

**DEPARTMENT OF HEALTH CARE SERVICES
NOTICE OF GENERAL PUBLIC INTEREST**

**PROPOSE A ONE-YEAR EXTENSION TO THE SUPPLEMENTAL PAYMENT
FOR CERTAIN PHYSICIAN SERVICES USING PROPOSITION 56 TOBACCO
TAX FUNDS
ALLOCATED FOR THE 2018-19 STATE FISCAL YEAR**

This notice provides information of public interest that the Department of Health Care Services (DHCS) will submit a State Plan Amendment (SPA) 18-0033 to revise and extend for another 12 months the time-limited supplemental payment program for certain physician services. These services are for new patient and established patient office/outpatient visits, psychiatric diagnostic evaluations, psychiatric diagnostic evaluation with medical services, and psychiatric pharmacological management services.

The Budget Act of 2018, once enacted, will appropriate a specified portion of the California Healthcare, Research and Prevention Tobacco Tax Act (commonly known as Prop. 56) revenue to DHCS for use as the nonfederal share of health care expenditures in accordance with the annual state budget process for the 2018-19 state fiscal year. As currently proposed, this includes funds to be allocated for supplemental payments to new patient and established patient office/outpatient visits, psychiatric diagnostic evaluations, psychiatric diagnostic evaluation with medical services, and psychiatric pharmacological management services. Submission of SPA 18-0033 is contingent upon allocation of Prop. 56 funds in the enacted 18-19 Budget for this purpose.

The supplemental payment amounts are fixed amounts to be paid per claim. The supplemental payments are for new and established patient office/outpatient visits, psychiatric diagnostic evaluations, psychiatric diagnostic evaluation with medical services, and psychiatric pharmacological management services as identified by the CPT codes below:

CPT Code		CPT Code	
99201	\$18.00	99381	\$77.00
99202	\$35.00	99382	\$80.00
99203	\$43.00	99383	\$77.00
99204	\$83.00	99384	\$83.00
99205	\$107.00	99385	\$30.00
99211	\$10.00	99391	\$75.00
99212	\$23.00	99392	\$79.00
99213	\$44.00	99393	\$72.00
99214	\$62.00	99394	\$72.00
99215	\$76.00	99395	\$27.00
90791	\$35.00	90863	\$5.00
90792	\$35.00		

DHCS projects the overall budgetary impact of the proposed supplemental payments for fee for service to result in an aggregate expenditure increase of \$173.98 million in total funds, including \$59.15 million in Prop. 56 funds.

The proposed effective date for SPA 18-0033 is July 1, 2018, with an end date of June 30, 2019. SPA 18-0033 is subject to approval by the federal Centers for Medicare and Medicaid Services (CMS).

DHCS will also seek federal approval to authorize corollary directed payments for certain physician services in Medi-Cal managed care using Prop. 56 funds allocated for this purpose in the 2018-19 state fiscal year. To the extent approved by CMS, these directed payments would be available for the physician services identified above when rendered by network providers of a Medi-Cal managed care plan.

Public Review and Comments

Upon submission to CMS, a copy of proposed SPA 18-0033 will be published at: http://www.dhcs.ca.gov/formsandpubs/laws/Pages/Pending_2018.aspx

If you would like to view the SPA in person once it becomes available, please visit your local county welfare department. You may also request a copy of the proposed SPA from the mailing address or e-mail address below.

Any written comments may be sent to: Department of Health Care Services, Fee-For-Service Rate Development Division, 1501 Capitol Avenue, MS 4600, Sacramento, California 95899-7417, or may be emailed to Publicinput@dhcs.ca.gov. Please indicate SPA 18-0033 in the subject line or message.

A copy of submitted public comments related to SPA 18-0033 may be requested in writing to the mailing address or e-mail inbox identified above.

Release date: June 29, 2018