The Comprehensive Perinatal Services Program

CPSP

goals of the program

- To decrease the incidence of low birthweight in infants
- To improve the outcome of every pregnancy
- To give every baby a healthy start in life
- To lower health care costs by preventing catastrophic and chronic illness in infants and children

cdph.ca.gov/programs/cpsp
What is the CPSP Program?

- CPSP is a comprehensive program which provides a wide range of culturally competent services to pregnant women, from conception through 60 days postpartum.

- The program was developed from the OB Access Project, a successful perinatal demonstration project for 7,000 low income women that operated from 1979 to 1982 in 13 California counties.

- Comprehensive services were shown to reduce the low birthweight rate by one-third and to save approximately $2 in short-term Neonatal Intensive Care Unit (NICU) costs for every $1 spent.

- Because of these positive results, CPSP was legislated in 1984 and included as part of the Medi-Cal program in 1987.

- Medi-Cal Managed Care health plans are required to provide access to CPSP services for all Medi-Cal eligible enrollees.
What are the CPSP services?

CPSP Services include:
- Client orientation to comprehensive perinatal services
- Initial assessment, trimester reassessments, postpartum assessment, interventions, and follow-up services in:
  - Obstetrics
  - Nutrition
  - Health Education
  - Psychosocial Services
- Individual Case Coordination
- Prenatal Vitamin/Mineral Supplements
- Nutrition Program (WIC), genetic screening, dental care, family planning, and pediatric care, domestic violence, and more.

Who can become a CPSP provider?

Any of the following can be a CPSP provider, as long as they are an active Medi-Cal provider and have an active National Provider Identifier (NPI) number, and are in good standing with their licensure board:
- Physician (obstetrician/gynecologist, family practitioner, general practitioner, or pediatrician)
- Medical Group, any of whose members is one of the above physicians
- Certified Nurse Midwife
- Nurse Practitioner (family or pediatric)
- Preferred Provider Organization (PPO)
- Clinic (hospital, community, county)
- Alternative Birth Center
Who can deliver CPSP services?

The CPSP provider may employ or contract with any of the following practitioners to deliver services appropriate to their skill level:

- Physicians
- Certified Nurse Midwives
- Physician assistants
- Registered Nurses
- Nurse Practitioners
- Licensed Vocational Nurses
- Social Workers
- Psychologists
- Marriage, Family, and Child Counselors
- Registered Dietitians
- Health Educators
- Certified Childbirth Educators [American Society for Psychoprophylaxis in Obstetrics (ASPO)/Lamaze, Bradley, International Childbirth Education Association (ICEA)]
- Comprehensive Perinatal Health Workers (CPHW)
  - At least 18 years old
  - High School Diploma
  - Minimum one year paid perinatal experience
Models of CPSP service delivery

- Approved CPSP providers can be found in solo practice, group practice, health departments, hospitals, community clinics, managed care plans, Federally Qualified Health Center (FQHC), Indian Health Services (IHS), Rural Health Clinics (RHCs), and residency programs.

- In most cases, the entire CPSP program is offered within a single location. In others, obstetrical services are provided in the provider’s office with other services provided elsewhere, under subcontract, or by a second CPSP provider.

- Flexibility of program design and implementation allows for the use of a wide range of professional and paraprofessional personnel.

How does CPSP work in FQHC, RHC & IHS

- TARs (Treatment Authorization Request) are not used in FQHCs or RHCs – however, all CPSP claims must meet the same justification necessary to obtain a TAR.

- CPSP visits in these health care delivery settings are paid at a flat fee per visit, for on-site and off-site services, as defined in their individual scope of practice.

How does CPSP work in Medi-Cal Managed Care?

- All Medi-Cal Managed Care health plans are required to ensure that their pregnant enrollees have access to CPSP services.

- It is the plan’s responsibility to ensure that its contracted providers have the appropriate credentials.
Reimbursement schedule
fee-for-service Medi-Cal

Obstetrical Services
Reimbursement for obstetrical services is the same for all providers (CPSP and non-CPSP). Obstetrical services may be billed as a global charge or fee-for-service.

<table>
<thead>
<tr>
<th>SERVICES</th>
<th>REIMBURSEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Pregnancy-Related Exam</td>
<td>$ 126.31</td>
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<tr>
<td>Antepartum Exam</td>
<td>$ 483.84</td>
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<tr>
<td>($60.48/visit x 8 visits)</td>
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<tr>
<td>Delivery (vaginal or cesarean)</td>
<td>$ 544.72</td>
</tr>
<tr>
<td>Postpartum Exam</td>
<td>$ 60.48</td>
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</tbody>
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Subtotal                     $1,215.35

Special Bonuses
Additional reimbursement for approved CPSP providers:

| Early entry into care [within 16 weeks of the last menstrual period (LMP)] | $ 56.63 |
| 10th Antepartum visit                                                   | $113.26 |

Available Bonuses $169.89
Reimbursement schedule
fee-for-service Medi-Cal

Support Services

- Support service reimbursement for health education, nutrition, and psychosocial services is available only to approved CPSP providers.

- Support services provided individually are reimbursed at $33.64/hour up to 23 hours. Group classes are reimbursed at $11.24/patient/hour up to 27 hours.

- A Coordination fee of $85.34 is available if all three, support service assessments are provided within four weeks of entry into care.

- Pregnant women can receive vitamin/mineral supplements (300-day supply) which are reimbursed at $30.00 distributed only by approved CPSP providers.

- Billing is on an itemized basis, using regular Medi-Cal billing forms. CPSP reimbursement codes are available for use by approved CPSP providers.

- Total available support service reimbursement: $1,192.54*
  In high-risk circumstances, additional support service reimbursement can be obtained through the treatment authorization request (TAR) process.

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Total maximum OB/CPSP reimbursement
(Before TAR): $2,577.78

- All Medi-Cal pregnant women who are enrolled in a Medi-Cal Managed Care plan are entitled to receive CPSP services. Reimbursement under managed care depends on the contractual agreement between the provider and health plan or Independent Practice Association (IPA).
CPSP Application Process

- Contact the CPSP Perinatal Services Coordinator (PSC) at your local health department for an application. Please go to the CPSP web page at cdph.ca.gov/programs/cpsp for the name and phone number of the PSC in your county.

- The completed application will be reviewed by the local CPSP coordinator and submitted to the California Department of Public Health (CDPH) for final certification.

- The application approval process may take up to 60 days from the date that CDPH receives a completed application.

For all CPSP services please contact the Perinatal Services Coordinator at your local health department.