

Parent Communication Exercise

Please review this script to help with communicating information about the CMS program with the families you serve.

PARENT: “So what does your program do?”

CMS Program Representative: CMS is a program for children and youth with chronic and complex medical conditions. The child must live in Georgia and be under 21 years old and have a doctor’s diagnosis of one of the medical conditions on our list. Your family’s income will also be reviewed to make sure it meets our income guidelines. Some of the services we offer include assistance with organizing your child’s care with his/her doctors or other medical team members and helping teens build skills to transition from pediatric to adult health care. We may also be able to help with payment for medically necessary items such as medications, supplies or equipment that may not be covered by your insurance. Depending on where you live, you may also have access to a variety of specialty medical providers in one of the clinics that we provide at our offices or health department locations.

Possible follow-up parent questions:

- **How will you help me coordinate care for my child?** Each enrolled family will be assigned a care coordinator who is a public health nurse or social worker. Our job will be to work with you and your child to identify, understand and organize your child’s medical needs. We’ll share information with you on family activities that will help you meet other parents caring for children with complex medical conditions. We’ll also share educational opportunities we know of that talk about services offered in the school and supports offered by Medicaid. We also want to make sure that you understand your child’s health condition and feel comfortable talking with your child’s doctor, therapist or pharmacist.....
- **How often will CMS be in contact with us?** Your care coordinator will make contact with you at least twice a year. But you are welcome to call them any time you have a question, need help, or if a medical need arises. There is at least one scheduled visit which may take place in your home, our office or during your child’s clinic appointment.
- **What if there is a service my child needs that CMS does not provide?** The care coordinator works between your family, your child’s doctor’s and community resources to help get the services your child needs. If there is a service you need that CMS is not able to assist with, your care coordinator will try to find other community resources to assist with those needs.

- **Do I have to pay to be in this program?** There is no cost to be enrolled in the program. There is no cost to you for us to help you coordinate your child's care with your primary care provider, specialists, equipment vendors, pharmacist, school nurses or community resources. If your child requires assistance with medical expenses like medications, equipment, office visits etc., you must meet the cost participation first. Think of the cost participation as a deductible. Your deductible depends on your income and if you are below a certain financial range, you may not even have a deductible at all. If your income is above a certain financial range, your care coordinator will let you know what your annual cost participation or deductible will be. Once you meet your cost participation for your child, the CMS program will be able to authorize the reimbursement for medical expenditures associated with your child's eligible condition. No funds are ever exchanged with the CMS program. Your care coordinator will ask you to verify and keep a log of expenses paid for your child to meet the cost participation.
- **What if we do not live in an area that has a specialty clinic and my family has to travel to see my child's specialist?** If you do not live in an area where we have a clinic, you may be eligible to receive travel assistance.
- **Do you accept families that have private insurance or Medicaid?** Yes. We accept families that have private insurance, Medicaid and those with no insurance, as long as you meet the program's eligibility requirements. If you have insurance, we always go through your insurance provider first. If your insurance does not offer the full cost of medically necessary services, supplies or equipment, our program may be able to help cover the cost of eligible expenses related to your child's eligible medical condition once your cost participation is met.
- **What is transitioning from pediatric to adult healthcare?** At age 12, we will start talking to you and your child about his/her health care needs and how that changes as the child graduates from pediatric to adult doctors. They will learn about their condition and begin to take more of an active role in their health care. An example of a transition plan goal would be to allow the youth to have 5 minutes alone with their doctor at a visit. This will help the youth with becoming more comfortable with speaking to the doctor about their health care needs without a parent around. Before each youth reaches 21, the goal is to help them identify and start seeing an adult provider. We want all youth to have the skills and tools needed to be as confident as possible in their health care needs.

- **What if my child is unable to take care of themselves at 21?** We understand some young adults will not be able to take care of their healthcare or other daily needs by themselves. When this happens, we encourage parents and caregivers to have shared decision making. This allows the young adult to keep as much independence as possible, while giving the parent/caregiver legal rights to assist them in the areas they need. If the young adult is not capable of any level of independence, CMS will assist you with finding legal resources needed to give you rights to manage their lifelong healthcare needs when they become an adult.
- **What are some of the chronic medical conditions that are eligible for assistance from CMS?** There are many medical conditions that we enroll children for, and include Asthma, Seizures, Cerebral Palsy, Diabetes, Cystic Fibrosis and many more.
- **Who can make a referral for a child to your program and how is a referral made?** Anyone can make a referral to the program (Parent, Doctor, Therapist, and School Nurse). If you would like to make a referral for a child and you are not the parent or legal guardian, we ask that you discuss this referral with the parent/legal guardian before contacting our program. You can call the local Public Health office that services the county you live in, or you can go online to complete a referral form and fax it in to your local Public Health office.

My child is currently in the Babies Can't Wait (BCW) program, how is the CMS program different? The BCW program focuses on the child's development and makes sure that your child has therapeutic services that can help with their motor skills, speech skills, While CMS focuses on your child's medical needs and can provide assistance as your child grows to the age of 21. If your child has an eligible condition(s), your child can be enrolled in both BCW and CMS.

- **Explain exemption from a CMO... Will basic Medicaid coverage be the same as the Well Care coverage?** When your child is enrolled in the CMS program, they will be moved to straight Medicaid. Your child's Medicaid number on their card will remain the same and basic medical coverages will stay the same. This just allows our program to provide case management and other services to your child. This may also expand your choice of providers available to your child. Please remember that you are still responsible for Medicaid renewal each year so please pay attention to paperwork that is sent to you in the mail.

- **I don't understand English very well; how will I communicate with you?** The CMS Program provides language assistance services to all our families that need an interpreter or translator for any language. This can be done by a service over the phone or we will have a qualified interpreter attend the visit with the care coordinator. We also have all of our CMS forms & a lot of our educational materials & resources available in Spanish.
- **Why does my child have to be present at the visit?** The CMS care coordinator will be working with you and your child to identify, understand and organize your child's medical needs. When your child is present for the visits, it will help your coordinator to assess all of the needs that may be going on with the child. As your child becomes a teenager, the coordinator will begin to work with them by helping them to gain the skills & confidence needed to successfully transition from pediatric to adult healthcare.
- **I'm overwhelmed right now! We just don't have time to participate in another program due to all my child's medical visits.** We understand that you have a lot going on right now. We can schedule a follow-up call to check on your child in a few months if you would like us to. Here is our local office contact number and website. We can mail a brochure to you, and you can always contact us at a later date to enroll your child for services or reach out if you need other public health assistance.
- **I've called the doctor over and over again for the paperwork you asked me for, but the nurse never called me back.**
Let me call the doctor's office and see what I can do to help.
- **My child is having problems at school and I feel it is because his medical needs have not been addressed. Can you help me with this?** I can refer you to Parent-to-Parent of Georgia at 1-800-229-2038. They should be able to assist you with resources to help you get the -necessary school services needed for your child.
- **I don't qualify for your program, but I still need help with paying for my child's expensive medication.**
I can give you some community resources that may be able to help you