



# Department of Health Care Services



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Tribal and Designee Medi-Cal Advisory Process Webinar  
on Proposed Changes to the Medi-Cal Program  
May 30, 2014

# Purpose

- The Department of Health Care Services (DHCS) is hosting this webinar regarding proposed changes to the Medi-Cal Program. This webinar will provide information and allow for feedback on State Plan Amendments (SPA) and Waiver Renewals/Amendments proposed for submission to Centers for Medicare and Medicaid Services (CMS).
- Background: Executive Orders recognize the unique relationship of Tribes with the federal government and emphasize the importance of States to work with Tribes on matters that may impact Indian health.
- This webinar is one way for DHCS to provide information about the Medi-Cal program and get feedback verbally and writing.

# Agenda

<b>Topic</b>	<b>Presenter</b>
<b>Welcome/Overview</b>	Andrea Zubiante, Indian Health Program Coordinator
<b>SPA Scheduled for Submission June 30, 2014</b>	
<b>Alternative Benefits Plan (ABP) Services</b>	Corinne Chavez, Primary, Rural, and Indian Health Division
<b>Feedback/Closing</b>	All

# State Plan Amendment (SPA) Overview

# Medicaid State Plan Overview

- State Plan: The official contract between the state and federal government by which a state ensure compliance with federal Medicaid requirements to be eligible for federal funding
- The State Plan describes the nature and scope of Medicaid program and gives assurance that it will be administered in accordance with the specific requirements of Title XIX of the Federal Social Security Act, Code of Federal Regulations, Chapter IV, and State law/regulations
- California's State Plan is over 1400 pages and can be accessed online at:

<http://www.dhcs.ca.gov/formsandpubs/laws/Pages/CaliforniStatePlan.aspx>

# State Plan Amendment (SPA) Overview

- SPA: Any formal change to the State Plan.
- Approved State Plans and SPAs ensure the availability of federal funding for the state's program (Medi-Cal).
- The CMS reviews all State Plans and SPAs for compliance with:
  - Federal Medicaid statutes and regulations
  - State Medicaid manual
  - Most current State Medicaid Directors' Letters, which serve as policy guidance.

# **Alternative Benefits Plan (ABP) Update**

## **SPA 14-018**

# Background

- The Affordable Care Act, Section 2001 allows state Medicaid agencies to design and implement the ABP. An ABP or “benchmark” or “benchmark-equivalent” allows states to provide medical coverage for newly eligible low-income adults. In order to implement this federal provision, Senate Bill X1 1 authorized California’s ABP for Medi-Cal by adding Welfare and Institutions Code Section 14132.02. The Centers for Medicare and Medicaid Services (CMS) approved SPA 13-035 on March 28, 2014, to implement California’s ABP.
- Per Assembly Bill 82 (Committee on Budget, Chapter 23, Statutes of 2013) limited adult dental benefits were restored under the Medi-Cal program, effective May 1, 2014 pursuant to federal approval (SPA 13-018 on April 29, 2014).

## Description

- DHCS is submitting SPA 14-018 to CMS to add limited adult dental benefits, as required by state law, for newly eligible low-income adults in the Medi-Cal ABP. Dental benefits added under the Medi-Cal ABP for newly eligible low-income adults will be exactly the same schedule of dental benefits provided to Medi-Cal beneficiaries eligible for the Medi-Cal program. The proposed effective date of this SPA is May 1, 2014.

# Impact

## Impact on Indian Health Programs

- SPA 14-018 will add dental services to the list of benefits available to newly eligible low-income adults under the Medi-Cal ABP. Indian Health Programs can provide these services and bill in the same manner for the purposes of reimbursement of these services.

## Impact on Indian Medi-Cal Beneficiaries

- Indian Medi-Cal beneficiaries, who are newly eligible low-income adults under Medi-Cal ABP, will be able to receive dental services as covered Medi-Cal benefits.

# Contact Information

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**Thank You!**

# Feedback