



MICHELLE BAASS
DIRECTOR

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



GAVIN NEWSOM
GOVERNOR

April 12, 2022

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 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,
and Urban Indian Organizations

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Please note that Indian Health Programs and Urban Indian Organizations may request a consultation on this proposal at any time as needed.

Sincerely,

Original Signed by

Andrea Zubiato, Acting Chief
Office of Tribal Affairs
Department of Health Care Services

Enclosure



Department of Health Care Services Tribal and Designees of Indian Health Programs Notice

PURPOSE

To seek the necessary federal approvals to add asthma preventive services as a covered Medi-Cal benefit.

BACKGROUND

DHCS proposes to add asthma preventive services to the California Medicaid (Medi-Cal) State Plan. Asthma preventive services deter disease progression, prolong life, and promote physical health. These services include education and assessing homes for asthma triggers. Asthma preventive services may be provided by unlicensed asthma preventive service providers, which may include community health workers, promotores, and other unlicensed persons who meet the qualifications of an asthma preventive service provider.

SUMMARY OF PROPOSED CHANGES

DHCS is seeking to add asthma preventive services as a covered Medi-Cal benefit under the State Plan as a part of its commitment to improve quality of life and health outcomes. Unlicensed asthma preventive service providers would be under the supervision of a licensed, enrolled Medi-Cal provider, clinic, hospital, local health jurisdictions, or community-based organization. These services would be available under both the fee-for-service and managed care delivery systems.

The proposed effective date for the State Plan Amendment (SPA) 22-0003 is July 1, 2022. SPA 22-0003 is subject to approval by the federal Centers for Medicare and Medicaid Services.

IMPACT TO TRIBAL HEALTH PROGRAMS

A Tribal clinic may use asthma preventive service providers, but they are not considered Memorandum of Agreement 638 clinic providers. Therefore, asthma preventive services will not be considered billable encounters and will not be eligible for reimbursement at the federal All-Inclusive Rate (AIR). The federal AIR includes costs for services delivered by the clinic, which may include services provided by asthma preventive service providers at the clinic's discretion.

IMPACT TO FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs)

A FQHC may use unlicensed asthma preventive service providers; however, they are not considered FQHC billable providers. Therefore, asthma education and home assessments for asthma triggers will not be considered billable encounters and will not be eligible for Prospective Payment System (PPS) rate reimbursement. Some FQHCs may have costs related to asthma preventive education or unlicensed asthma prevention services providers included in their PPS rate. FQHCs that choose to add asthma preventive services by unlicensed providers for clinic patients may qualify for a Change in Scope of Services Request (CSOSR) under Welfare Institutions Code Section 14132.100 (e)(3)(B) if they meet specific criteria as required in the statute.

IMPACT TO INDIAN MEDI-CAL BENEFICIARIES

Medi-Cal beneficiaries may have increased access to these benefits, which is expected to improve health outcomes.

RESPONSE DATE

Indian Health Programs and Urban Indian Organizations may 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 or by mail to the address below:

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