

**EXHIBIT A-2**  
**ADDITIONAL PROVISIONS FOR PERINATAL PROGRAMS**

**Perinatal Services Guidelines**

Perinatal programs are programs which serve women who are pregnant and substance using; or parenting and substance using, with a child or children ages birth through 17 years. Parenting also includes a woman who is attempting to regain legal custody of her child(ren). All programs receiving Perinatal State General Funds, Perinatal State Match to Drug Medi-Cal or Federal Perinatal Set Aside funding must adhere to the requirements in the State of California **Perinatal Services Network Guidelines**.<sup>1</sup>

**These perinatal programs must:**

1. Provide admission priority for all women in the following order:
  - a. pregnant injection drug users;
  - b. pregnant substance users;
  - c. parenting injection drug users; and
  - d. parenting substance users.

**The following services/activities must be provided or arranged for:**

2. Women-specific treatment and therapeutic interventions which address:
  - a. issues of relationships,
  - b. sexual and physical abuse, and
  - c. parenting
3. Sufficient case management to ensure that women and their children have access to primary medical care, pediatric care and other needed services.
4. Primary medical care for women and children that includes referrals for prenatal care and the monitoring of client's participation in prenatal care; pediatric care for dependent children that includes immunizations. Parents and/or staff may initiate medical and pediatric services for themselves and for their children.
5. Transportation to and from treatment sites and to and from ancillary services for women and children who do not have their own transportation.
6. Child care for participants' children while women are participating in on-site treatment program activities and off-site ancillary services.
  - a. child care must be on-site for participants' children between birth and 36 months while moms are participating in the program with direct staff supervision on-site. Activities may include efforts to address children's developmental needs, sexual and physical abuse and neglect issues.
  - b. child care may be provided on-site or off-site (**at licensed or licensure-exempt child care**) for participants' children who are between 37 months and 12 years of age.
7. Education that includes:
  - a. educational/vocational training and life skills resources;
  - b. TB and HIV education and counseling;
  - c. Education and information on the effects of alcohol and drug use during pregnancy and breast feeding; and
  - d. Parenting skills building and child development information.

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<sup>1</sup> For billing purposes: Only services to pregnant or post-partum women (60 days) are reimbursable through Medi-Cal.

### **Additional Provisions**

8. Where collaborations exist with providers of children's services (i.e. EPSDT providers), AOD staff are required to establish, maintain and support ongoing relationships and to facilitate children and moms to receive therapeutic intervention services anywhere they are located (i.e. treatment facility, licensed childcare center, etc.)
9. The care of perinatal women and their children is a collaborative effort of the AOD treatment system and other entities such as Social Services, Criminal Justice, early childhood mental health providers (EPSDT providers) and therefore, critical that all AOD workers employ clear, honest and ongoing communication with the representatives of these entities.

A list of examples includes, but is not limited to, the following:

- Child Welfare Workers have access to their clients (adult and children) at all times;
- Decisions about discharge and transition are discussed and jointly arranged to ensure smooth transitions before they occur;
- Child Welfare Workers are provided information about any concerns regarding parenting, even if they fall short of requiring a mandated report.

This helps everyone understand the true concerns and issues affecting moms and children and serves to facilitate the optimal delivery of services.

10. Support and encourage clients' progression toward autonomy and independence as they work toward transition.
11. As mandated reporters, AOD providers must report any allegations of abuse to the Hotline at (510) 259-1800. This information should be reported to the case-carrying worker as well.