

Program Overview

CPSP is a community-based perinatal program that provides prenatal care, delivery, postpartum care, and neonatal and infant care to pregnant Medi-Cal beneficiaries and their babies. CDPH/MCAH Division maintains a statewide network of approved CPSP providers. Local Health Jurisdictions (LHJ) assist the program by conducting outreach activities to inform their communities of available CPSP services.

Title 22 of the California Code of Regulations (CCR) defines the required services and regulations for CPSP participation and reimbursement.

Standard of Care

Pursuant to [22 CCR § 51348.1](#), CPSP obstetric services are provided in conformance with the American College of Obstetricians and Gynecologists (ACOG) Guidelines for Perinatal Care (current edition), including:

- [17 CCR § 6501](#) – Newborn Screening Regulations
- [17 CCR § 6501.5](#) – Required Newborn Screening Forms

Model of Care

CPSP services are delivered with the following underlying philosophy:

- Health care services are client-centered; delivered in consultation with the client and based on the client's prioritized needs
- Services are individualized for the client
- Client strengths are assessed and incorporated into the ICP
- A multidisciplinary approach is used to address the client's full needs
- Services are culturally sensitive and respect the clients' values, beliefs, and traditions
- Clients' choices and rights are valued and respected
- Services delivered are based on protocols approved by nutrition, health education, and psychosocial consultants
- Linkages to some services in the community are required and others are encouraged to enhance the client's care
- Client participation in all medical services and procedures, including CPSP, is voluntary

Enhanced Services

CPSP is based on the provision of comprehensive obstetric (OB), psychosocial (PSY), health education (HE), and nutrition (NUT) services to improve perinatal outcomes. The following is an explanation of enhanced services based on Title 22 Regulations.

Obstetric (OB) services include prenatal, antepartum, intrapartum (delivery) and postpartum care. The initial obstetric assessment must include a comprehensive history and physical examination conducted by the obstetrical provider, who is also responsible for reviewing the enhanced service assessments and participating in case coordination. [[22 CCR § 51348 \(b\)](#)].

Psychosocial (PSY) services include written assessments of the client's psychosocial status, preparation of the psychosocial component of the individual care plan, treatment, and intervention. [[22 CCR § 51348 \(e\)](#)].

Health Education (HE) services include client orientation, written assessment of the client's health education status, preparation of the health education component of the client's individual care plan and interventions. [[22 CCR § 51348 \(d\)](#)].

Nutrition (NUT) services are integrated into the care of all CPSP clients to ensure the optimal health of both mother and infant. [[22 CCR § 51348 \(c\)](#)].

Nutrition services also include education and breastfeeding support, supplies and counseling. For more information on provider requirements see [MMCD Policy Letter 98-10](#).

The four required components involved in the initial nutrition assessment include anthropometric, biochemical, clinical, and dietary. [[22 CCR § 51348 \(c\)\(1\)\(A\)\(B\)](#)].

Scope of Services

CPSP services are provided by qualified practitioners on the provider's staff or through contract with another qualified practitioner. The multidisciplinary CPSP team delivers the following services:

- **Client Orientation (CO):** Each CPSP provider must inform the beneficiary what services will be provided, who will provide these services, where to obtain the services, when the services will be delivered, and procedures to follow in case of emergency. [\[22 CCR § 51348\(d\)\(1\)\]](#)
- **Initial Assessment:** During the initial assessments, the CPSP practitioner gathers baseline data and asks questions designed to identify issues affecting the client's health and the pregnancy outcome, readiness to act, and resources needed to address the issues. The initial assessments are the first steps taken to determine a client's individual strengths, risks and needs in relation to their health and well-being during pregnancy. Ideally, all four assessments are completed within four weeks of entering care. Each initial assessment is completed by a qualified CPSP practitioner in a face-to-face or virtual interview with the client. [\[22 CCR § 51348\(e\)\]](#)
- **Obstetric Initial Assessment Requirements:** The initial obstetric assessment must include a comprehensive history and physical examination done by the obstetrical provider, who is also responsible for reviewing the support services assessments and participating in case coordination. The history and physical exam must be consistent with the most recent American College of Obstetricians and Gynecologists (ACOG) Guidelines for Perinatal Care.
- **Nutrition Initial Assessment Requirements:** The purpose of the initial nutritional assessment is to encourage sound nutrition practices and to identify clients at risk for adverse pregnancy course and outcomes. The four required components involved in the initial nutrition assessment are: anthropometric, biochemical, clinical, and dietary.
- **Health Education Initial Assessment Requirements:** The health education assessment identifies a client's learning needs as they relate to the pregnancy. Effective health education builds on prior experience and current knowledge for each client based on prior prenatal and postpartum infant care and safety.

Provider Resource Document

- **Psychosocial Initial Assessment Requirements:** The psychosocial assessment incorporates the social determinants of health that affect the client's health and quality of life. Specifically, the psychosocial assessment identifies the social, emotional, relational, and environmental issues that can affect the client's pregnancy and wellbeing.
- **Individualized Care Plan (ICP):** The ICP is a document developed by the CPSP practitioner in consultation with the client based on the client's unique risk conditions, problems, strengths, and any deficits identified during the initial assessments and re-assessments. It is a summary of the perinatal services planned for the client during pregnancy and during the postpartum period and covers the enhanced CPSP components: psychosocial, health education and nutrition. The ICP is a part of the client's medical record. Perinatal protocols define how personal supervision by a physician occurs, how the practice documents this in the patient records and who is designated to document or sign the ICP. [[22 CCR § 51179.8](#)].
- **Interventions:** Each CPSP provider is responsible for providing appropriate individual or group interventions for problems, risk areas and educational needs and interests identified during the initial assessment. These interventions are identified on the client's ICP. All interventions are described by protocols approved by the provider and qualified CPSP discipline-specific consultants.
- **Reassessments:** CPSP requires that reassessments be offered once each trimester and postpartum. However, the magnitude of a client's problems and the interventions planned may require more frequent follow-up.
- **Postpartum Assessment and Care Plan:** Postpartum services are covered for up to one year after the end of the pregnancy. During the postpartum period the client is assessed for various issues such as maternal mental health, management of chronic disease and preconception/interconception care and difficulties breastfeeding.
- **Case Coordination:** Case coordination involves organizing the provision of CPSP services and includes supervision of all aspects of patient care. Written procedures for case coordination must be defined in the provider's protocols. CPSP providers receive a case coordination reimbursement from Medi-Cal if the assessments for the enhanced services are completed within four weeks of entry into care. [[22 CCR § 51179.6](#)]

Provider Requirements

- **Developing Site-Specific Protocols:** CPSP providers are required to develop and implement protocols approved by discipline-specific professionals within six months of becoming approved. The discipline specific staff are the preferred professionals to provide consultation and/or direct services when a client presents with high-risk conditions. [[22 CCR § 51179.9](#)]
- **Required Referrals:** Pursuant to [22 CCR § 51348 \(j\)](#), CPSP providers are required to provide referrals for the following non-CPSP services:
 - [Women, Infants, and Children \(WIC\) Program](#) for nutrition education, breastfeeding support, and healthy foods,
 - [Child Health and Disability Prevention \(CHDP\) Program](#) for care coordination to assist families with medical appointment scheduling, transportation and access to diagnostic and treatment services,
 - [Family Planning, Access, Care, and Treatment \(Family PACT\) Program](#) for comprehensive family planning services,
 - [Genetic Disease Screening Program \(GDSP\)](#) for genetic screening services, and
 - [Medi-Cal Dental Program](#) for dental care services.

Definitions

- **CPSP Provider:** CPSP providers must be actively enrolled in Medi-Cal and in good standing with an organizational National Provider Identifier (NPI). For a list of eligible CPSP provider types refer to [22 CCR § 51179.1](#).
- **CPSP Practitioner:** CPSP providers employ or contract with qualified practitioners to provide CPSP services within the practitioners' scope of practice. Eligible CPSP practitioner types, including licensure or certification, education and experience requirements, are defined in [22 CCR § 51179.7](#).
- **Personal Supervision:** CPSP services are provided by or under the personal supervision of a licensed physician. A Comprehensive Perinatal Health Worker (CPHW) must work under the direct supervision of a physician. Personal supervision is evaluation of services provided by others through direct communication, either in person or through electronic means. [[22 CCR § 51179.5](#)]

Additional Resources

- [California Department of Public Health \(CDPH\)](#)
- [Maternal, Child & Adolescent Health \(MCAH\) Division](#)
- [Comprehensive Perinatal Services Program \(CPSP\)](#)
 - [CPSP Provider Application \(CDPH 4448\)](#)
 - [Additional Practitioners \(CDPH 4448A\)](#)
 - [Application Review Tool](#)
 - [CPSP Protocols Template](#)
 - [Assessment/ICP Template](#)
 - [Postpartum Assessment/ICP Template](#)
 - [CPSP Skills-Based Trainings](#)
 - [CPSP Overview Training](#)
- [Gestational Diabetes & Postpartum Care](#)
- [California Home Visiting Program \(CHVP\)](#)
- [Black Infant Health Program \(BIH\)](#)
- [Adolescent Family Life Program \(AFLP\)](#)
- [Department of Health Care Services \(DHCS\)](#)
- [Medi-Cal Program](#)
 - [Payment for CPSP services and supplies](#)
 - [Provider Enrollment Division \(PED\)](#)
 - [Online Inquiry Form](#)
- [Presumptive Eligibility for Pregnant Women](#)
- [Indian Health Program \(IHP\)](#)
- [Every Woman Counts \(EWC\) Program](#)