



WILL LIGHTBOURNE  
DIRECTOR

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



GAVIN NEWSOM  
GOVERNOR

August 26, 2021

To: Tribal Chairpersons, Designees of Indian Health Programs,  
and Urban Indian Organizations

Subject: Notice of Proposed Change to the Medi-Cal Program

The purpose of this letter is to provide information regarding a proposed change to the Department of Health Care Services' (DHCS) Medi-Cal Program that will be submitted to the Centers for Medicare and Medicaid Services (CMS). DHCS is forwarding this information for your review and comment.

DHCS is required to seek advice from designees of Indian Health Programs and Urban Indian Organizations on Medi-Cal matters having a direct effect on Indians, Indian Health Programs or Urban Indian Organizations per the American Recovery and Reinvestment Act of 2009 (ARRA). DHCS must solicit the advice of designees prior to submission to CMS of any State Plan Amendment (SPA), waiver requests or modifications, or proposals for demonstration projects in the Medi-Cal program.

Please see the enclosed summary for a detailed description of this DHCS proposal.

**QUESTIONS AND COMMENTS:**

Indian Health Programs and Urban Indian Organizations may also submit written comments or questions concerning this proposal within 30 days from the receipt of notice. Comments may be sent by email to [Angeli.Lee@dhcs.ca.gov](mailto:Angeli.Lee@dhcs.ca.gov) or by mail to the address below:

**Contact Information**

Department of Health Care Services  
Director's Office  
ATTN: Angeli Lee  
MS 0000  
P.O. Box 997413  
Sacramento, CA 95899-7413

Tribal Chairpersons, Designees of Indian Health Programs,  
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Page 2

August 26, 2021

In addition to this notice, DHCS plans to cover this SPA in the next quarterly Medi-Cal Indian Health webinar. Please note that Indian Health Programs and Urban Indian Organizations may also request a consultation on this proposal at any time as needed.

Sincerely,

Original Signed by Andrea Zubiarte for

Sandra "Sam" Willburn, Chief  
Office of Tribal Affairs  
Department of Health Care Services

Enclosure



## **Department of Health Care Services (DHCS) Tribal and Designees of Indian Health Programs Notice**

### **PURPOSE**

To seek necessary federal approvals to eliminate the December 31, 2021 sunset date for the supplemental incentive payments to support developmental screenings and adverse childhood experiences (ACEs) screenings, also referred to as “trauma screenings.”

### **BACKGROUND**

These supplemental payment programs were originally established using Proposition 56<sup>1</sup> (Prop. 56) funds from January 1, 2020, through December 31, 2021. The Budget Act of 2021<sup>2</sup> eliminated the sunset date for supplemental payments for both developmental screenings and ACEs screenings. In addition, beginning July 1, 2022, the Budget Act of 2021 changes the source of the supplemental payments for ACEs screenings to the state General Funds in accordance with the annual state budget process through Fiscal Year 2021-22.

### **SUMMARY OF PROPOSED CHANGES**

SPA 21-0045 proposes to eliminate the December 31, 2021, sunset date for supplemental payments to support developmental screenings and ACEs screenings. Screenings will continue to be billed and reimbursed in both the managed care and fee-for-service (FFS) delivery systems. These payments will continue to be in addition to the amounts paid for the office visit that accompanies the screening in FFS scenarios or capitation paid by Medi-Cal managed care plans.

The proposed effective date for SPA 21-0045 is January 1, 2022. The proposed SPA 21-0045 is subject to approval by the Centers for Medicare and Medicaid Services.

### **IMPACT TO TRIBAL HEALTH PROGRAMS**

Tribal Health Programs that have been providing developmental screenings and ACEs screenings may continue to see Medi-Cal beneficiaries accessing the services at the same levels as previously. Supplemental payments for developmental screenings and ACEs screenings will continue to be available as a FFS payment in addition to the Office of Management and Budget Indian Health Service per visit rate.<sup>3</sup>

### **IMPACT TO FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs)**

FQHCs that have been providing developmental screenings and ACEs screenings may continue to see Medi-Cal beneficiaries accessing the services at the same levels as previously. Supplemental payments for developmental screenings and ACEs screenings will continue to be available as a FFS payment in addition to the Prospective Payment Service per visit rate.<sup>3</sup>

### **IMPACT TO INDIAN MEDI-CAL BENEFICIARIES**

Medi-Cal beneficiaries will continue to have improved access to developmental screenings and ACEs screenings, and treatment for any condition discovered during the screening.

<sup>1</sup> [The California Healthcare, Research and Prevention Tobacco Act of 2016.](#)

<sup>2</sup> [Assembly Bill 128 \(Ting, Chapter 21, Statutes of 2021\).](#)

<sup>3</sup> For current guidance on billing for developmental and ACEs screenings please see [“Updated: Reminders for ACEs and Childhood Developmental Screening Billing”](#).



**RESPONSE DATE**

Indian Health Programs and Urban Indian Organizations may also submit written comments or questions concerning this proposal within 30 days from the receipt of notice. Comments may be sent by email to [Angeli.Lee@dhcs.ca.gov](mailto:Angeli.Lee@dhcs.ca.gov) or by mail to the address below:

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