

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



DATE: January 26, 2015

ALL PLAN LETTER 15-003

TO: ALL MEDI-CAL MANAGED CARE HEALTH PLANS

SUBJECT: PODIATRIC AND CHIROPRACTIC SERVICES AT FEDERALLY QUALIFIED HEALTH CENTERS AND RURAL HEALTH CLINICS

PURPOSE:

The purpose of this All Plan Letter (APL) is to provide information to Medi-Cal managed care health plans (MCPs) on podiatric and chiropractic services when these services are provided at Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs).

BACKGROUND:

As required by Assembly Bill X3 5 (Chapter 20, Statutes of 2009), effective July 1, 2009, the Department of Health Care Services (DHCS) discontinued optional Medi-Cal podiatric and chiropractic services, with certain exceptions.

The Medi-Cal Provider Manual at the link below lists requirements for coverage of podiatric and chiropractic services, including the exceptions to the 2009 elimination of these services:

http://files.medi-cal.ca.gov/pubsdoco/publications/mastersmtp/part2/optbenexc_a01a02a03a04a05a07a08i00o01o03o11m00l00p00v00.doc.

Pursuant to the Ninth United States Circuit Court of Appeals ruling in *California Rural Health Clinics v. Douglas*, in addition to the exclusion exceptions noted in the Medi-Cal Provider Manual, medically necessary podiatric and chiropractic services are reimbursable by Medi-Cal when provided to any Medi-Cal beneficiary in FQHC and RHC settings.

DHCS is currently updating the Medi-Cal Provider Manual to reflect the *California Rural Health Clinics v. Douglas* FQHC-RHC coverage requirements and other clarifications regarding coverage limits for podiatry and chiropractic services. The updated Podiatry and Optional Benefits Exclusion sections will be available in March 2015.

For a listing of applicable service codes and requirements for chiropractic services, please see the Medi-Cal Provider Manual link below: http://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/chiro_a03.doc.

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For a listing of applicable service codes and requirements for podiatry services, please see the Medi-Cal Provider Manual link below: http://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/podi_m01o03.doc.

An FQHC is an entity defined in Section 1905 of the Social Security Act (42 United States Code Section 1396d (I)(2)(B)) and an RHC is an entity defined in Title 22 California Code of Regulations Section 51115.5.

REQUIREMENT:

As of the date of this APL, MCPs shall cover Medi-Cal podiatric and chiropractic services when provided by FQHCs and RHCs.

Regarding covered podiatrist and chiropractic services provided by an FQHC-RHC, MCPs may restrict reimbursement of these services to contracted FQHC-RHC providers, except as required by current out-of-network provider services policies. This APL does not create:

- 1. Additional MCP responsibility or requirements for FQHC-RHC network adequacy and availability that is specific to podiatry and chiropractic services;
- 2. Requirements for MCPs to enter into new contracting relationships with FQHC-RHCs; or
- 3. Additional restrictions on MCP review and approval (utilization management) for FQHC-RHC services.

If you have any questions regarding this APL, please contact your DHCS contract manager.

Sincerely,

Original Signed by Sarah C. Brooks

Sarah Brooks, Chief Managed Care Quality and Monitoring Division Department of Health Care Services