

## **Table of Contents**

**State/Territory Name: California**

**State Plan Amendment (SPA) #: 14-022**

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  
San Francisco Regional Office  
90 Seventh Street, Suite 5-300 (5W)  
San Francisco, CA 94103-6706



**DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS**

December 16, 2014

Toby Douglas, Director  
California Department of Health Care Services  
P.O. Box 997413, MS 0000  
Sacramento, CA 95899-7413

Dear Mr. Douglas:

Enclosed is an approved copy of California State Plan Amendment (SPA) 14-022. SPA 14-022 was submitted to my office on September 25, 2014. This SPA adds Shasta County to the "Children Under the Age of 21" Targeted Case Management group. The effective date of this SPA is July 1, 2014.

Enclosed is the following approved SPA page that should be incorporated into your approved State Plan:

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

If you have any questions, please contact Tyler Sadwith by phone at (415) 744-3563 or by email at [tyler.sadwith@cms.hhs.gov](mailto:tyler.sadwith@cms.hhs.gov).

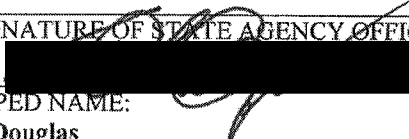
Sincerely,

/s/

Hye Sun Lee, MPH  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

Enclosure

cc: Michelle Kristoff, California Department of Health Care Services  
Nathaniel Emery, California Department of Health Care Service

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>		1. TRANSMITTAL NUMBER: <b>14-022</b>	2. STATE <b>California</b>
<b>FOR: HEALTH CARE FINANCING ADMINISTRATION</b>		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE <b>July 1, 2014</b>	
5. TYPE OF PLAN MATERIAL (Check One):  <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: Section 1915(g)(1) Social Security Act		7. FEDERAL BUDGET IMPACT: a. FFY <del>2014</del> 15/16 : \$54,746 <del>\$54,070</del> FFY 2014/2015: b. FFY <del>2015</del> 16/17 : \$42,581 <del>\$56,774</del> \$13,518	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  SUPPLEMENT 1a TO ATTACHMENT 3.1-A Page 1		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):  SUPPLEMENT 1a TO ATTACHMENT 3.1-A Page 1	
10. SUBJECT OF AMENDMENT: Targeted Case Management – Children Under the Age of 21			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL  <input checked="" type="checkbox"/> OTHER, AS SPECIFIED: The Governor's Office does not wish to review the State Plan Amendment.			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO:  Department of Health Care Services Attn: State Plan Coordinator 1501 Capitol Avenue, Suite 713.26 P.O. Box 997417 Sacramento, CA 95899-7417	
13. TYPED NAME: <b>Toby Douglas</b>			
14. TITLE: <b>Director</b>			
15. DATE SUBMITTED: <b>9/24/14</b>			
<b>FOR REGIONAL OFFICE USE ONLY</b>			
17. DATE RECEIVED: <b>September 25, 2014</b>		18. DATE APPROVED: <b>December 16, 2014</b>	
<b>PLAN APPROVED – ONE COPY ATTACHED</b>			
19. EFFECTIVE DATE OF APPROVED MATERIAL: <b>July 1, 2014</b>		20. SIGNATURE OF REGIONAL OFFICIAL: <b>/s/</b>	
21. TYPED NAME: <b>Hye Sun Lee, MPH</b>		22. TITLE: <b>Associate Regional Administrator</b>	
23. REMARKS: <del>Updated Geographic Area where Targeted Case Management services will be offered.</del> <b>DHCS approved pen-and-ink changes to Box 7</b>			

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

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**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.

☒ Only in the following geographic areas: Counties of Alameda, Amador, Butte, Contra Costa, El Dorado, Fresno, Humboldt, Kern, Kings, Lake, Los Angeles, Madera, Marin, Merced, Monterey, Napa, Orange, Placer, Riverside, Sacramento, San Diego, San Francisco, San Luis Obispo, Santa Barbara, Santa Clara, Santa Cruz, Shasta, Solano, Sonoma, Stanislaus, Tulare, Tuolumne, Ventura, Yolo, Yuba, City of Berkeley, and City of Long Beach.

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

☐ Services are provided in accordance with Section 1902(a)(1 O)(B) of the Act.

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

Definition of Services (42 CFR 440.169): 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:

**DEC 16 2014**

TN No. 14-022  
Supersedes  
TN No. 10-008a

Approval Date \_\_\_\_\_ Effective Date 07/01/2014