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State/Territory Name: CA

State Plan Amendment (SPA) CA: 22-0006

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
April 29, 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

RE: TN 22-0006

Dear Ms. Cooper:

We have reviewed the proposed California State Plan Amendment (SPA) to Attachment 4.19-B, CA-22-0006, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on March 08, 2022. This SPA adjusts rates for Radiological services so that they do not exceed 80% of the corresponding Medicare rate.

Based upon the information provided by the State, we have approved the amendment with an effective date of January 1, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Blake Holt at 303-844-6218 or blake.holt@cms.hhs.gov.

Sincerely,

Todd McMillion
Director
Division of Reimbursement Review

Enclosures
<table>
<thead>
<tr>
<th>1. TRANSMITTAL NUMBER</th>
<th>2. STATE</th>
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<tr>
<td>22-0006</td>
<td>CA</td>
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TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE  
January 1, 2022

5. FEDERAL STATUTE/REGULATION CITATION  
Title 42 CFR 447, Subpart F

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)  
a. FFY 2022 $ 954,000  
b. FFY 2023 $ 1,273,000

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  
Attachment 4.19-B Page 3k

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (if Applicable)  
Attachment 4.19-B Page 3k

9. SUBJECT OF AMENDMENT  
Medi-Cal reimbursement rates for Radiology Services

10. 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

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME  
Jacey Cooper

13. TITLE  
State Medicaid Director

14. DATE SUBMITTED  
March 8, 2022

15. RETURN TO  
Department of Health Care Services  
Attn: Director’s Office  
P.O. Box 997413, MS 0000  
Sacramento, CA 95899-7413

16. DATE RECEIVED  
March 8, 2022

17. DATE APPROVED  
April 29, 2022

18. EFFECTIVE DATE OF APPROVED MATERIAL  
January 1, 2022

19. TYPED NAME OF APPROVING OFFICIAL  
Todd McMillion

20. TITLE OF APPROVING OFFICIAL  
Director, Division of Reimbursement Review

21. REMARKS  
3/15/22: State concurrence for pen and ink change to Box 6, From "$954,000" to "($954,000)" and "$1,273,000" to "($1,273,000)".

Instructions on Back
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
STATE: California

REIMBURSEMENT METHODOLOGY FOR RADIOLOGY SERVICES

1) Except as otherwise noted in the State Plan, state-developed fee schedules are the same for both governmental and private providers of radiological services. Effective January 1, 2022, the department’s fee schedule rates for radiology services will be adjusted. All Medi-Cal Fee for Service rates are published at: https://files.medi-cal.ca.gov/rates/rateshome.aspx

2) Effective January 1, 2022, the reimbursement rates for radiology services will continue to be set at no more than 80 percent of the corresponding Medicare 2022 Physician Fee Schedule rates. Any rate at or below 80 percent of the applicable Medicare rate will not be decreased.