



JENNIFER KENT
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

SEP 12 2016

Ms. Henrietta Sam-Louie
Acting Associate Regional Administrator
Division of Medicaid and Children's Health Operations
Centers for Medicare & Medicaid Services
San Francisco Regional Office
90 Seventh Street, Suite 5-300 (5W)
San Francisco, CA 94103-6707

REQUEST FOR STATE PLAN AMENDMENT (SPA) - 16-029

Dear Ms. Henrietta Sam-Louie:

The Department of Health Care Services (DHCS) is submitting State Plan Amendment (SPA) 16-029 for your review and approval.

SPA 16-029 will remove Kern County Medical Center, previously approved as a Short-Doyle/Medi-Cal (SDMC) hospital for Psychiatric Inpatient services in SPA 09-004 to a Fee-For-Service Medi-Cal (FFS/MC) hospital, effective July 1, 2016.

If approved, Kern County Medical Center will be listed as an acute psychiatric inpatient services, negotiated rate FFS/MC hospital. This is described in SPA 09-004, in Attachment 4.19-A, pages 41, 42, 43, 44, 45, 45.1, 45.2 and 45.3.

The reimbursement as a negotiated rate FFS/MC hospital is consistent with the reimbursement that DHCS provides to acute psychiatric inpatient hospital providers for these services.

SPA 16-029 deletes or adds Kern County Medical Center to the provisions set forth in the following sections of the State Plan:

- Attachment 4.19 A – page 40.5 (**Delete Kern County Medical Center**)
- Attachment 4.19 A – page 45.3 (**Add Kern County Medical Center**)

Ms. Henrietta Sam-Louie
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For questions or comments please contact Charles Anders, Chief, Fiscal Management and Outcomes Reporting Branch, at (916) 319-8166 or by e-mail at Charles.Anders@dhcs.ca.gov. Thank you for your assistance.

ORIGINAL SIGNED

Health Care Programs
State Medicaid Director

cc:

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| TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES | 1. TRANSMITTAL NUMBER <u>1</u> <u>6</u> — <u>0</u> <u>2</u> <u>9</u> | 2. STATE CA |
| | 3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) | |

| | |
|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES | 4. PROPOSED EFFECTIVE DATE July 1, 2016 |
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5. TYPE OF PLAN MATERIAL (Check One)

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)

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| 6. FEDERAL STATUTE/REGULATION CITATION 42 CFR 447.252 of the Act 1902 (a) (13) of the Act 42 CFR 447.201 42 CFR 447.302 1902 (a) (30) | 7. FEDERAL BUDGET IMPACT a. FFY <u>N/A</u> \$ <u>N/A</u> b. FFY <u>N/A</u> \$ <u>N/A</u> |
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| 8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19A - Page 40.5, Page 40.5 Attachment 4.19A - Page 45.3, Page 45.3 | 9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19A - Page 40.5, Page 40.5 Attachment 4.19A - Page 45.3, Page 45.3 |
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10. SUBJECT OF AMENDMENT

Removal of Kern County Medical Center, previously approved as a Short-Doyle/Medi-Cal (SDMC) hospital for Psychiatric Inpatient services in SPA 09-004 to a Medi-Cal Fee-For-Service (FFS) hospital.

11. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

| | |
|----------------------------------------------------------------------------------------------|---------------|
| ORIGINAL SIGNED State Medicaid Director 15. DATE SUBMITTED 5/17/2016 | 16. RETURN TO |
| | |

FOR REGIONAL OFFICE USE ONLY

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| 17. DATE RECEIVED | 18. DATE APPROVED |
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PLAN APPROVED - ONE COPY ATTACHED

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|-----------------------------------------|------------------------------------|
| 19. EFFECTIVE DATE OF APPROVED MATERIAL | 20. SIGNATURE OF REGIONAL OFFICIAL |
| 21. TYPED NAME | 22. TITLE |

23. REMARKS
APPROVED

Short Doyle/Medi-Cal Hospitals

1. Santa Barbara County Psychiatric Health Facility
2. San Mateo County Medical Center
3. Gateways Hospital and Community Mental Health Center
4. Riverside County Regional Medical Center
5. Kedren Hospital and Community Mental Health Center
6. Natividad Medical Center
7. LAC/USC Medical Center
8. Contra Costa Regional Medical Center
9. Harbor/UCLA Medical Center
10. Olive View/UCLA Medical Center
11. San Francisco General Hospital
12. Sempervirens Psychiatric Health Facility
13. Ventura County Medical Center
14. Santa Clara Valley Medical Center
15. Alameda County Medical Center
16. Arrowhead Regional Medical Center
17. Rady Children Adolescent Psychiatric Services
18. Mills Peninsula Hospital
19. Stanford University
20. Shasta Psychiatric Hospital

The following is a list of FFS/MC contract hospitals that are not disproportionate share hospitals or traditional hospitals as those terms are defined in Attachment 4.19-A, pages 41-45.2.

1. Eden Medical Center
2. Aurora Las Encinas Hospital
3. BHC Alhambra Hospital
4. Citrus Valley Medical Center
5. College Hospital Cerritos
6. Community Hospital Long Beach
7. East Valley Glendora
8. Encino Hospital Medical Center
9. Glendale Adventist Medical Center
10. Grancel Village
11. Henry Mayo Newhall
12. Huntington Memorial Hospital
13. Northridge Medical Center
14. Sherman Oaks Hospital
15. Southern CA Hospital at Culver City
16. Verdugo Hills Hospital
17. Los Alamitos Medical Center
18. St. Joseph Hospital
19. Corona Regional Medical Center
20. Redlands Community Hospital
21. Alvarado Parkway Institute
22. St. Mary's Medical Center
23. Catholic Healthcare West
24. Good Samaritan Hospital
25. Aurora Vista Del Mar
26. Kern County Medical Center

TN No. 16-029

Supersedes

TN No. 09-004

Approval Date:

Effective Date: JUL 01, 2016