



May 23, 2024

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 [PublicInput@dhcs.ca.gov](mailto:PublicInput@dhcs.ca.gov) or by mail to the address below:

### **Contact Information**

Department of Health Care Services  
Director's Office  
1500 Capitol Avenue, MS 0000  
Sacramento, CA 95814



Tribal Chairpersons, Designees of Indian Health Programs,  
and Urban Indian Organizations

Page 2

May 23, 2024

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 Stephanie Hockman for

Andrea Zubiate, Chief  
Office of Tribal Affairs  
Department of Health Care Services

Enclosure



## **Department of Health Care Services (DHCS) Tribal and Designees of Indian Health Programs Notice**

### **PURPOSE**

To seek federal approval to make changes to the Rehabilitative Mental Health Services, Targeted Case Management, Substance Use Disorder Treatment Services, Expanded Substance Use Disorder Treatment Services, and Medication-Assisted Treatment Clinical Trainee provider type definition. The Clinical Trainee provider type provides services in the Specialty Mental Health Services (SMHS), Drug Medi-Cal (DMC), and Drug Medi-Cal-Organized Delivery System (DMC-ODS) programs.

### **BACKGROUND**

As part of DHCS' California Advancing and Innovating Medi-Cal (CalAIM) initiative, DHCS is implementing the Behavioral Health Administrative Integration project. This project aims to facilitate greater access to services, improve quality of services, and provide a more integrated care experience for beneficiaries with co-occurring mental health and substance use disorder conditions. State Plan Amendment (SPA) 23-0026 made changes to the types and qualifications of providers that can provide SMHS, DMC, and DMC-ODS services in order to achieve greater consistency and allow more providers to offer behavioral health care across these delivery systems. SPA 23-0026 added "Clinical Trainees" as a provider type. SPA 24-0041 is proposing additional, technical changes to the definition of Clinical Trainees.

### **SUMMARY OF PROPOSED CHANGES**

SPA 24-0041 proposes the following changes:

- Update the definition of Clinical Trainee to add Registered Pharmacist so they may provide specified SMHS;
- Update the definition of Clinical Trainee to add Physician Assistant so they may provide specified SMHS; and,
- Update the definition of Clinical Trainee to remove "in the State of California" language as applicable to SMHS, DMC and DMC-ODS services.

The proposed effective date for SPA 24-0041 is April 1, 2024.

### **IMPACT TO TRIBAL HEALTH PROGRAMS (THPs)**

To the extent that a THP provides SMHS, DMC and/or DMC-ODS and are enrolled/certified SMHS, DMC and/or DMC-ODS providers, this proposed SPA may impact the provision of covered services. Under this proposal, THPs will be able to utilize Clinical Trainees in the provision of SMHS, DMC, and/or DMC-ODS services to Medi-Cal members as outlined in Behavioral Health Information Notices (BHIN) [22-020](#), [22-053](#), and [23-027](#). Please note that this SPA does not propose the addition of new billable providers to [Supplement 6, Attachment 4.19b](#) of the state plan.

### **IMPACT TO FEDERALLY QUALIFIED HEALTH CENTERS (FQHCs)**

To the extent that a Federally Qualified Health Center is contracted and certified to provide SMHS, DMC and/or DMC-ODS services, this proposed SPA may impact the provision of covered services. Under this proposal, FQHCs will be able to utilize Clinical Trainees in the provision of SMHS, DMC and/or DMC-ODS services to Medi-Cal members as outlined in BHINs [22-020](#), [22-053](#), and [23-027](#). Please note FQHCs are required to carve-out SMHS (including Targeted Case Management), DMC-ODS and DMC services from their Prospective

Payment Systems (PPS) rate per Welfare and Institutions Code 14132.100(l) and (m). Further, this SPA does not propose the addition of new billable FQHC providers to [Section 4.19b, Limitations on Attachment 3.1-A or Limitations on Attachment 3.1-B of the state plan.](#)

### **IMPACT TO AMERICAN INDIAN MEDI-CAL MEMBERS**

DHCS anticipates this proposed SPA will increase access to SMHS, DMC and/or DMC ODS services for American Indian Medi-Cal members as it will allow additional Clinical Trainees to provide behavioral health care across these delivery systems. This will likely have a positive impact on the health outcomes of American Indian Medi-Cal members who receive the services.

### **RESPONSE DATE**

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 [PublicInput@dhcs.ca.gov](mailto:PublicInput@dhcs.ca.gov) or by mail to the address below:

### **CONTACT INFORMATION**

Department of Health Care Services  
Director's Office  
1500 Capitol Avenue, MS 0000  
Sacramento, CA 95814