

## PROPOSED STATE PLAN AMENDMENT TO ESTABLISH REIMBURSEMENT RATES FOR BEHAVIORAL HEALTH TREATMENT SERVICES

This notice is to provide information of public interest about a proposed State Plan Amendment (SPA) by the California Department of Health Care Services (DHCS). The proposed SPA #25-0028 is seeking federal authority to establish Medi-Cal Fee-For-Service (FFS) Fee Schedule rates for Behavioral Health Treatment (BHT) services effective for dates of service on or after July 1, 2025.

Historically, most Medi-Cal members under age 21 enrolled in Medi-Cal FFS received BHT services from their local Regional Centers, which were paid for by DHCS through an interagency agreement with the Department of Developmental Services (DDS). Effective July 1, 2025, Medi-Cal members under age 21 enrolled in Medi-Cal FFS will have the option to receive BHT services from enrolled Medi-Cal Qualified Autism Service (QAS) providers in addition to their local Regional Centers, expanding access to care for this vulnerable population. Enrolled Medi-Cal QAS providers will bill DHCS directly for BHT services provided to Medi-Cal members under age 21 enrolled in Medi-Cal FFS.

In accordance with California Welfare and Institutions Code (WIC) section 14105.05 and the California Medicaid State Plan (Page 1a of Attachment 4.19-B), DHCS will establish Medi-Cal FFS reimbursement rates for BHT services based on an evaluation of several data sources potentially including, but not limited to:

- Medi-Cal Managed Care Plan rates
- DDS rates
- Medicare rates for similar services
- Bureau of Labor Statistics salary data
- Other appropriate data sources and public input

DHCS will establish reimbursement rates for the relevant BHT service procedure codes listed on the next page.

<b>Procedure Code</b>	<b>Description</b>
97151	Behavior identification assessment, administered by a physician or other qualified health care professional, each 15 minutes
97152	Observational behavioral follow-up assessment, includes physician or other qualified provider direction with interpretation and report, administered by one technician.
97153	Adaptive behavior treatment by protocol, administered by technician, face-to-face with one patient
97154	Group adaptive behavior treatment by protocol, administered by technician, face-to-face with two or more patients.
97155	Adaptive behavior treatment with protocol modification, administered by physician or other qualified healthcare provider with one patient.
97156	Family adaptive behavior treatment guidance, administered by physician or other qualified healthcare provider (with or without the patient present).
97157	Multiple-family group adaptive behavior treatment guidance, administered by physician or other qualified healthcare provider (without the patient present).
97158	Adaptive behavior treatment social skills group, administered by physician or other qualified healthcare provider, face-to-face with multiple patients.
99366	Under medical team conference, direct (face-to-face) contact with patient and/or family.
99368	Under medical team conference, without direct (face-to-face) contact with patient and/or family (non-physician qualified health professional)
H2012	Behavioral health day treatment, per hour
H2014	Skills training and development, per 15 minutes
H2019	Therapeutic behavioral services, per 15 minutes
H0031	Mental health assessment, by non-physician
H0032	Mental health service plan development by non-physician
S5110	Home care training, family; per 15 minutes.
S5111	Home care training, family; per session.

The annual aggregate Medi-Cal expenditures as a result of this SPA will be budget neutral as Medi-Cal FFS members are currently eligible to receive BHT services through an interagency agreement with DDS.

The effective date of the proposed SPA #25-0028 is July 1, 2025. All proposed SPAs are subject to approval by CMS.

## Public Review and Comments

Upon submission to CMS, a copy of proposed SPA #25-0028 will be published at <https://www.dhcs.ca.gov/formsandpubs/laws/Pages/Pending-2025.aspx>

If you would like to view the SPA in person once it becomes available, please visit your local county welfare department. You may also request a copy of proposed SPA #25-0028 or a copy of submitted public comments related to SPA #25-0028 by requesting it in writing to the mailing or email address listed below. Please indicate SPA #25-0028 in the subject line or message.

Written comments may be sent to the following address:

Department of Health Care Services  
Fee-for-Service Rates Development Division  
Attn: Aditya Voleti, SPA #25-0028  
P.O. Box 997413, MS 46600  
Sacramento, California 95899-7417

Comments may also be emailed to [PublicInput@dhcs.ca.gov](mailto:PublicInput@dhcs.ca.gov). Please indicate SPA #25-0028 in the subject line or message.

To ensure consideration prior to submission of the SPA to CMS, comments must be received no later than July 24, 2025. Please note that comments will continue to be accepted after July 24 2025, but DHCS may not be able to consider those comments prior to the initial submission of SPA #25-0028 to CMS.