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California Department of Health Care Access and Information (HCAI)
Office of Health Care Affordability (OHCA)

Total Health Care Expenditures Data Submission Guide

OHCA Medi-Cal Payments Addendum

April 2026

OHCA Medi-Cal Payments Addendum

The table below describes what categories of Medi-Cal specific payments Medi-Cal managed care plans (MCPs) shall include or exclude in the Alternative Payment Model, Primary Care, and Behavioral Health files.

For the Primary Care file, inclusion further means that MCPs shall apply the Primary Care Allocation Methodology to this specific type of payment, such that any primary care portion of the payment is included in the Amount Paid for Primary Care field (PRC008).

For the Behavioral Health file, inclusion further means that MCPs would apply the Behavioral Health Allocation Methodology to this specific type of payment, such that any behavioral health portion of the payment is included in the Amount Paid for Behavioral Health (BHV009).

Some payment types (such as Enhanced Care Management (ECM) and Community Supports (CS) payments) are currently excluded from MCPs' reporting, but OHCA may request MCPs report these payments in future years. MCPs are encouraged to track these payments internally to allow for potential future reporting.

| Arrangement Type | Program Name | Include / Exclude |
|------------------------------|--|-------------------|
| Minimum Fee Schedule | Adverse Childhood Experiences (ACEs) | Include |
| Minimum Fee Schedule | Children and Youth Behavioral Health Initiative (CYBHI) | Include |
| Minimum Fee Schedule | Dental Managed Care Plans (DMC Plans) and Health Plan of San Mateo (HPSM) under the Dental Integration Pilot (DIP) | Include |
| Minimum-maximum Fee Schedule | Long-Term Care Fee-For-Service Equivalent Directed Payment | Include |
| Minimum-maximum Fee Schedule | Major Organ Transplant (MOT) | Include |
| Minimum Fee Schedule | Proposition 56 Abortion Services | Exclude |
| Minimum Fee Schedule | Targeted Rate Increases (Including FQHC Parity) | Include |
| Other | California Children's Services (CCS) | Include |
| Other | Ground Emergency Medical Transportation (GEMT) Quality Assurance Fee (QAF) | Include |
| Other | Vaccine administration fees in the Vaccines for Children (VFC) Program ¹ | Include |
| Other | Whole Child Model (WCM) | Include |
| Other | Community Supports (CS) | Exclude |
| Other | Community Reinvestment | Exclude |
| Other | Enhanced Care Management (ECM) | Exclude |
| Other | FQHC APM payments | Exclude |
| Other | FQHC Prospective Payment System (PPS) payments | Exclude |
| Other | Nonemergency medical transportation (NEMT) | Exclude |
| Other | Nonmedical transportation (NMT) | Exclude |

| Arrangement Type | Program Name | Include / Exclude |
|------------------------------------|---|-------------------|
| Pass-Through Payment | Benioff Children's Hospital Oakland | Exclude |
| Pass-Through Payment | DMPH DP/NF | Exclude |
| Pass-Through Payment | DPH Distinct Part Nursing Facility (DP/NF) | Exclude |
| Pass-Through Payment | Hospital Quality Assurance Fee (HQAF) | Exclude |
| Pass-Through Payment | Martin Luther King Jr. (MLK) Community Hospital | Exclude |
| Uniform Dollar Increase | Children's Hospital Supplemental Payment (CHSP) | Exclude |
| Uniform Dollar or Percent Increase | Designated Public Hospital Enhanced Payment Program (EPP) | Exclude |
| Uniform Dollar Increase | Developmental Screening Services | Exclude |
| Uniform Dollar Increase | District and Municipal Public Hospital Directed Payment (DHDP) | Exclude |
| Uniform Dollar Increase | Equity and Practice Transformation (EPT) | Exclude |
| Uniform Dollar Increase | Non-Hospital 340B Community Clinic Directed Payment (CCDP) | Exclude |
| Uniform Dollar Increase | Private Hospital Directed Payment (PHDP) | Exclude |
| Uniform Dollar or Percent Increase | Proposition 56 Dental | Exclude |
| Uniform Dollar Increase | Proposition 56 Family Planning | Exclude |
| Uniform Dollar Increase | Proposition 56 Physician Services | Exclude |
| Uniform Dollar Increase | Skilled Nursing Facility (SNF) Workforce & Quality Incentive Program (WQIP) | Exclude |
| Value-based Payment | Designated Public Hospital Quality Incentive Pool (DPH-QIP) | Exclude |
| Value-based Payment | District and Municipal Public Hospital Quality Incentive Pool (DMPH-QIP) | Exclude |

¹ VFC vaccines administered by Medi-Cal providers in the VFC program can be identified by each vaccine/toxoid product code with a modifier code of "SL" on the claim. Only the vaccine administration costs shall be included, the vaccine cost itself shall not be included. Submitters may refer to the [latest guidance](#) from DHCS on the list of CPT codes used to bill VFC.