

## **Table of Contents**

**State/Territory Name: California**

**State Plan Amendment (SPA) #: 24-0052**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 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

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December 16, 2024

Tyler Sadwith, State Medicaid Director  
Department of Health Care Services  
Attn: Director's Office  
P.O. Box 997413, MS 0000  
Sacramento, CA 95899-7413

Re: California State Plan Amendment (SPA) 24-0052

Dear Director Sadwith:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 24-0052. This SPA expands the continuum of community-based services and evidence-based practices available through Medi-Cal specialty behavioral health delivery systems by adding Enhanced Community Health Worker (E-CHW) services as a preventive service available through the Medi-Cal fee-for-service specialty behavioral health delivery system.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act (the Act) and in implementing regulations at 42 Code of Federal Regulations (CFR) 440.130(c). This letter is to inform you that California Medicaid SPA 24-0052 was approved on December 13, 2024, with an effective date of January 1, 2025.

Enclosed are copies of CMS Form 179 and approved SPA pages to be incorporated into the California State Plan.

If you have any questions, please contact Cheryl Young at 415-744-3598 or via email at [Cheryl.Young@cms.hhs.gov](mailto:Cheryl.Young@cms.hhs.gov).

Sincerely,

James G. Scott, Director  
Division of Program Operations

Enclosures

cc: Lindy Harrington, DHCS

Rene Mollow, DHCS  
Paula Wilhelm, DHCS  
Ivan Bhardwaj, DHCS  
Rafael Davtian, DHCS  
Chuck Anders, DHCS  
Aaron Goff, DHCS  
Saralyn Ang-Olson, DHCS  
Angeli Lee, DHCS  
Farrah Samimi, DHCS  
Shanna Haysbert, DHCS

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

1. TRANSMITTAL NUMBER

2 4 — 0 0 5 2

2. STATE

CA3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL  
SECURITY ACT

XIX



XXI

TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

January 1, 2025

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR 440.130(c)

Social Security Act § 1905(a)(13)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2024-2025 \$ 372,776b. FFY 2025-2026 \$ 497,034

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Limitations on Attachment 3.1-A pages 18e, 18f, 18g

Limitations on Attachment 3.1-B pages 18e, 18f, 18g

Attachment 4.19-B pages 3.6, 3N.1 (new)

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

Limitations on Attachment 3.1-A pages 18e, 18f, 18g

Limitations on Attachment 3.1-B pages 18e, 18f, 18g

Attachment 4.19-B page 3.6

9. SUBJECT OF AMENDMENT

To add Enhanced Community Health Worker services as a preventive service

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



OTHER, AS SPECIFIED:

Please note: The Governor's Office does not wish to review  
the State Plan Amendment.

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME

Tyler Sadwith

13. TITLE

State Medicaid Director

14. DATE SUBMITTED

October 2, 2024

15. RETURN TO

Department of Health Care Services

Attn: Director's Office

P.O. Box 997413, MS 0000

Sacramento, CA 95899-7413

**FOR CMS USE ONLY**

16. DATE RECEIVED

October 2, 2024

17. DATE APPROVED

December 13, 2024

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

January 1, 2025

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

Box 5: CMS pen and ink change to add statutory citation approved by CA DHCS in email dated 11/25/24.

| TYPE OF SERVICE                       | PROGRAM COVERAGE**  | PRIOR AUTHORIZATION OR OTHER REQUIREMENTS*   |
|---------------------------------------|---|--|
| 13c. Community Health Worker Services | <p>Community Health Worker (CHW) services are preventive health services, as defined in 42 CFR 440.130(c), to prevent disease, disability, and other health conditions or their progression; to prolong life; and promote physical and mental health and efficiency. CHWs are trusted members of their community who help address chronic conditions, preventive health care needs, and health-related social needs.</p> <p>CHW services may:</p> <ul style="list-style-type: none"> <li>• Be provided in an individual or group setting.</li> <li>• Address issues that include but are not limited to: control and prevention of chronic conditions or infectious diseases; mental health conditions and substance use disorders; perinatal health conditions; sexual and reproductive health; environmental and climate-sensitive health issues; child health and development; oral health; aging; injury; domestic violence; and violence prevention.</li> <li>• Include: <ul style="list-style-type: none"> <li>○ Health education to promote the beneficiary's health or address barriers to health care, including providing information or instruction on health topics. The content of health education must be consistent with established or recognized health care standards. Health education may include coaching and goal</li> </ul> </li> </ul> | <p>Pursuant to 42 CFR Section 440.130(c), CHW services are provided as preventive services and must be recommended by a physician or other licensed practitioner of the healing arts within their scope of practice under state law.</p> <p>CHWs must be supervised by a Medi-Cal-enrolled community-based organization, local health jurisdiction, licensed provider, pharmacy, hospital, or clinic, as defined in 42 CFR 440.90.</p> <p>CHWs must have lived experience that aligns with and provides a connection between the CHW and the community being served.</p> <p>CHWs must demonstrate minimum qualifications through one of the following pathways:</p> <ul style="list-style-type: none"> <li>• <b>Certificate Pathway:</b> <ol style="list-style-type: none"> <li>1. <b>CHW Certificate:</b> A certificate of completion, including but not limited to any certificate issued by the State of California or a State designee, of a curricula that attests to demonstrated skills and/or practical training in the following areas: communication, interpersonal and relationship building, service coordination and navigation,</li> </ol> </li> </ul> |

\* Prior authorization is not required for emergency services.

\*\*Coverage is limited to medically necessary services.

TN No. CA-24-0052

Supersedes

TN No. CA-24-0037

Approval Date: December 13, 2024

Effective Date: January 1, 2025

| TYPE OF SERVICE                                      | PROGRAM COVERAGE**   | PRIOR AUTHORIZATION OR OTHER REQUIREMENTS*   |
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| 13c. Community Health Worker Services<br>(continued) | <p>setting to improve a beneficiary's health or ability to self-manage health conditions.</p> <ul style="list-style-type: none"> <li>Health navigation to provide information, training, referrals, or support to assist beneficiaries to: <ul style="list-style-type: none"> <li>Access health care, understand the health care system, or engage in their own care.</li> <li>Connect to community resources necessary to promote a beneficiary's health, address health care barriers, or address health-related social needs.</li> </ul> </li> <li>Screening and assessment to identify the need for services.</li> <li>Individual support or advocacy that assists a beneficiary in preventing a health condition, injury, or violence.</li> </ul> <p>CHW violence prevention services are evidence-based, trauma-informed, and culturally responsive preventive services to beneficiaries who have been violently injured as a result of community violence. Violence prevention services include all CHW services listed above by an individual who is qualified by any of the three pathways.</p> <p>Enhanced CHW services are tailored preventive services for beneficiaries with significant behavioral health needs, defined as beneficiaries who meet the access criteria for specialty mental health and/or substance use disorder</p> | <p>capacity building, advocacy, education and facilitation, individual and community assessment, professional skills and conduct, outreach, evaluation and research, and basic knowledge in public health principles and social determinants of health, as determined by the supervising provider. Certificate programs shall also include field experience as a requirement.</p> <p><b>2. Violence Prevention Certificate:</b> For individuals providing CHW violence prevention services only, a Violence Prevention Professional (VPP) Certification issued by Health Alliance for Violence Intervention or a certificate of completion in gang intervention training from the Urban Peace Institute.</p> <p>A Violence Prevention Certificate allows a CHW to provide CHW violence prevention services only. A CHW providing services other than violence prevention services shall demonstrate qualification through either the Work Experience Pathway or by completion of a General Certificate.</p> <ul style="list-style-type: none"> <li><b>Work Experience Pathway:</b> An individual who has 2,000 hours working as a CHW in paid or volunteer positions within the</li> </ul> |

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TN No. CA-22-0001

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| 13c. Community Health Worker Services<br>(continued) | <p>services. Enhanced CHW services include all CHW services listed above provided by a qualified CHW.</p> <p>CHW services, including violence prevention services and enhanced CHW services do not include the following:</p> <ul style="list-style-type: none"> <li>• Clinical case management/care management that requires a license.</li> <li>• Child care</li> <li>• Chore services including shopping and cooking.</li> <li>• Companion services</li> <li>• Employment services</li> <li>• Helping a recipient enroll in government programs or insurance that is not related to improving their health as part of a care plan.</li> <li>• Delivery of medication, medical equipment, or medical supply.</li> <li>• Personal Care services/homemaker services.</li> <li>• Respite care</li> <li>• Services that duplicate another covered Medi-Cal service.</li> <li>• Socialization</li> <li>• Transportation</li> </ul> | <p>previous three years, and has demonstrated skills and practical training in the areas described above, as determined by the supervisor, may provide CHW services without a certificate of completion for a maximum period of 18 months. A CHW who does not have a certificate of completion must earn a certificate of completion, as described above, within 18 months of the first CHW visit provided to a Medi-Cal beneficiary.</p> <p>All CHWs must complete a minimum of 6 hours of continuing education training annually.</p> |

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

- (22) For dates of service on or after July 1, 2015, the payment reduction specified in paragraph (13), set forth on page 3.3, does not apply to dental services and applicable ancillary services provided to beneficiaries of all ages.
- (23) For dates of service on or after July 1, 2022, the payment reductions specified in paragraph (13), at page 3.3, do not apply to Community Health Worker Services, as described on page 3N of this Attachment.
- (24) For dates of service on or after July 1, 2022, the payment reductions specified in paragraph (13), at page 3.3, do not apply to Asthma Preventive Services, as described on page 3O of this Attachment.
- (25) For dates of service on or after January 1, 2025, the payment reductions specified in paragraph (13), at page 3.3, do not apply to Enhanced Community Health Worker Services, as described on page 3N.1 of this Attachment.

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

PAYMENT METHODOLOGY FOR ENHANCED COMMUNITY HEALTH WORKERS SERVICES

A. GENERAL APPLICABILITY

Payment for enhanced community health worker services provided by Eligible Providers will be limited to the fee schedule developed by the State.

B. DEFINITIONS

"Enhanced Community Health Worker Services" means services as defined in Attachment 3.1-A of this state plan, delivered to a population with enhanced clinical risk factors or high-acuity health needs. These services support members with behavioral health needs and are available only to members that meet State's criteria for access to the specialty mental health services and/or specialty substance use disorder delivery systems.

"Eligible Provider" means a public or private provider enrolled in the Medi-Cal program and certified to provide Enhanced Community Health Worker Services as those services are defined in Attachment 3.1-A of this state plan.

"Home Health Agency Market Basket Index" means the IHS Global Inc. CMS Market Basket Index Levels for Home Health Agencies.

C. ENHANCED COMMUNITY HEALTH WORKER SERVICES PAYMENT METHODOLOGY

1. The State pays Eligible Providers of Enhanced Community Health Worker Services on a fee for service basis pursuant to a fee schedule established by the State. Eligible providers submit claims for enhanced community health worker services using appropriate Current Procedure Terminology (CPT®) codes. The fee schedule contains a rate for each County where the eligible provider is located.
2. The fee schedules that are effective for services provided on or after January 1, 2025, July 1, 2025, and annually thereafter, are posted to the following webpage: <https://www.dhcs.ca.gov/services/MH/Pages/medi-cal-behavioral-health-fee-schedules-main.aspx>
3. The July 1, 2025 fee schedule will be equal to the January 1, 2025 fee schedule increased by the percentage change in the Home Health Agency Market Basket Index from 2025 Quarter 1 to 2025 Quarter 3.
4. The State will annually increase the per-unit rates for Enhanced Community Health Worker Services effective July 1, 2025, by the percentage change in the four-quarter average Home Health Agency Market Basket Index. The updated rates will be posted to the following webpage annually. <https://www.dhcs.ca.gov/services/MH/Pages/medi-cal-behavioral-health-fee-schedules-main.aspx>