



North Carolina Department of Health and Human Services Division of Social Services

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Courier # 56-20-25

Michael F. Easley, Governor
Carmen Hooker Odom, Secretary

Sherry S. Bradsher, Director
(919) 733-3055

April 7, 2006

DEAR COUNTY DIRECTOR OF SOCIAL SERVICES:

ATTENTION: Child Welfare Program Administrators and Supervisors

SUBJECT: Child Medical Evaluation Program

This letter is to inform you of several critical issues concerning the Child Medical Evaluation Program (CMEP). Child Medical Evaluations (CME s) and Child Mental Health Evaluations (CMHE s) are valuable resources and are utilized to assist in the identification of abuse and neglect. We have experienced a high usage rate this state fiscal year, which almost triples the use in previous years for the same time period. We are trying to assess what this means.

In order to maximize our available funds for this program, it is imperative that if you refer a child for a Child Medical (CME) or Mental Health Evaluation (CMHE), you determine if the child receives or is eligible for Medicaid. If the child is Medicaid eligible, then Medicaid must be billed before the CMEP funds are used. If the child becomes eligible for Medicaid the same month the evaluation takes place, you will need to inform the physician so that Medicaid can be billed. We want to ensure that we have this service and inquiring about and utilizing Medicaid funds will assist with preserving the CMEP funding for those children without Medicaid coverage.

It is also important that when you refer children for these evaluations, that the evaluations are necessary to assist you in making case decisions concerning abuse or neglect. The manual states that The CMEP/CMHEP is designed to aid county Departments of Social Services in making case decisions regarding allegations of child abuse and neglect. Both components are designed for CPS investigative assessment purposes, and are not to be requested for medical treatment of children or their families. This policy is also true for CPS Family Assessments. If, based on other information gathered during an assessment, you have enough information to make a case decision, a referral for a CME/CMHE would not be appropriate.

Another issue that has come to our attention is that when the children are brought for the evaluations, information is missing from the Consent/Authorization for Medical/Mental Health Evaluation, DSS-5143. It is very important that the SIS number and any Medicaid information are included at the time of the evaluation, and that the parent/caretaker/guardian has signed the form prior to the evaluation being completed.

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The manual states, The CPS social worker shall give the CMEP provider a copy of the DSS-5143 prior to or at the time of the evaluation. In addition, the social worker shall provide information regarding the child s eligibility for Medicaid. If the form is not filled out completely and correctly, it holds up the billing process for both Medicaid and the CMEP. Failure to provide the CMEP provider with all necessary documentation could result in the county having to pay for the evaluation.

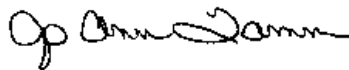
It is important that the social worker currently assigned to the case accompany families to the evaluation and policy states this should happen to assure that appropriate information is available to the examiner. This could also alleviate issues with incomplete paperwork necessary for the evaluation.

We have recently learned that frequently children are being referred for CMHE, and the CMEP is routinely asking that the children have a CME first. If there are sexual abuse issues in the request for the CMHE and a medical exam has not been completed, the CMHE will not be approved until after the CME has been completed. The Mental Health Evaluations should be requested only when the CME has not given conclusive findings that sexual abuse has occurred. There are exceptions such as when the alleged abuse occurred so long ago that the medical exam would not be helpful or when the child is a sexually active teenager and the medical exam would not be conclusive.

The Child Medical Evaluation Program is a vital tool that we use to make the best case decisions and provide the best and most appropriate services to families. It is essential that we use this resource properly so that it is available when needed. We appreciate your attention to this matter so we can preserve this valuable resource.

If you have any questions, please feel free to contact Laura M. Elmore, Program Coordinator, at (919) 733-4319 or by email at laura.elmore@ncmail.net.

Sincerely,



Jo Ann Lamm, Chief
Family Support and Child Welfare Services Section

JAL/lme

cc: Sherry Bradsher
Children s Program Representatives
Family Support and Child Welfare Services Team Leaders
Local Business Liaisons
Work First Representatives

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