# Summary of Catalight Care Services (CCS) Provider Manual Updates

## Welcome to the Sixth Edition of the CCS Provider Manual!

Below is a list of items that have been added or enhanced since the Fifth Edition.

### General:

- Updated all references from "Parent" to "Caregiver"

### Appendix:

- All Clinical Report Templates and Resources have been updated
- Offer Templates and Samples has been added
- Caregiver Training Guideline has been added

### Section 2: Definitions

- Added Beneficial Hours & Optimal Hours
- Clarified that Direct Sessions include services provided via telehealth, when client or their representative is present.

### Section 3: Practitioner Management

- Clarified that Practitioner Certification Plan is also required when a paraprofessional's certification lapses (expires) to continue seeing CCS clients.
- Noted that services billed by a practitioner without a required Practitioner Certification Plan are subject to repayment.
- Added requirement for out of state practitioners that work fully via telehealth to have DOJ live scan for both CA and the state they reside.
- Removed requirements for Providers to upload files to Verity with all Practitioner registrations.

### Section 6: Clinical Record Documentation Standards

- Refreshed procedure code list to account for new procedure codes for Chat program.
- Archived Procedure Code 96156 (96150 to be used for all Social Skills Group Assessments)

### Section 7: Claims and Billing Standards

- Updated Invoice Correction Process to represent the Charge Repayment Process.

## Section 8: Required Policies & Procedures

- Removed requirement for Client Rights to include how to lodge complaints against professional boards.

## Section 9: CCS Client Management

- Added that placement documents will now include the CCS Client Information
- Noted that Providers may not require CCS Clients to complete provider specific forms or prevent clients from receiving offers or starting Services due to Provider specific document requests.

## Section 10: Program & Service Requirements

- In alignment with SB221, added requirement to make appointment and schedule offers every 10 business days.
- Enhanced the description of what is required for appointment and schedule offers
- Enhanced the description of what is required to document appointment and schedule offers.
- Clarified that when a client is transferred from a CCS Provider, that Provider is responsible for making direct appointment offers until the client begins services with a new CCS Provider.
- Added guideline for the first 30-days of 3-Tier ABA services to focus on caregiver training.
- Noted that treatment goals should be based on current and appropriate curriculum-based assessment.
- Hours requested for treatment plans must align with the number of goals on the treatment plan.
- Noted that all goals established on the treatment plan should be achievable within a 6-month timeframe.