS regional inter-agency transfer guidelines (later adapted by state and issued as CCS Numbered Letter)

2001  Held Transition Forum and made recommendations to state CCS for transition policy

   Began tradition of CRISS conferences, with subsequent topics including sexuality and youth with disabilities; the Affordable Care Act, Covered California and children with special health care needs; best practices for children/youth with special needs; managing diabetes in youth; mental health and children with special health care needs; effective collaboration with families; Medical Therapy Program best practices; best practice and opportunities for CCS redesign.

2002  Implemented CRISS dues structure

2002-03  Organized and loaded State CCS Numbered Letters on computer disks; product submitted to state with recommendation that state distribute NLs electronically and put on state website

2004  Established Medical Therapy Program Work Group

2005-06  Conducted statewide survey of county CCS programs regarding their family-centered care activities
MEWG initiated Medical Eligibility Matters, capturing consensus on interpreting state medical eligibility and benefits policy for implementation in CRISS region

Established CRISS website

Conducted first survey of DME access and barriers in CRISS region (subsequent surveys in 2008 and 2015)

Organized regional workshop on implementing innovative care coordination strategies for children with special health care needs in collaboration with county mental health, regional centers, special education, family resource centers, First 5 groups and others

Worked with State CCS, with Family Voices of CA and LA CCS Work Group, to develop medical home concept for CCS enrollees, including draft Numbered Letter

With grant from Sierra Health Foundation expanded CRISS membership to 11 rural counties

Participated in state CCS Technical Work Group focused on redesign and pilot projects

Developed and distributed information on rights of CCS-enrolled children as children in disability-related aid codes (SPDs) were required to enroll in Medi-Cal managed care

Helped to launch and provided staffing for CCS Medical Advisory Committee, statewide group of CCS medical consultants

Developed and distributed fact sheet for rural county CCS programs clarifying the status of CCS in those counties as Medi-Cal managed care rolled out

Developed CRISS Principles for Health Care Delivery to Children and Youth with Special Health Care Needs to assist in approaching CCS redesign

Conducted survey of rural counties regarding implementation of Medi-Cal managed care expansion (with follow-up survey in 2015)

Participated in Bay Area Regional Stakeholder Group for CCS redesign

Participated in State Redesign Stakeholder Advisory Board (RSAB)

Currently participating in State CCS Advisory Group and other CCS-related activities to protect access to appropriate pediatric care for children with special health care needs

CRISS membership includes 27 county programs, 10 pediatric hospitals/pediatric provider organizations, Family Voices of California and 14 local family resource centers

CRISS region includes approximately 60,000 CCS enrollees

*CRISS is still the only multi-disciplinary, multi-county organization in the state focused on improving the CCS program*
The goals of the Regional Service System are to:

1. Assure that all CCS-eligible children in the region can obtain appropriate care (i.e. care that continues to meet current state CCS program standards) at any appropriate provider site within the region;

2. Provide for coordinated, collaborative service delivery to CCS eligible children across the project region;

3. Provide for delivery of CCS services within the region in a cost-effective and efficient manner;

4. Protect CCS service dollars from erosion by inflated administrative costs.

This system will include a series of components that address problems expressed by counties, providers, and CCS clients for years:

- We will create and maintain a network of county CCS programs and local providers within the project region that can undertake to identify and solve inter-county problems through mechanisms such as issue-specific task forces.

- We will create standardized eligibility criteria and eligibility determination and authorization processes within the context of a region-wide information system. Standardizing those systems can end such problems as children with the same physical condition being CCS-eligible in one county but ineligible in the neighboring county, or cases requiring formal closing in one county and formal re-opening in another if the child’s family moves.

- We will design and implement a regional information system so that eligibility, case status, and case management information can be shared on a regional basis.

- We will consider mechanisms to centralize billing, freeing up CCS staff for more client case management, and easing the burden of multiple billing procedures for providers.

CRISS Mission and Goals 2016

CRISS Mission: To build and maintain a seamless, integrated, cost-effective, efficient and family-centered regional service system that improves service delivery and coordination of care for children with special health care needs and coordinates with the state CMS program.

CRISS Goals:

- Maintain a regional vehicle for coordination, collaboration, and pilot testing of innovative models in CRISS region
- Bring together stakeholders to identify problems and generate recommendations for systems organization and other program improvement strategies
- Provide forum for regional information sharing and data collection and analysis, with capacity to compile, share and use data including information on best practices and quality standards
- Promote family-centered care for children in the CCS program