

**CENTERS FOR MEDICARE & MEDICAID SERVICES
EXPENDITURE AUTHORITY**

NUMBER: 11-W-00193/9

TITLE: California Medi-Cal 2020 Demonstration

AWARDEE: California Health and Human Services Agency

Under the authority of section 1115(a)(2) of the Social Security Act (the Act), expenditures made by California for the items identified below, which are not otherwise included as expenditures under section 1903 of the Act shall, for the period of this demonstration, be regarded as expenditures under the State's title XIX plan. The expenditure authority period of this demonstration is from the effective date identified in the demonstration approval letter, or as otherwise indicated in the Special Terms and Conditions (STCs), through December 31, 2020.

The expenditure authorities listed below promote the objectives of title XIX in the following ways:

- Expenditure authorities I, II, III, and IV, promote the objectives of title XIX by increasing access to, stabilizing, and strengthening providers and provider networks available to serve Medicaid and low-income populations in the State.
- Expenditure authorities I and IV promote the objectives of title XIX by increasing efficiency and quality of care through initiatives to transform service delivery networks to support better integration, improved health outcomes, and increased access to health care services.
- Expenditure authorities III, IV, V, VI, VII, and VIII promote the objectives of title XIX by improving health outcomes for Medicaid and other low-income populations in the State.

The following expenditure authorities shall enable California to implement the Medi-Cal 2020 Demonstration. All Medicaid requirements apply to expenditure authority IV.B, V, VI, VII, and VIII (except as inconsistent with those authorities or except as provided herein or as set forth in the STCs).

- I. Global Payments Program for Public Health Care Systems.** Expenditures for payments to eligible Public Health Care Systems, subject to the annual expenditure limits set forth in the STCs, to support participating Public Health Care systems providers that incur costs for uninsured care under the value-based global budget structure set forth in the STCs.
- II. Designated State Health Care Programs (DSHP).** Expenditures for costs of designated programs which are otherwise state-funded, subject to the terms and limitations set forth in the STCs for the following programs.
 - A. AIDS Drug Assistance Program (ADAP)**

- B. Breast & Cervical Cancer Treatment Program (BCCTP)
- C. California Children Services (CCS)
- D. Department of Developmental Services (DDS)
- E. Genetically Handicapped Persons Program (GHPP)
- F. Medically Indigent Adult Long Term Care (MIA-LTC)
- G. Prostate Cancer Treatment Program (PCTP)
- H. Song Brown Health Care Workforce Training
- I. Mental Health Loan Assumption Program (MHLAP)
- J. Steven M. Thompson Physician Corps Loan Repayment Program (STLRP)

III. Uncompensated Care for Indian Health Service (IHS) and tribal facilities. Expenditures for supplemental payments to support participating IHS and tribal facilities that incur uncompensated care costs associated with services for which Medi-Cal coverage was eliminated by SPA 09-001 that are furnished by these providers to individuals enrolled in the Medi-Cal program.

IV. Delivery System Transformation and Alignment Payments. Expenditures for the following payments for Delivery System Transformation and Alignment.

- A. **Public Hospital Redesign and Incentives in Medi-Cal.** Expenditures for incentive payments for Public Hospital Redesign and Incentives in Medi-Cal (PRIME).
- B. **Whole Person Care (WPC) Pilots.** Expenditures for payments to entities operating an approved WPC pilot program. Such expenditures may include payments for services, supports, infrastructure and interventions, which may not be recognized as medical assistance under Section 1905(a) or may not otherwise be reimbursable under Section 1903, to the extent such services, supports, infrastructure and interventions are authorized as part of an approved WPC pilot program.
- C. **Dental Transformation Incentive Program** Expenditures for incentive payments to eligible dental providers that achieve dental transformation objectives set forth in the STCs.

V. Expenditures Related to Community Based Adult Services (CBAS). Expenditures for CBAS services furnished to individuals who meet the level of care or other qualifying criteria.

VI. Expenditures Related to Low Income Pregnant Women. Expenditures to provide post-partum benefits for pregnant women with incomes between 109 percent up to and including 138 percent of the Federal Poverty Level (FPL), that includes all benefits that would otherwise be covered for women with incomes below 109 percent of the FPL.

VII. Expenditures Related to the Drug Medi-Cal Organized Delivery System (DMC-ODS). Expenditures for services not otherwise covered that are furnished to otherwise eligible individuals who are DMC-ODS beneficiaries, including services

for individuals who are short-term residents in facilities that meet the definition of an Institution for Mental Disease. These facilities include, but are not limited to, Free Standing Psychiatric treatment centers, Chemical Dependency Recovery Hospitals, and DHCS licensed residential facilities for residential treatment, and withdrawal management services.

VIII. Expenditures Related to Out-of-State Former Foster Care Youth. Expenditures to extend eligibility for full Medicaid State Plan benefits to former foster care youth who are under age 26, were in foster care under the responsibility of another state or tribe in such state on the date of attaining 18 years of age or such higher age as the state has elected, and were enrolled in Medicaid on that date.