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State/Territory Name: California

State Plan Amendment (SPA) #: 21-0022

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 601 E. 12th St., Room 355 Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

February 11, 2022

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

Dear Ms. Cooper:

Enclosed is an approved copy of California State Plan Amendment (SPA) 21-0022, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on May 20, 2021. This SPA will add Kern and Sacramento Counties to the list of geographic areas offering Targeted Case Management (TCM) services for the "Children Under the Age of 21" TCM group.

The effective date of this SPA is July 1, 2021. Enclosed is the following approved SPA page that should be incorporated into your approved State Plan:

• Supplement 1a to Attachment 3.1-A, page 1

If you have any questions, please contact Cheryl Young at 415-744-3598 or via email at Cheryl Young@cms.hhs.gov.



Enclosure

cc: Saralyn Olson, Department of Health Care Services (DHCS)
Gillian Mongetta, DHCS
Regina Zerne, DHCS
Sara Schmid, DHCS
Angeli Lee, DHCS
Amanda Font, DHCS

CENTERS FOR MEDICARE & MEDICARD SERVICES		OND 110: 0000 0100	
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER	2. STATE	
	<u>2 1 — 0 0 22</u>	California	
	3. PROGRAM IDENTIFICATION:		
	Title XIX of the Social Security Act (Medicaid)		
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE		
CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	July 1, 2021		
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	7. FEDERAL BUDGET IMPACT	7. FEDERAL BUDGET IMPACT a. FFY 2021 \$ 432,000	
42 U.S.C. § 1396n(g)(1); 42 C.F.R. § 440.169(b)	b. FFY 2022 \$ 1,728,000		
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSE OR ATTACHMENT (If Applicable)	DED PLAN SECTION	
Supplement 1a To Attachment 3.1-A Page 1	Supplement 1a To Attachmen	nt 3.1-A Page 1	
10. SUBJECT OF AMENDMENT			
Targeted Case Management Services - Children under the Age of 21			
rangeted daes management dervises. Simalen ander the 7 tgs et 21			
11 COVEDNODE DEVIEW (Charle One)			
11. GOVERNOR'S REVIEW (Check One)			
GOVERNOR'S OFFICE REPORTED NO COMMENT	-		
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
	3. RETURN TO		
Distribution of the Leave Course	partment of Health Care Services		
Date: 2021.05.20 09:14:02 -07'00'	n: Director's Office		
16. 111 EB 10 WE	O. Box 997413, MS 0000		
	icramento, CA 95899-7413		
State Medicaid Director	,		
15. DATE SUBMITTED May 20, 2021			
FOR REGIONAL OFFICE USE ONLY			
	B. DATE APPROVED		
May 20, 2021	February 11, 2022		
PLAN APPROVED - ONE			
		y signed by James G. Scott -S	
July 1, 2021		022.02.11 18:17:35 -06'00'	
	TITLE		
	rector, Division of Program Operations		
23. REMARKS			
For Box 11 "Other, As Specified," Please note: The Governor's Office does not wish to review the State			
Plan Amendment.			

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

TARGETED CASE MANAGEMENT SERVICES CHILDREN UNDER THE AGE OF 21

Target Group (42 Code of Federal Regulations 441.18(a)(8)(i) and 441.18(a)(9)):

Medi-Cal eligible children, under the age of 21 years old, who are:

- a) At high risk for medical compromise due to one of the following conditions:
 - i) Failure to take advantage of necessary health care services, or
 - ii) Noncompliance with their prescribed medical regime, or
 - iii) An inability to coordinate multiple medical, social and other services due to the existence of an unstable medical condition in need of stabilization, or
 - iv) An inability to understand medical directions because of comprehension barriers, or
 - v) A lack of community support system to assist in appropriate follow-up care at home, or
 - vi) Substance abuse, or
 - vii) A victim of abuse, neglect or violence; and
- b) In need of assistance in accessing necessary medical, social, educational, or other services, when comprehensive case management is not being provided elsewhere.

For those individuals in this target group, who may receive case management services under a waiver program, case management services shall not be duplicated, in accordance with Section 1915(g) of the Social Security Act. This target group excludes persons enrolled in a Home and Community-Based Services waiver program from receipt of Targeted Case Management (TCM) services.

There shall be a county-wide system to ensure coordination among TCM providers of case management services provided to Medi-Cal beneficiaries who are eligible to receive case management services from two or more programs.

Areas of State in which services will be provided (§1915(g)(1) of the Act):

Entire State.

XOnly in the following geographic areas: Counties of Alameda, Contra Costa, Humboldt, Kern, Los Angeles, Mariposa, Mendocino, Monterey, Napa, Orange, Riverside, San Diego, San Luis Obispo, Sacramento, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma, Stanislaus, Sutter, Tuolumne, Ventura, City of Berkeley, and City of Long Beach.

Comparability of Services (§§ 1902(a)(10)(B) and 1915(g)(1))

Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

X Services are not comparable in amount, duration, and scope (§1915(q)(1)).

<u>Definition of Services (42 CFR 440.169):</u> Targeted Case Management services are defined as services furnished to assist individuals, eligible under the State Plan, in gaining access to needed medical, social, educational and other services. Targeted Case Management includes the following assistance:

1. Comprehensive assessment and periodic reassessment of individual needs, to determine the need for any medical, educational, social or other services. These assessment activities include:

TN No.21-0022 Approval Date: 02/11/2022 Effective Date: 07/01/2021

Supersedes TN No. 20-0027