



# NOTICE OF GENERAL PUBLIC INTEREST

RELEASE DATE: MARCH 27, 2026

## **ADDENDUM TO PROPOSED STATE PLAN AMENDMENT TO CONTINUE SUPPLEMENTAL PAYMENTS FOR EMERGENCY DEPARTMENT (ED) PHYSICIAN EVALUATION & MANAGEMENT (E&M) SERVICES**

This is an addendum to the Public Notice for proposed State Plan Amendment (SPA) 26-0007, originally published on December 30, 2025.

May it be known that the following changes have been made to the original Public Notice and updated on the SPA pages attached:

- The effective date period for SPA 26-0007 is revised to January 1, 2026, through December 31, 2026.
- Current Procedural Terminology (CPT) code 99283 will be removed from the list of codes receiving a supplemental payment.
- The Supplemental Payment Amounts will be updated to \$2.69 for CPT code 99282, \$28.53 for 99284, and \$41.29 for 99285.
- Eligible services will be updated to include only those provided in non-academic medical centers (non-AMCs).

The effective date of the proposed SPA 26-0007 remains January 1, 2026. All proposed SPAs are subject to approval by the Centers for Medicare and Medicaid Services (CMS).



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
STATE: CALIFORNIA

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**TIME-LIMITED SUPPLEMENTAL PAYMENT PROGRAM FOR EMERGENCY  
DEPARTMENT PHYSICIAN EVALUATION & MANAGEMENT SERVICES IN A NON-  
ACADEMIC MEDICAL CENTER**

1. Program Overview
  - a. This program provides supplemental reimbursement for eligible Emergency Department (ED) physician Evaluation and Management (E&M) services provided in non-academic medical centers (non-AMCs) to Medi-Cal beneficiaries. Supplemental reimbursements are provided in addition to the base rates for qualified ED physician E&M services. The base rates for these services remain unchanged and are published on the Medi-Cal Rates website.
  
2. Supplemental Reimbursement Methodology – General Provisions for Services Provided Between January 1, 2026 – December 31, 2026
  - a. Supplemental Payment Amounts  
The supplemental payment amounts are fixed at the amounts listed in the chart below for each eligible ED physician E&M service listed by Current Procedural Terminology (CPT) Code. The supplemental payment is paid on a per claim basis.

<b>CPT Code</b>	<b>Supplemental Payment</b>
99282	\$ 2.69
99284	\$ 28.53
99285	\$ 41.29

3. Eligible Providers
  - a. ED physician E&M services rendered by a physician in a non-AMC who bills for the CPT codes listed above using the Health Insurance Claim Form (CMS-1500) are eligible for the supplemental payment established pursuant to this Supplement. A non-AMC means a facility that does not qualify as an AMC as defined under Title 42 of the Code of Federal Regulations (CFR) Section 438.6, meaning a non-AMC is a

- facility that does not include a health professional school with an affiliated teaching hospital.
- b. Providers eligible for the supplemental payment amounts under this Supplement do not include Federally Qualified Health Centers (FQHCs), Rural Health Centers (RHCs), or other providers that are reimbursed through an all-inclusive rate or a cost-based system.
  - c. Providers eligible for the supplemental payment amounts under this Supplement do not include providers rendering services in an academic medical center (AMC).
4. Base rates for ED physician E&M services are the rates established by the Department of Health Care Services for each CPT Code, as published on the Medi-Cal Rates website: <https://mcweb.apps.prd.cammis.medi-cal.ca.gov/rates>.