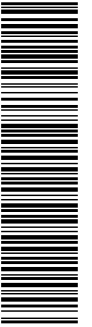


An act to amend Section 14131.10 of the Welfare and Institutions Code,
relating to Medi-Cal.

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THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. Section 14131.10 of the Welfare and Institutions Code is amended to read:

14131.10. (a) ~~Notwithstanding any other provision of this chapter, Chapter 8 (commencing with Section 14200), or Chapter 8.75 (commencing with Section 14591), in order to implement changes in the level of funding for health care services, specific optional benefits are excluded from coverage under the Medi-Cal program.~~

(b) (1) The following optional benefits are excluded from coverage under the Medi-Cal program:

(A) Adult dental services, except as specified in paragraph (2).

(i) This exclusion shall be in effect only through December 31, 2017, and adult dental services shall be covered under the Medi-Cal program as of January 1, 2018, or the effective date of any necessary federal approvals, whichever is later.

(ii) The restoration of adult dental services pursuant to clause (i) shall be effective only to the extent any necessary federal approvals are obtained as required by subdivision (f).

(B) Audiology services and speech therapy services.

(C) Chiropractic services.

(D) Optometric and optician services, including services provided by a fabricating optical laboratory, except as provided in subdivision (g).

(E) Podiatric services.

(F) Incontinence creams and washes.

(2) (A) Medical and surgical services provided by a doctor of dental medicine or dental surgery, which, if provided by a physician, would be considered physician services, and which services may be provided by either a physician or a dentist in this state, are covered.

(B) Emergency procedures are also covered in the categories of service specified in subparagraph (A). The director may adopt regulations for any of the services specified in subparagraph (A).

(C) Effective May 1, 2014, or the effective date of any necessary federal approvals as required by subdivision (f), whichever is later, for persons 21 years of age or older, adult dental benefits, subject to utilization controls, are limited to all the following medically necessary services:

(i) Examinations, radiographs/photographic images, prophylaxis, and fluoride treatments.

(ii) Amalgam and composite restorations.

(iii) Stainless steel, resin, and resin window crowns.

(iv) Anterior root canal therapy.

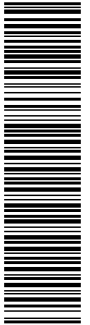
(v) Complete dentures, including immediate dentures.

(vi) Complete denture adjustments, repairs, and relines.

(D) Services specified in this paragraph shall be included as a covered medical benefit under the Medi-Cal program pursuant to Section 14132.89.

(3) Pregnancy-related services and services for the treatment of other conditions that might complicate the pregnancy are not excluded from coverage under this section.

(c) The optional benefit exclusions do not apply to either of the following:



(1) Beneficiaries under the Early and Periodic ~~Screening~~ Diagnosis Screening, Diagnosis, and Treatment Program.

(2) Beneficiaries receiving long-term care in a nursing facility that is both:

(A) A skilled nursing facility or intermediate care facility as defined in subdivisions (c) and (d) of Section 1250 of the Health and Safety Code.

(B) Licensed pursuant to subdivision (k) of Section 1250 of the Health and Safety Code.

(d) This section shall only be implemented to the extent permitted by federal law.

(e) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may implement the provisions of this section by means of all-county letters, provider bulletins, or similar instructions, without taking further regulatory action.

(f) This section shall be implemented only to the extent that federal financial participation is available and any necessary federal approvals have been obtained.

(g) (1) Effective no sooner than January 1, 2020, or January 1 of the subsequent calendar year following the legislative action pursuant to paragraph (2), whichever is later, and subject to paragraph (2) and subdivision (f), optometric and optician services, including services provided by a fabricating optical laboratory, shall be covered benefits under the Medi-Cal program.

(2) The restoration of optometric and optician services pursuant to this subdivision is contingent upon the Legislature including funding for these services in the state budget process.

~~(3) The optional benefits covered under the Medi-Cal program in this subdivision shall be suspended on December 31, 2021, unless the condition of paragraph (4) applies.~~

~~(4) The optional benefits covered under the Medi-Cal program pursuant to this subdivision shall not be suspended pursuant to paragraph (3) if the estimates of General Fund revenues and expenditures for the 2021–22 and 2022–23 fiscal years, as determined pursuant to Section 12.5 of Article IV of the California Constitution that accompany the May Revision required to be released by May 14, 2021, pursuant to Section 13308 of the Government Code contain estimated annual General Fund revenues that exceed estimated annual General Fund expenditures for the 2021–22 and 2022–23 fiscal years, by an amount equal to or greater than the sum total of all General Fund appropriations for all programs subject to suspension pursuant to the 2019 Budget Act and all bills providing for appropriations related to that act.~~

~~(5) It is the intent of the Legislature to consider alternative solutions to restore these optional benefits if the suspension takes effect.~~

(h) ~~(1)~~ Effective no sooner than January 1, 2020, the all of the following optional benefits, benefits shall be covered benefits under the Medi-Cal ~~program. program:~~

(A)

(1) Audiology services and speech therapy services.

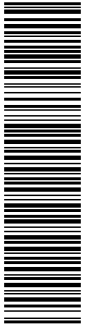
~~(B)~~

(2) Podiatric services.

~~(C)~~

(3) Incontinence creams and washes.

~~(2) The optional benefits covered under the Medi-Cal program in this subdivision shall be suspended on December 31, 2021, unless the condition of paragraph (3) applies.~~

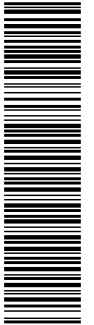


~~(3) The optional benefits covered under the Medi-Cal program pursuant to this subdivision shall not be suspended pursuant to paragraph (2) if the estimates of General Fund revenues and expenditures for the 2021–22 and 2022–23 fiscal years, as determined pursuant to Section 12.5 of Article IV of the California Constitution that accompany the May Revision required to be released by May 14, 2021, pursuant to Section 13308 of the Government Code contain estimated annual General Fund revenues that exceed estimated annual General Fund expenditures for the 2021–22 and 2022–23 fiscal years, by an amount equal to or greater than the sum total of all General Fund appropriations for all programs subject to suspension pursuant to the 2019 Budget Act and all bills providing for appropriations related to that act.~~

~~(4) It is the intent of the Legislature to consider alternative solutions to restore these optional benefits if the suspension takes effect.~~

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LEGISLATIVE COUNSEL'S DIGEST

Bill No.
as introduced, _____.
General Subject: Medi-Cal: Suspension of optional benefits.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services and under which qualified low-income persons receive health care benefits. The Medi-Cal program is, in part, governed and funded by federal Medicaid provisions. Existing law establishes a schedule of benefits under the Medi-Cal program, which includes specified services, subject to utilization controls. Existing law excludes specified optional services from coverage in the Medi-Cal program, including audiology services, optometric services, podiatric services, and incontinence creams and washes, among others. Notwithstanding this exclusion, existing law restores coverage for specified optional benefits, including audiology services, optometric services, podiatric services, and incontinence creams and washes. Existing law suspends these optional benefits on December 31, 2021, unless specified conditions occur.

This bill would delete the provisions suspending these optional benefits.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

