

Frequently Asked Questions about the CPSP Application Updates

1. Q Why do we have to update our original CPSP application?

A A CPSP provider is certified to deliver CPSP Services based on the review and approval of information contained in the original CPSP application. When the medical provider signed the form to become a CPSP provider, he or she signed the statement “I certify under penalty of perjury that the above information is true, accurate, and complete to the best of my knowledge. I understand that incorrect or inaccurate information may affect my eligibility to receive Medi-Cal reimbursement and that I must report changes to the above information to the Local CPSP Coordinator.” (Note: The “Local CPSP Coordinator” has been renamed “County Perinatal Services Coordinator” (PSC).

2. Q What changes do we have to submit to the County Perinatal Services Coordinator (PSC)?

A According to the *CPSP Provider Handbook* the following changes must be submitted to the County Perinatal Services Coordinator (PSC):

- Staff providing CPSP services
- Address
- Primary contact person
- Forms used, including assessments and the Individualized Care Plan (ICP)
- Hospital for planned delivery
- General description of practice
- Care delivery arrangements (Antepartum, Intrapartum and Postpartum)

Once the County Perinatal Services Coordinator determines that the changes meet state regulations, the changes will be forwarded to the State Department of Health Services for final approval.

It is also the responsibility of the CPSP provider to notify Medi-Cal Provider Enrollment (1-800-541-5555) within 35 days of any change to a previously submitted Medi-Cal application.

Medi-Cal requires a new Medi-Cal Provider application **and** CPSP application be submitted if there is:

- new location or a change in location
- new taxpayer identification number
- name change or change of ownership

Also, in the event of an audit by Medi-Cal you may need to show that all staff who provided CPSP services and were paid by Medi-Cal met the qualifications of the Program and were listed on the CPSP application.

3. Q When do the changes have to be submitted to the County Perinatal Services Coordinator (PSC)?

A According to the *CPSP Provider Handbook*, if possible the changes should be submitted 30 days before the effective date. Otherwise they should be submitted as soon as the change has taken place.

4. **Q How do we submit the changes to the County Perinatal Services Coordinator (PSC)?**
- A** The changes need to be submitted in writing using the enclosed forms and mailed to the PSC. Faxed or e-mailed changes will not be accepted because an original signature of the authorizing agent must be received and kept on file. When updating the CPSP staff roster, refer to the sample form and detailed instructions.
5. **Q Who is responsible for submitting the changes to the County Perinatal Services Coordinator (PSC)?**
- A** The person responsible will vary from site to site. The ultimate responsibility rests with the medical provider whose Medi-Cal provider number is on the original CPSP application. This person may authorize another staff member to fulfill this duty.
6. **Q What if we decide to discontinue CPSP services?**
- A** The County Perinatal Services Coordinator (PSC) should be notified of the date when CPSP services will be terminated. The PSC will notify the State Department of Health Services Maternal and Child Health Branch and your authorization to provide CPSP services will be deactivated. If you suspend services temporarily, your authorization may continue. However, MCH Branch policy is to deactivate after one year of CPSP inactivity. The provider does not need to contact DHS Provider Enrollment regarding the inactivity in CPSP services.
7. **Q We want to start providing CPSP services at another site. Do we need to submit a new CPSP application?**
- A** It depends. An already existing CPSP provider may have more than one site approved under the original application if the new location is a “satellite” operating less than 20 hours a week and/or there is no separate Medi-Cal billing number for that site. If the new site provides services for more than 20 hours a week and/or has a separate Medi-Cal billing number, a separate application is required. In any case, the County Perinatal Services Coordinator (PSC) must be notified of the expansion of services to a new location.
8. **Q Who can answer my questions about updating our CPSP application?**
- A** Contact Therese McCluskey, MPH, Alameda County’s Perinatal Services Coordinator at (510) 618-2094 or Therese.McCluskey@acgov.org.