

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
90 Seventh Street, Suite 5-300 (5W)  
San Francisco, CA 94103-6706



## Regional Operations Group

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June 10, 2019

Mari Cantwell  
Chief Deputy Director, Health Care Programs  
California Department of Health Care Services  
P.O. Box 997413, MS 0000  
Sacramento, CA 95899-7413

Dear Ms. Cantwell:

Enclosed is an approved copy of California State Plan Amendment (SPA) 19-0007, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on March 28, 2019. SPA 19-0007 adds licensed professional clinical counselors and associate professional clinical counselors as providers of Medi-Cal psychology services. SPA 19-0007 also updates the title of marriage and family therapist intern to associate marriage and family therapist in order to be consistent with the Board of Behavioral Sciences implementation of this change in title, as required by California Senate Bill 1478 (Leyva, Chapter 489, Statutes of 2016).

The effective date of this SPA is January 1, 2019. Enclosed are the following approved SPA pages that should be incorporated into your approved state plan:

- Limitations to Attachment 3.1-A, page 11a
- Limitations to Attachment 3.1-B, page 11a
- Supplement 6 to Attachment 4.19-B, page 2

If you have any questions, please contact Cheryl Young at 415-744-3568 or via email at [Cheryl.Young@cms.hhs.gov](mailto:Cheryl.Young@cms.hhs.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Richard C. Allen", is enclosed in a thin black rectangular box.

Richard C. Allen  
Director  
Centers for Medicaid and CHIP Services  
Regional Operations Group

Enclosures

Page 2 – Mari Cantwell, Chief Deputy Director

cc: Rene Mollow, DHCS  
Cynthia Smiley, DHCS  
Jim Elliott, DHCS  
Raquel Sanchez, DHCS  
Angeli Lee, DHCS  
Amanda Font, DHCS

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER  
1 9 - 0 0 0 7

2. STATE  
California

3. PROGRAM IDENTIFICATION:  
Title XIX of the Social Security Act (Medicaid)

4. PROPOSED EFFECTIVE DATE  
January 1, 2019

TO: REGIONAL ADMINISTRATOR  
CENTERS FOR MEDICARE & MEDICAID SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (Check One)  
 NEW STATE PLAN       AMENDMENT TO BE CONSIDERED AS NEW PLAN       AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION  
SSA 1905 (a)(6), 42 CFR 440.60 & 42 CFR 447, Subpart F


7. FEDERAL BUDGET IMPACT  
a. FFY 2019 \$ 0  
b. FFY 2020 \$ 0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  
Limitations on Attachment 3.1-A, page 11a  
Limitations on Attachment 3.1-B, page 11a  
Supplement 6 to Attachment 4.19-B, page 2

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  
Limitations on Attachment 3.1-A, page 11a  
Limitations on Attachment 3.1-B, page 11a  
Supplement 6 to Attachment 4.19-B, page 2

10. SUBJECT OF AMENDMENT  
Adding licensed professional clinical counselors and associate professional clinical counselors to the list of providers who can provide psychology services. Updating the title of marriage and family therapist intern to ~~associate marriage and family therapist to be consistent with the Board of Behavioral Sciences~~

11. GOVERNOR'S REVIEW (Check One)  
 GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL  
  
Mari Cantwell  
14. TITLE  
State Medicaid Director  
15. DATE SUBMITTED  
March 28, 2019

16. RETURN TO  
Department of Health Care Services  
Attn: Director's Office  
P.O. Box 997413, MS 0000  
Sacramento, CA 95899-7413

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED  
March 28, 2019

18. DATE APPROVED  
June 10, 2019

**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL  
January 1, 2019

20. SIGNATURE OF REGIONAL OFFICIAL  


21. TYPED NAME  
Richard C. Allen

22. TITLE  
Director, Centers for Medicaid & CHIP Services,  
Regional Operations Group

23. REMARKS

For Box 11 "Other, As Specified," Please note: The Governor's Office does not wish to review the State Plan Amendment.

Box 6: CA approved CMS pen and ink change in informal responses send on 5/15/19.

Box 8 & 9: CA approved via email dated 5/31/19 CMS pen and ink change to add page number .

TYPE OF SERVICE	PROGRAM COVERAGE**	PRIOR AUTHORIZATION OR OTHER REQUIREMENTS*
6d.1 Psychology	<p>Services of the following licensed and unlicensed practitioners may be furnished within their scope of practice in accordance with California state law. The licensed practitioners supervise and assume the professional liability of services furnished by the corresponding unlicensed practitioners.</p> <p>Licensed mental health practitioners</p> <ul style="list-style-type: none"> <li>• Services of a Licensed Psychologist</li> <li>• Services of a Licensed Clinical Social Worker</li> <li>• Services of a Licensed Marriage and Family Therapist</li> <li>• Services of a Licensed Professional Clinical Counselor</li> </ul> <p>Unlicensed mental health practitioners</p> <ul style="list-style-type: none"> <li>○ Services of a Psychological Assistant</li> <li>○ Services of an Associate Clinical Social Worker</li> <li>○ Services of an Associate Marriage and Family Therapist</li> <li>○ Services of an Associate Professional Clinical Counselor</li> </ul>	Prior authorization is not required.

\*Prior authorization is not required for emergency services.

\*\*Coverage is limited to medically necessary services.

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\*Prior authorization is not required for emergency services.

\*\*Coverage is limited to medically necessary services.

REIMBURSEMENT FOR INDIAN HEALTH SERVICES  
AND TRIBAL 638 HEALTH FACILITIES

- A. Below is a list of health professionals that may bill under the IHS all-inclusive rate:
- Physician
  - Physician Assistant
  - Nurse Practitioner
  - Nurse Midwife
  - Registered Dental Hygienists
  - Registered Dental Hygienists in Extended Functions
  - Registered Dental Hygienists in Alternative Practice
  - Clinical Psychologist
  - Clinical Social Worker
  - Marriage and Family Therapist
  - Licensed Professional Clinical Counselor
  - Acupuncturist
  - Visiting Nurse if services are provided in the Tribal facilities
  - Under the Early and Periodic Screening, Diagnostic, and Treatment benefit (EPSDT), the services of Licensed Marriage, Family and Child Counselors are available as 'other health visit' to persons under 21 years of age, as a result of an EPSDT screening which identifies the need for a service which is necessary to correct or ameliorate a mental illness or condition.
- B. Comprehensive Perinatal Service Program providers who are licensed and/or certified practitioners who are able to render covered services in accordance with their scope of practice as identified in California statute. A September 17, 1985 HCFA letter allows these services as a physician or clinic service.
- C. In addition, below is a list of associates and interns that may provide Medi-Cal psychology services.
- Associate Marriage and Family Therapists
  - Associate Professional Clinical Counselors
  - Associate Clinical Social Workers
  - Psychological Assistants

Associates and assistants must be under the supervision of a licensed mental health professional, in accordance with their scope of practice and applicable state laws.

- D. Except for the services specified under Item E below, the following other ambulatory services, but not limited to, provided by health professionals can be billed under the IHS all-inclusive rate.
- Acupuncture
  - Medical and surgical services provided by a doctor of dental medicine or dental surgery, which if provided by a physician would be considered physician services
  - Physical Therapy
  - Occupational Therapy
  - Drug and Alcohol visits (Subject to Medi-Cal provider participation requirements)
  - Telemedicine and teledentistry (No additional live transmission costs will be reimbursed)
  - Optometry (Eyeglasses and other eye appliances are restricted to beneficiaries identified under Item E below)