

Table of Contents

State/Territory Name: California

State Plan Amendment (SPA) #: 16-029

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 AND HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, MD 21244-1850



Financial Management Group

DEC 08 2016

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

RE: California State Plan Amendment 16-029

Dear Ms. Cantwell:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid state plan submitted under transmittal number (TN) 16-029. This State plan amendment (SPA) changes Kern County Medical Center from a Short-Doyle/Medi-Cal hospital for Psychiatric services that is cost reimbursed to a Fee-For-Service Medi-Cal hospital, effective December 6th, 2016.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C. This is to inform you that Medicaid State plan amendment TN 16-029 is approved effective December 6, 2016. We are enclosing the HCFA-179 and the amended plan pages.

If you have any questions, please call Blake Holt at (415) 744-3754.

Sincerely,

A black rectangular redaction box covering the signature of Kristin Fan. A small handwritten mark, possibly "1.2", is visible above the box. A thin horizontal line extends from the right side of the box.

Kristin Fan
Director

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

1 6 — 0 2 9

2. STATE

CA

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR
CENTERS FOR MEDICARE & MEDICAID SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

July 1, 2016

December 6th, 2016

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

42 CFR 447.252 of the Act 1902 (a) (13) of the Act
42 CFR 447.201 42 CFR 447.302 1902 (a) (30)

7. FEDERAL BUDGET IMPACT

a. FFY N/A	2017	\$ N/A	\$1,517,504
b. FFY N/A	2018	\$ N/A	\$1,821,005

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19A - Page 40.5, Page 40.5

~~Attachment 4.19A - Page 45.3, Page 45.3~~

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

Attachment 4.19A - Page 40.5, Page 40.5

~~Attachment 4.19A - Page 45.3, Page 45.3~~

10. SUBJECT OF AMENDMENT

Removal of Kern County Medical Center, previously approved as a Short-Doyle/Medi-Cal (SDMC) hospital for Psychiatric Inpatient services in SPA 09-004 to a Medi-Cal Fee-For-Service (FFS) hospital.

11. GOVERNOR'S REVIEW (Check One)

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT

☒ OTHER, AS SPECIFIED

☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL

13. TYPED NAME

Mari Cantwell

14. TITLE

State Medicaid Director

15. DATE SUBMITTED

16. RETURN TO

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED

18. DATE APPROVED

DEC 08 2016

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL

JUL 01 2016

20. SIGNATURE OF REGIONAL OFFICIAL

21. TYPED NAME

Tristin FAN

22. TITLE

Director, FMC

23. REMARKS

APPROVED

Pen and ink changes made to
Boxes 4, 7, 8, and 9 with state
concurrence.

Short Doyle/Medi-Cal Hospitals

1. Santa Barbara County Psychiatric Health Facility
2. San Mateo County Medical Center
3. Gateways Hospital and Community Mental Health Center
4. Riverside County Regional Medical Center
5. Kedren Hospital and Community Mental Health Center
6. Natividad Medical Center
7. LAC/USC Medical Center
8. Contra Costa Regional Medical Center
9. Harbor/UCLA Medical Center
10. Olive View/UCLA Medical Center
11. San Francisco General Hospital
12. Sempervirens Psychiatric Health Facility
13. Ventura County Medical Center
14. Santa Clara Valley Medical Center
15. Alameda County Medical Center
16. Arrowhead Regional Medical Center
17. Rady Children Adolescent Psychiatric Services
18. Mills Peninsula Hospital
19. Stanford University
20. Shasta Psychiatric Hospital

TN No. 16-029
Supersedes
TN No. 09-004

Approval Date:
DEC 08 2016

Effective Date: Dec 06, 2016