DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
San Francisco Regional Office
90 Seventh Street, Suite 5-300 (5W)
San Francisco, CA 94103-6706

DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

December 10, 2015

Mari Cantwell
Chief Deputy Director, Health Care Programs
California Department of Health Care Services
P.O. Box 997413, MS 0000
Sacramento, CA 95899-7413

Dear Ms. Cantwell:

Enclosed is an approved copy of California State Plan Amendment (SPA) 15-018. This SPA was submitted to my office on September 30, 2015 and incorporates changes to state law from AB 1308 (Bonilla, 2013), which removes the physician supervision requirement for licensed midwives (LMs) and allows LMs to bill independently for services provided within the scope of their license, including those provided in Alternative Birth Centers (ABCs) as birth attendants.

The effective date of this SPA is July 1, 2015. Enclosed are the following approved SPA pages that should be incorporated into your approved State Plan:

- Limitations to Attachment 3.1-A, page 12a
- Limitations to Attachment 3.1-B, page 32
- Limitations to Attachment 3.1-B, page 12a
- Limitations to Attachment 3.1-B, page 31

If you have any questions, please contact Cheryl Young by phone at (415) 744-3598 or by email at Cheryl.Young@cms.hhs.gov.

Sincerely,

/s/

Henrietta Sam-Louie
Acting Associate Regional Administrator
Division of Medicaid & Children's Health Operations

Enclosure

cc: Laurie Weaver, California Department of Health Care Services
Jim Elliott, California Department of Health Care Services
Nathaniel Emery, California Department of Health Care Services

	TYPE OF SERVICES	PROGRAM COVERAGE**	PRIOR AUTHORIZATION OR OTHER REQUIREMENTS*
6d.4	Certified Nurse Practitioners' services	All services permitted under scope of practice. As medically necessary, subject to limitations; however, experimental services are not covered. All limitations under 5a apply. All CNPs meet Federal provider qualifications as set forth in 42 CFR §440.60.	Limited to services provided to the extent permitted by applicable professional licensing statutes and regulations. Each patient must be informed that he/she may be treated by a CNP. Services ordered by a CNP, as permitted by State statutes and regulations, are covered to the same extent as if ordered by a physician. Prior authorization is not required, except as noted for physician services under 5a.
6d.5	Licensed Midwife services	All services permitted under scope of practice. Physician supervision is not required.	Services do not require prior authorization.

* Prior authorization is not required for emergency services.
** Coverage is limited to medically necessary services.

TYPE OF SERVICE	PROGRAM COVERAGE*	PRIOR AUTHORIZATION OR OTHER REQUIREMENTS*
29.a Licensed or otherwise State-approved Alternative Birth Centers.	All services permitted under scope of licensure. Obstetrical and delivery services throughout pregnancy and through the end of the month following 60 days after the pregnancy ends.	Must be certified as a Comprehensive Perinatal Services Program provider, or certified within the first year of operation.
29.b Licensed or otherwise State-recognized covered professionals providing services in the Alternative Birth Center.	b.1 Practitioners furnishing mandatory services described in another benefit category and otherwise covered under the State Plan.	Physicians, including general practitioners, family practice physicians, pediatricians, and obstetric-gynecologists; certified nurse midwives; and licensed midwives, as licensed by the State.
	b.2 Other licensed practitioners furnishing prenatal, labor and delivery, or postpartum care in an alternative birth center within the scope of practice under State law.	Certified nurse practitioners must be under the supervision of a physician and licensed by the State.

* Prior authorization is not required for emergency services.
** Coverage is limited to medically necessary services.

	TYPE OF SERVICES	PROGRAM COVERAGE**	PRIOR AUTHORIZATION OR OTHER REQUIREMENTS*
6d.4	Certified Nurse Practitioners' services	All services permitted under scope of practice. As medically necessary, subject to limitations; however, experimental services are not covered. All limitations under 5a apply. All CNPs meet Federal provider qualifications as set forth in 42 CFR §440.60.	Limited to services provided to the extent permitted by applicable professional licensing statutes and regulations. Each patient must be informed that he/she may be treated by a CNP. Services ordered by a CNP, as permitted by State statutes and regulations, are covered to the same extent as if ordered by a physician. Prior authorization is not required, except as noted for physician services under 5a.
6d.5	Licensed Midwife services	All services permitted under scope of practice. Physician supervision is not required.	Services do not require prior authorization.

* Prior authorization is not required for emergency services.
** Coverage is limited to medically necessary services.

TYPE OF SERVICE	PROGRAM COVERAGE*	PRIOR AUTHORIZATION OR OTHER REQUIREMENTS*
28.a Licensed or otherwise State-approved Alternative Birth Centers.	All services permitted under scope of licensure. Obstetrical and delivery services throughout pregnancy and through the end of the month following 60 days after the pregnancy ends.	Must be certified as a Comprehensive Perinatal Services Program provider, or certified within the first year of operation.
28.b Licensed or otherwise State-recognized covered professionals providing services in the Alternative Birth Center.	b.1 Practitioners furnishing mandatory services described in another benefit category and otherwise covered under the State Plan.	Physicians, including general practitioners, family practice, pediatricians, and obstetric-gynecologists; certified nurse midwives; and licensed midwives; as licensed by the State.
	b.2 Other licensed practitioners furnishing prenatal, labor and delivery, or postpartum care in an alternative birth center within the scope of practice under State law.	Certified nurse practitioners must be under the supervision of a physician and licensed by the State.

* Prior authorization is not required for emergency services.
** Coverage is limited to medically necessary services.