Records / Submission Packages - Your State CA - Submission Package - CA2020MS00010 - (CA-20-0002) -Health Homes

Summary Reviewable Units Approval Letter

News Related Actions

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Medicaid & CHIP Operations Group 601 East 12th Street, Suite 0300 Kansas City, MO 64106-2898



# **Center for Medicaid & CHIP Services**

April 22, 2020

Jacey Cooper State Medicaid Director California Department of Health Care Services 1501 Capitol Avenue Sacramento, CA 95814

Re: Approval of State Plan Amendment CA-20-0002 California Health Homes Program Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED)

Dear Jacey Cooper:

On March 02, 2020, the Centers for Medicare and Medicaid Services (CMS) received California State Plan Amendment (SPA) CA-20-0002 for California Health Homes Program Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED) to add Orange County (Group 4) to the existing Health Home Program with the population criterion of Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED). Existing counties are: San Francisco (Group 1), Riverside and San Bernardino (both Group 2), and Alameda, Kern, Los Angeles, Imperial, Sacramento, San Diego, San Clara, and Tulare (all Gorup 3). Group 1 County of San Francisco implemented SMI or SED January 1, 2019. Group 2 counties of Riverside and San Bernardino implemented SMI or SED July 1, 2019. Group 3 counties of Alameda, Kern, Los Angeles, Imperial, Sacramento, San Diego, Santa Clara and Tulare implemented January 1, 2020. Group 4 County of Orange will implement July 1, 2020.

We approve California State Plan Amendment (SPA) CA-20-0002 on April 22, 2020 with an effective date(s) of July 01, 2020.

Please incorporate the amended language into your state plan.

In accordance with the statutory provisions at Section 1945(c)(1) of the Social Security Act, for payments made to health home providers under this amendment, during the first eight fiscal quarters that the SPA is in effect July 1, 2020 to June 30, 2022 for Orange County, the federal medical assistance percentage (FMAP) rate applicable to such payments shall be equal to 90 percent. The FMAP rate for payments made to Orange Countybased health home providers will return to the state's published FMAP on July 1, 2022. The Form CMS-64 has a designated category of service Line 43 for states to report health home services expenditures for enrollees with chronic conditions.

CMS' approval of SPA 20-0002 does not affect the 1115 state demonstration waiver amendment to waive freedom of choice, which allows the state to provide health home program services through the Medi-Cal managed care delivery system. The effective date of the 1115 state demonstration waiver amendment remains July 1, 2018. CMS approved the health home program claiming methodology on November 9, 2018 so the state may claim the portion of the managed care payments at the enhanced matching rate. CMS understands with the approval of this SPA -- along with the previously-approved companion Section 1115 demonstration amendment -- DHCS plans to develop prospective risk-based rates for the health home services provided under the managed care plans. CMS expects that the state will develop the overall capitation rates, including the health home program-related rates, on a timely basis, which will provide CMS an opportunity to review the rates prior to the rating period.

This SPA approval is based on the state's agreement to collect and report information required for the evaluation of the health home model. CMS encourages DHCS to report on the CMS-recommended core set of quality measures. For payments made to health homes providers for health homes participants who newly qualify based on the health homes program's increased geographical coverage under this amendment, a medical assistance percentage (FMAP) rate of 90% applies to such payments for the period 7/1/2020 to 6/30/2022.

For payments made to health homes providers for health home participants who newly qualify based on the health home program's increased geographical coverage under this amendment, a medical assistance percentage (FMAP) rate of 90% applies to such payments for the period 7/1/2020 to 6/30/2022.

The FMAP rate for payments made to health home providers will return to the state's published FMAP rate at the end of the enhanced match period. The Form CMS-64 has a designated category of service Line 43 for states to report health homes services expenditures for enrollees with chronic conditions.

Name		Date Created	
	No item	is available	
If you have any questions regarding th	is amendment, please contact Che	ryl Young at cheryl.young@cms.hhs.gc	ν.
			Sincerely,
			James G. Scott
			Director, Division of Program Operations Medicaid & CHIP Operations Group
			Center for Medicaid & CHIP Services

tecords / Submission Packages - Your State CA - Submission Package - CA2020MS0001O - (CA-20-0002) - Health Homes			
ummary Reviewable Units App	roval Letter News Related Actions		
CMS-10434 OMB 0938-1188			
Package Information			
Package ID	CA2020MS0001O	Submission Type	Official
Program Name	California Health Homes	State	CA
	Program Serious Mental Illness (SMI) or Serious Emotional	Region	San Francisco, CA
	Disturbance (SED)	Package Status	Approved
SPA ID	CA-20-0002	Submission Date	3/2/2020
Version Number	1	Approval Date	4/22/2020 8:59 AM EDT
Submitted By	Angeli Sus Lee		
Package Disposition			

Submission - Sur MEDICAID   Medicaid State Plan   Healt Emotional Disturbance (SED)	<b>nmary</b> h Homes   CA2020MS00010   CA-20-0002	2   California Health Homes Program Seri	ious Mental Illness (SMI) or Serious
Package Header			
Package ID	CA2020MS0001O	SPA ID	CA-20-0002
Submission Type	Official	Initial Submission Date	3/2/2020
Approval Date	4/22/2020	Effective Date	N/A
Superseded SPA ID	N/A		
State Information			
State/Territory Name:	California	Medicaid Agency Name:	California Department of Health Care Services
Submission Compone	nt		
<ul> <li>State Plan Amendment</li> </ul>		<ul> <li>Medicaid</li> </ul>	

○ CHIP

## Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | CA2020MS0001O | CA-20-0002 | California Health Homes Program Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED)

### **Package Header**

Package ID	CA2020MS0001O	SPA ID	CA-20-0002
Submission Type	Official	Initial Submission Date	3/2/2020
Approval Date	4/22/2020	Effective Date	N/A
	NI/A		

Superseded SPA ID N/A

#### **SPA ID and Effective Date**

**SPA ID** CA-20-0002

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Health Homes Intro	7/1/2020	CA-19-0013
Health Homes Geographic Limitations	7/1/2020	CA-19-0013

Submission - Summary			
MEDICAID   Medicaid State Plan   Health Emotional Disturbance (SED)	Homes   CA2020MS0001O   CA-20-0002   0	California Health Homes Program Seri	ious Mental Illness (SMI) or Serious
Package Header			
Package ID	CA2020MS0001O	SPA ID	CA-20-0002
Submission Type	Official	Initial Submission Date	3/2/2020
Approval Date	4/22/2020	Effective Date	N/A
Superseded SPA ID	N/A		
<b>Executive Summary</b>			
, , , , , , , , , , , , , , , , , , ,	This California Department of Health Ca Amendment (SPA) was for the Group 1 Mental Illness (SMI) or Serious Emotiona and San Bernardino were added in SPA Additional counties for Group 3 of Alam Clara and Tulare were added in SPA 19- County of Orange is being added in this HHP will utilize the Medi-Cal Managed C responsible for the overall administratic including MCP, one or more Community Specialty Mental Health Plans, Commun will operate in conjunction with, and is se Demonstration, including any approved HHP benefit to the MCMC Delivery Syste palliative care, strengthen community li members, and wrap increased care coo of care delivery as possible in the comm infrastructure and capacity to implement appropriately serve members experience behavioral health services. Group 1 Cou Group 2 counties of Riverside and San E of Alameda, Kern, Los Angeles, Imperial January 1, 2020. Group 4 County of Ora	County of San Francisco and the po- al Disturbance (SED). Additional cou- 19-0002 for the same population co- eda, Kern, Los Angeles, Imperial, Sa 0013 for the same population crite SPA 20-0002 for the same populat are (MCMC) infrastructure. Manag- on of the HHP. The HHP will be strue / Based Care Management Entities ity and Social Support Services. The subject to the terms of, the State's a waiver of freedom-of-choice that a em. The goals for HHP are: improve nkages and team- based care, impur- rdination around existing care as c unity. DHCS Objectives include: em th HHP as an entitlement benefit, e cing homelessness, and increase in inty of San Francisco implemented Bernardino implemented SMI or SE , Sacramento, San Diego, Santa Cla	population criterion of Serious unties for Group 2 of Riverside riterion of SMI or SED. acramento, San Diego, Santa rion of SMI or SED. Group 4 ion criterion of SMI or SED. The ed Care Plans (MCPs) will be ctured as a HHP network (CB-CMEs), linkages to Medi-Cal e HHP benefit authorized herein, approved Section 1115 enables the state to limit the e care coordination, integrate rove the health outcomes of HHP lose to the member's usual point usure sufficient provider nsure HHP providers tegration of physical & SMI or SED January 1, 2019. D July 1, 2019. Group 3 counties

# Federal Budget Impact and Statute/Regulation Citation

#### Federal Budget Impact

	Federal Fiscal Year	Amount
First	2020	\$123276
Second	2021	\$2958632

#### Federal Statute / Regulation Citation

Section 2703 of the Patient Protection and Affordable Care Act

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created	
CA SPA 20-0002 Fed Budget Impact Note	2/27/2020 2:45 PM EST	POP

# Submission - Summary

MEDICAID | Medicaid State Plan | Health Homes | CA2020MS00010 | CA-20-0002 | California Health Homes Program Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED)

### **Package Header**

Package ID	CA2020MS0001O	SPA ID	CA-20-0002
Submission Type	Official	Initial Submission Date	3/2/2020
Approval Date	4/22/2020	Effective Date	N/A
Superseded SPA ID	N/A		
Governor's Office Review			

○ No comment

 $\bigcirc$  Comments received

 $\bigcirc$  No response within 45 days

Other

**Describe** The Governor's Office does not wish to review the SPA.



Health Homes Services	APPROVED	
Health Homes Monitoring, Quality Measurement and Evaluation	APPROVED	
		<b>1 - 8</b> of 8

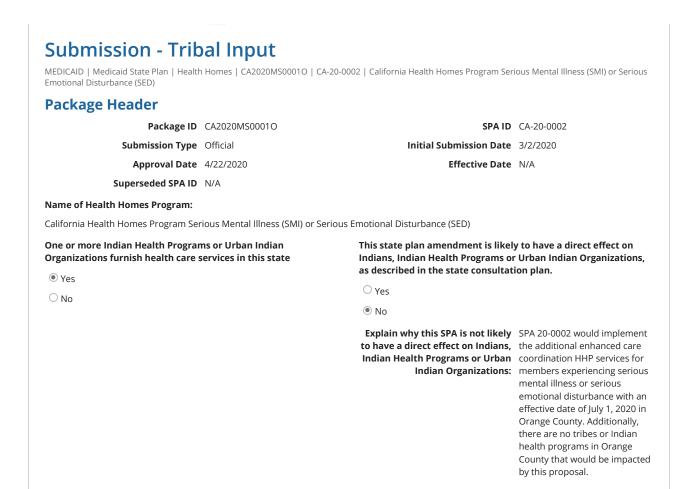
# Submission - Public CommentMEDICAID | Medicaid State Plan | Health Homes | CA2020MS00010 | CA-20-0002 | California Health Homes Program Serious Kental Illness (SMI) or Serious<br/>Emotional Disturbance (SED)Package HeaderSPAIDCA-20-0002Package IDCA2020MS00010SPA IDSubmission TypeOfficialInitial Submission DateApproval Date4/22/2020Effective DateSuperseded SPA IDN/A

Indicate whether public comment was solicited with respect to this submission.

 ${old one}$  Public notice was not federally required and comment was not solicited

 $\bigcirc$  Public notice was not federally required, but comment was solicited

 $\bigcirc$  Public notice was federally required and comment was solicited



# **Submission - Other Comment**

MEDICAID | Medicaid State Plan | Health Homes | CA2020MS0001O | CA-20-0002 | California Health Homes Program Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED)

# **Package Header**

Package ID CA2020MS00010

Submission Type Official

Approval Date 4/22/2020

Superseded SPA ID N/A

# **SAMHSA Consultation**

#### Name of Health Homes Program

California Health Homes Program Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED)

☑ The State provides assurance that it has consulted and coordinated with the Substance Abuse and Mental Health Services Administration (SAMHSA) in addressing issues regarding the prevention and treatment of mental illness and substance abuse among eligible individuals with chronic conditions.

**SPA ID** CA-20-0002

Initial Submission Date 3/2/2020 Effective Date N/A

Date of consultation

6/13/2018

# Health Homes Intro

MEDICAID | Medicaid State Plan | Health Homes | CA2020MS0001O | CA-20-0002 | California Health Homes Program Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED)

Package	Header
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Package ID	CA2020MS0001O
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Submission Type Official

**Approval Date** 4/22/2020

Superseded SPA ID CA-19-0013

System-Derived

SPA ID CA-20-0002
Initial Submission Date 3/2/2020

Effective Date 7/1/2020

## **Program Authority**

1945 of the Social Security Act

The state elects to implement the Health Homes state plan option under Section 1945 of the Social Security Act.

#### Name of Health Homes Program

California Health Homes Program Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED)

### **Executive Summary**

# Provide an executive summary of this Health Homes program including the goals and objectives of the program, the population, providers, services and service delivery model used

This California Department of Health Care Services' (DHCS) first Health Homes Program (HHP) State Plan Amendment (SPA) was for the Group 1 County of San Francisco and the population criterion of SMI or SED. Additional counties for Group 2 of Riverside and San Bernardino were added in SPA 19-0002 for the same population criterion of SMI or SED. Additional counties for Group 3 of Alameda, Kern, Los Angeles, Imperial, Sacramento, San Diego, Santa Clara and Tulare were added in SPA 19-0013 for the same population criterion of SMI or SED. Group 4 County of Orange is being added in this SPA 20-0002 for the same population criterion of SMI or SED. The HHP will utilize the Medi-Cal Managed Care (MCMC) infrastructure. Managed Care Plans (MCPs) will be responsible for the overall administration of the HHP. The HHP will be structured as a HHP network including MCP, one or more Community Based Care Management Entities (CB-CMEs), linkages to Medi-Cal Specialty Mental Health Plans, Community and Social Support Services. The HHP benefit authorized herein, will operate in conjunction with, and is subject to the terms of, the State's approved Section 1115 Demonstration, including any approved waiver of freedom-of-choice that enables the state to limit the HHP benefit to the MCMC Delivery System. The goals for HHP are: improve care coordination, integrate palliative care, strengthen community linkages and team- based care, improve the health outcomes of HHP members, and wrap increased care coordination around existing care as close to the member's usual point of care delivery as possible in the community. DHCS Objectives include: ensure sufficient provider infrastructure and capacity to implement HHP as an entitlement benefit, ensure HHP providers appropriately serve members experiencing homelessness, and increase integration of physical & behavioral health services. Group 1 County of San Francisco implemented SMI or SED January 1, 2019. Group 2 counties of Riverside and San Bernardino implemented SMI or SED July 1, 2019. Group 3 counties of Alameda, Kern, Los Angeles, Imperial, Sacramento, San Diego, Santa Clara and Tulare implemented January 1, 2020. Group 4 County of Orange will implement July 1, 2020.

## **General Assurances**

☑ The state provides assurance that eligible individuals will be given a free choice of Health Homes providers.

C The states provides assurance that it will not prevent individuals who are dually eligible for Medicare and Medicaid from receiving Health Homes services.

The state provides assurance that hospitals participating under the state plan or a waiver of such plan will be instructed to establish procedures for referring eligible individuals with chronic conditions who seek or need treatment in a hospital emergency department to designated Health Homes providers.

Z The state provides assurance that FMAP for Health Homes services shall be 90% for the first eight fiscal quarters from the effective date of the SPA. After the first eight quarters, expenditures will be claimed at the regular matching rate.

☑ The state provides assurance that it will have the systems in place so that only one 8-quarter period of enhanced FMAP for each health homes enrollee will be claimed.

C The state provides assurance that there will be no duplication of services and payment for similar services provided under other Medicaid authorities.

#### **Health Homes Geographic Limitations** MEDICAID | Medicaid State Plan | Health Homes | CA2020MS00010 | CA-20-0002 | California Health Homes Program Serious Mental Illness (SMI) or Serious Emotional Disturbance (SED) **Package Header** Package ID CA2020MS0001O SPA ID CA-20-0002 Submission Type Official Initial Submission Date 3/2/2020 Approval Date 4/22/2020 Effective Date 7/1/2020 Superseded SPA ID CA-19-0013 System-Derived Specify the geographic limitations of the program O Health Homes services will be available statewide O By county • Health Homes services will be limited to the following geographic areas ○ By region $\bigcirc$ Health Homes services will be provided in a geographic phased-in O By city/municipality approach Other geographic area Describe the area(s): By County: San Francisco 1/1/2019 Riverside 7/1/2019

Riverside 7/1/2019 San Bernardino 7/1/2019 Alameda 1/1/20 Kern 1/1/20 Los Angeles 1/1/20 Imperial 1/1/20 Sacramento 1/1/20 San Diego 1/1/20 Santa Clara 1/1/20 Tulare 1/1/20 Orange 7/1/20 PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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