

## **COMPREHENSIVE PERINATAL SERVICES PROGRAM** **DEVELOPING CPSP PROTOCOLS**

The following are the most often asked questions about CPSP protocol requirements. Please use the answers as guidelines and call the CPSP office if you need clarification at (213) 639-6419.

### **DURING THE APPLICATION PROCESS**

**Q Exactly what are protocols?**

A Protocols are written procedures for how you plan to provide health education, nutrition and psychosocial services and related case coordination.

**Q When are my protocols due?**

A Protocols must be developed, approved, and adopted within six months of your effective date of approval as a CPSP provider. You are encouraged to begin developing CPSP protocols as soon as your approval letter has been received from the State. *You will receive a postcard from the CPSP office to remind you of the due date.*

**Q Who needs to sign my protocols?**

A Protocols must be signed by a physician, a health educator, a nutritionist, and a social worker. The names of these people must be included on the CPSP provider application.

**Q What qualifications must the health educator, nutritionist and social worker have?**

A In order to sign protocols, the following requirements must be met:  
Health Educator - a Masters Degree in either Community or Public Health Education from a program accredited by the Council on Education for Public Health, and one year of experience in the field of Maternal and Child Health.  
Nutritionist - a dietitian who is registered (RD), or is eligible to be registered by the Commission on Dietetic Registration, and one year of experience in perinatal nutrition.  
Social Worker - a Masters Degree or higher in social work or social welfare from a school accredited by the Council on Social Work Education; or a Master's Degree in Marriage, Family, and Child Counseling; and one year of experience in the field of Maternal and Child Health.

**Q How do I find consultants with these requirements? Do I have to hire them as staff?**

A You do not need to hire consultants as staff. However, you should enter into a written agreement with them which clearly identifies what services they will provide, including protocols, quality assurance, education or high risk interventions, and an agreed upon fee schedule. A list of consultants that meet the minimum requirements is included in the application packet. However, you are free to secure the services of others who qualify. The CPSP office does not endorse any specific consultant.

**Q How much should I pay for protocol development?**

A The CPSP office does not become involved in fee arrangements. Consultants are fee agents and that is why we recommend a formal written agreement.

### **DURING THE SIX MONTH DEVELOPMENT PERIOD**

**Q What if I decide to use different consultants from the ones I listed on the application?**

A As long as the new consultants meet the same qualifications, you may use them for protocol approval but you must submit a staff change using page 2 of the application form.

**Q What format is required for the protocols?**

A If you are contracted with L.A. Care, Health Net, or any of their Plan Partners, IPAs, subcontractors, etc., confirm any protocol-related requirements they have. Protocol development has been made easier within Medi-Cal Managed Care because standardized risk assessment/reassessment tools and boilerplate protocols are approved for your use, whether services you provide are under managed care or billable under CPSP/fee-for-service

Medi-Cal. The CPSP office strongly encourages use of these tools. Some important points for you/your consultants to know as protocols are developed:

- a. The boilerplate protocols must be *customized for each practice site*. This includes community referrals, staffing levels, and case coordination which may differ from site to site (see d. below).
- b. The boilerplate protocols are *not* divided into 3 separate disciplines; rather they are merged into one protocol. The consultants, who may seek to develop or customize them separately, should help you *combine* them before submitting them.
- c. Attachments that must be submitted with any protocol(s) include: (1) an outline for each education class offered, including learner objectives, content, methodology, and methods of evaluation, (2) a blank sign-in sheet with space for date, instructors name and topic, (3) the nutrition weight gain grids and food record used (*if different from those submitted with the application*).
- d. Protocols must clearly describe a system of care from entry to care through postpartum. They must include a time line for each activity, including initial assessment, the individualized care plan, reassessment, postpartum assessment, use of individual and/or group interventions, case coordination, and mandated referrals.

If you do NOT contract with any Medi-Cal Managed Care health plans, you are not required to use the boilerplate format. You and your consultants can choose to develop a protocol for each of the three disciplines (health education, nutrition and psychosocial); however, each protocol *must* meet all criteria as noted above.

**Q Where do I get these standardized tools and boilerplate protocol?**

A L.A. Care and Health Net are responsible, through their Plan Partners, IPAs, subcontractors, etc. to provide copies of all forms to their providers. A list of maternal health plan liaisons is available from the CPSP office if you need their assistance.

**Q What if I cannot complete my protocols by the six month deadline?**

A Call the CPSP office prior to your protocol due date and request an extension.

**FOLLOWING PROTOCOL SUBMISSION**

**Q How do I know if the protocols I submitted are acceptable?**

A The consultants in the CPSP office will review the protocols within 90 days of receipt. You will be notified in writing if there are additional modifications needed. You may receive a telephone call from the office if one or more attachments are needed or if you failed to submit a change of staff notice.

**Q What if more work is needed for the protocol?**

A Sometimes we inform you of changes needed and will give you a deadline to resubmit these changes. If you do not comply with deadlines, or do not call to request an extension, we may send you a delinquent notice. The consultants who assisted you with protocol development should follow through until the protocol is complete and accepted. This is another reason to have a formal written agreement with your consultants.