



MICHELLE BAASS
DIRECTOR

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



GAVIN NEWSOM
GOVERNOR

May 18, 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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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 request a consultation on this proposal at any time as needed.

Sincerely,

Original Signed By

Andrea Zubiate, 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 community health worker (CHW) services, asthma preventive services, and routine patient costs associated with participation in qualifying clinical trials as Medi-Cal covered benefits in the Alternative Benefit Plan (ABP) and as covered services under the Medi-Cal program.

BACKGROUND

DHCS submitted State Plan Amendment (SPA) 22-0001 for services by community health workers to the Centers for Medicare and Medicaid Services on April 29, 2022. The Department will submit SPA 22-0003 to add asthma preventive services by June 30, 2022. CHW services are provided by skilled and trained individuals who work directly with beneficiaries who may have difficulty understanding or interacting with providers due to cultural and/or language barriers. Asthma preventive services include education and assessing homes for asthma triggers. Asthma preventive services may be provided by unlicensed asthma preventive service providers as well as licensed providers.

In addition, DHCS will submit SPA 22-0017 by June 30, 2022, to add routine patient costs for a beneficiary participating in a qualifying clinical trial. Qualifying clinical trials are defined in federal law.¹ This includes any item or service covered under the State Plan or a waiver provided to prevent, diagnose, monitor, or treat complications resulting from participation in the qualifying clinical trial.

SUMMARY OF PROPOSED CHANGES

SPA 22-0019 updates the ABP to align coverage with corresponding changes made to the State Plan by proposed SPAs 22-0001, 22-0003, and 22-0017.

The proposed effective date for SPA 22-0019 is July 1, 2022. SPA 22-0019 is subject to approval by CMS.

IMPACT TO TRIBAL HEALTH PROGRAMS

A tribal clinic may use CHWs and unlicensed asthma preventive service providers to render services, but they are not considered Memorandum of Agreement 638 clinic providers. Therefore, services by CHWs and unlicensed asthma preventive providers 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 CHWs and asthma preventive services providers at the clinic's discretion. Asthma preventive services rendered by licensed providers will be reimbursed at the AIR.

To the extent that Tribal Health Programs provide services for Medi-Cal beneficiaries who are participating in a clinical trial, those beneficiaries may access services more frequently.

IMPACT TO FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs)

An FQHC may use CHWs and unlicensed asthma preventive service providers; however, they are not considered FQHC billable providers. Therefore, these services will not be considered billable encounters and will not be eligible for Prospective Payment System

¹ [Section 1905\(gg\)\(2\) of the Social Security Act.](#)

(PPS) rate reimbursement. Some FQHCs may have some costs for CHW services built into their PPS rate. FQHCs that choose to add CHW or asthma preventive services for clinic patients may qualify for a Change in Scope of Services Request (CSOSR) under Welfare and Institutions Code Section 14132.100 (e)(3)(B) if they meet specific criteria as required in the statute. Please note, asthma preventive services rendered by licensed providers will be reimbursed at the PPS rate.

To the extent that FQHCs provide services for Medi-Cal beneficiaries who are participating in a clinical trial, those beneficiaries may access services more frequently.

IMPACT TO INDIAN MEDI-CAL BENEFICIARIES

Medi-Cal beneficiaries may have increased access to CHW and asthma preventive services, which are expected to improve health outcomes for beneficiaries receiving these services.

Medi-Cal beneficiaries participating in a clinical trial may also 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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