



State of California—Health and Human Services Agency  
Department of Health Care Services



GAVIN NEWSOM  
GOVERNOR

DATE: April 27, 2021

**PPL No. 21-008**

TO: Medi-Cal Administrative Activities (MAA) Coordinators for the  
Tribal-Based Medi-Cal Administrative Activities (TMAA) Program

**SUBJECT: TMAA Claiming Plan Submission Requirements**

This Policy and Procedure Letter (PPL) notifies the California Rural Indian Health Board (CRIHB) that the TMAA claiming plan requirements have been revised. The revised claiming plan requirements outlined in this PPL supersedes all prior claiming plan requirements and must be followed for all new or amended claiming plans. This policy goes into effect upon the release of this PPL.

### **Background**

The claiming plan is the basis for determining allowable costs and activities for CRIHB to request federal reimbursement. A TMAA contractor participating in the TMAA program for the first time will be required to submit all of its claiming plan documents to DHCS for review and approval prior to submitting claims for reimbursement. Each TMAA contractor must provide DHCS a comprehensive claiming plan for each claiming unit that lists all of the participants' job classifications and the activities that the participants will perform.

An approved claiming plan is an annual agreement between the TMAA contractors and forms the basis for claiming TMAA. The claiming plan must be approved by DHCS prior to the submission of invoices.

### **Claiming Plan Requirements**

An approved claiming plan becomes the ongoing agreement between CRIHB, the claiming unit, and DHCS, forming the basis for claiming reimbursement through the TMAA program. A claiming plan must include:

1. The Comprehensive Claiming Units Grid (CCUG).
2. Claiming Unit Functions Grids (CUFG).

### 3. Duty Statements.

An LGA must have a comprehensive claiming plan for each unit that performs TMAA. The claiming plan must:

1. Be signed and certified for accuracy and completeness by the TMAA Coordinator.
2. Contain a memorandum of changes made to the claiming plan.
3. Contain the most recent claiming unit descriptions and staff job classifications.
4. Identify whether the claiming unit is a Community-Based Organization (CBO).
5. Identify all claiming units participating in the TMAA program.
6. Identify all time survey and/or direct charge staff, including subcontractors who will be included in the quarterly invoice by their employment classifications.
7. Indicate which activities each TMAA participant intends to perform regardless of whether the participant will time survey or direct charge.
8. Include duty statements for all job classifications identified within the claiming plan.

### **CCUG**

CRIHB is required to submit a CCUG with each addition of a claiming unit to the claiming plan and claiming plan amendments. The CCUG lists all of the CRIHB's active claiming units and provides DHCS with a list of all the claiming units authorized to submit claims through the TMAA program. The CCUG also identifies the time survey frequency assigned to each claiming unit or indicates that the entire claiming unit will direct charge to account for each participant's time. The assigned TMAA analyst will provide the CCUG template upon request.

The CCUG includes:

1. The name of the LGA.
2. The effective fiscal year and claiming quarter.
3. The contact person and phone number.
4. The Tribal Claiming Plan Certification Statement.
  - a. The TMAA Coordinator must sign and date each CCUG submission to DHCS to certify the information provided is true and correct and accurately reflects the performance of TMAA.
5. A "CBO (Yes/No)" column to indicate whether a claiming unit is a CBO.
6. A "Last Date Amended" column to indicate the previous amendment date of a claiming plan.
7. A "ADD, UPDATE, NAME CHANGE, OR DELETE" column to indicate the type of amendment made to the claiming plan. See below for further details regarding amendment types. The column must include:
  - a. "ADD" if a new claiming unit intends to participate in the TMAA program. When adding a new claiming unit,:

- i. CRIHB must provide duty statements for all staff job classifications participating in TMAA.
- b. "UPDATE" if amendment was made to the claiming plan. See the "Claiming Plan Amendments" section below for the changes that indicate an "UPDATE."
- c. "NAME CHANGE" if the only amendment is a change to the claiming unit name.
- d. "DELETE" if the claiming unit is no longer claiming and/or participating in the TMAA program.

### **CUFG**

The CUFG is specific to each individual claiming unit. The CUFG must list all of the employee classifications being claimed, the number of participants in each employee classification, and the TMAA performed within each employee classification. The CUFG also indicates which employee classifications will participate in the Time Survey or direct charge. The assigned TMAA analyst will provide the CUFG template upon request.

The updated CUFG includes:

1. The Tribal Claiming Plan Certification Statement.
  - a. The TMAA Coordinator must sign and date each CUFG submission to DHCS to certify the information provided is true and correct and accurately reflects the performance of TMAA.
2. A "TIME SURVEY (TS)" column to indicate the number of staff that participate in the TS.
3. A "DIRECT CHARGE" column to indicate the number of staff that intend to direct charge for their TMAA.
4. A "MEDI-CAL ADMINISTRATIVE ACTIVITY CODE" column to indicate the number of staff that intend to claim under each activity code.

### **Duty Statements**

The duty statement is specific to a staff member's job classification that is designated to perform TMAA on a claiming unit's behalf. The duty statement must include a description of all of the job functions, duties, tasks, and responsibilities that the staff members in a specific classification must perform. CRIHB must clearly identify the performance of TMAA on the duty statement by placing the designated activity code number next to the related activity. The employee must sign the duty statement to certify their understanding of the TMAA-specific performance expectations. The assigned TMAA analyst will provide an example of a duty statement upon request.

## **Claiming Plan Amendments**

CRIHB must submit a claiming plan amendment to the DHCS any time a claiming unit's structure changes. These changes include:

1. Adding or removing a claiming unit from an existing claiming plan.
2. Changing a job classification's name.
3. Promoting an employee, resulting in a change in job classification.
4. Increasing or decreasing the number of activity codes a claiming unit performs.
5. Adding or removing staff and/or subcontractors, regardless of the number of staff changing.
6. Changes to a claiming unit's description.
7. Changes to a claiming unit's name due to:
  - a. Merging with or separating from programs within a claiming unit.
  - b. General updates.
8. Changes to duty statements.

Unexpected changes within a claiming unit that occur during a claiming period that are not included on an approved CUGF must be reported to DHCS immediately to avoid disallowances. Additionally, the LGA must submit an amended claiming plan, which states the change(s), prior to the beginning of the following claiming quarter that the change(s) affect.

CRIHB is only required to submit specific portions of the claiming plan to DHCS on an ongoing basis if a claiming unit has an existing approved claiming plan. The submitted claiming plan amendment's documentation must include the CCUG and CUGF. In addition, applicable claiming plan documentation, such as duty statements are to be submitted upon revision or request.

The TMAA Claiming Plan Amendment Checklist and the Tribal Claiming Plan Certification Statement form are no longer applicable to DHCS and cannot not be used for guidance. For assistance regarding claiming plans, please contact your assigned TMAA analyst.

## **Conclusion**

DHCS, at its discretion, may require CRIHB to submit a claiming plan's documents on a more frequent basis to ensure program compliance.

DHCS will issue a claiming plan approval letter to the LGA within 30 days of submission and approval. Approved claiming plans remain in effect unless further amendments are submitted prior to the beginning of the claiming year.

For questions or assistance regarding this PPL, please e-mail the TMAA Unit at [cmaa@dhcs.ca.gov](mailto:cmaa@dhcs.ca.gov), or contact your assigned TMAA analyst.

Sincerely,

**DAMITRA HAWKINS**

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