Location: Department of Health Care Services (DHCS) Offices - Sacramento, CA

In-person Attendees: Dmitry Terlesky, Safety Net Financing Division (SNFD); Rick Record, SNFD: Amar Takhar, SNFD: Kate Hancock, Audits and Investigations. Financial Audits Branch (A&I FAB); Martin Alvarez, A&I FAB; Michelle Brown, A&I FAB; Karen Petruzzi, A&I FAB (ARAS); Said Mursal, A&I FAB; Renzo Bernales, California Department of Education (CDE); Tom Herman, CDE; Andrea Pederson, Navigant Consulting; Dennis Finnegan, Navigant Consulting; Marna Metcalf, Navigant Consulting; Alma McKenry, Fresno County Office of Education (COE); Andrea Coleman, LA USD: Aurelei Alvarez, LACOE: Belinda Brager, Calaveras USD: Beth Benne, Pierce College; Brenda Rios, Ontario-Montclair SD; Brittney Freer, Woodland Joint USD; Christina Guillen, Napa Valley USD; Christine Wilhite, Butte COE; Coreen DeLeon, Glenn COE; Erick Ramirez, DHS Sacramento County; Francisca Montes, Manteca USD; Heather Plahn, Palmdale SD; Helen Frederickson, Palmdale SD; Jackie Swords, Lancaster SD; Janice Holden, Stanislaus COE; Jeanne Tso, Montebello USD; Jen Minton, Sutter County Superintendent of Schools: Jeremy Ford, Oakland USD: Julie Ferebee, Palmdale SD; Katie Nilsson, San Joaquin COE; Laura Missimer, San Joaquin COE; Laurie Lane, Winters JUSD; Leslie Agostini, Manteca USD; Linda Hinojosa, Delano Union SD; Lisa Mazza, Ripon USD; Lori Koh, LACOE; Margaret Roux, Kern County Superintendent of Schools; Margarita Bloomberg, Galt Joint Union HSD; Margarita Bobe, LAUSD; Maria Parra, Ontario-Montclair SD; Marlene Culpepper, DHS Sacramento County; Marta Cuevas-Ortega, Galt Joint Union ESD; McKenzie Luis, San Joaquin COE; Melissa Nguyen, San Diego COE; Michelle Cowart, CCCOE; Nancy Gilko, Nevada Co Superintendent of Schools: Natasha Slivkoff, Bakersfield City School District; Octavio Costelo, LACOE; Patrice Breslow, San Diego USD; Rebecca Santos, Elk Grove USD: Rebeka Smith, San Bernardino County Superintendent of Schools: Rhonda Yohman, Madera County Superintendent of Schools; Saleena Santiago, Spring Charter Schools: Sheri Coburn, California School Nurses Organization: Sheri Elkins. Modesto City Schools; Terri Lindsey, Bakersfield City SD; Thelma Galario, County of Tulare; Wendi Beatty, Sacramento COE; Wendi Yamabe, Saugus Union SD; Kristie Kobayashi, Montebello USD.

Handouts

Each participant was emailed an electronic copy of the following: April AWG Meeting Agenda; April DHCS Status Update Summary; and February 2019 Meeting Minutes.

Purpose

The meeting was convened by DHCS. DHCS welcomed all participants to the meeting and briefly reviewed the purpose of the AWG, which is to improve the LEA BOP. The emphasis of the meeting is to strategize various goals and activities aimed at enhancing the Medi-Cal services provided on school sites and access by students to these services, while increasing federal reimbursement to LEAs for the cost of providing these services.

Review of Meeting Minutes

- DHCS welcomed both in-person and call-in attendees to the meeting.
- The AWG reviewed the February meeting minutes. No edits were requested, but a stakeholder requested that Financial Audits Branch (FAB) review the fiscal year ending (FYE) 2015 figures that are reported on page 3 of the February meeting minutes. FAB agreed to go over these figures in today's meeting. The minutes were approved and will be posted on the LEA Program website.

California Department of Education (CDE), Special Education Division Updates

- Two representatives from CDE attended the meeting and provided the following updates:
 - Statewide Systemic Improvement Plan (SSIP):
 - CDE continues working on a statewide system of support for districts needing assistance based on dashboard results. During the meeting it was discussed that on March 13, Indicator 17 detail (the federal requirement for a State Systemic Improvement Plan) was submitted to the State Board of Education. Information on the SSIP can be found on the CDE website, agenda item #1. The State Board approved the Plan, which will now go to the federal Office of Special Education Programs (OSEP) for review.
 - The SSIP is currently in Phase III, which is a multi-year phase that includes implementation and evaluation criteria. CDE noted that the Special Education Division has continued to conduct training workshops and technical assistance to provide support to those LEAs identified as needing assistance.
 - CDE noted that they are currently working on record reviews for nonsectarian private school (NPS) and nonsectarian private agencies (NPA) as part of the certification process.
 - CDE provided information on the Health Education Curriculum Framework, which includes comprehensive sexual health curriculum. It was noted that public comment from 2018 and 2019 was incorporated into the Framework in March 2019, prior to a school board vote to adopt the curriculum later this Spring.

DHCS A&I Updates - FAB

- A representative from A&I provided an update on the status of the CRCS audits by Fiscal Year End (FYE) date:
 - FYE 2014 all timely audits have been completed; 7 audits to be completed and were delayed because of a late CRCS submission.
 - FYE 2015 514 cost reports were filed. 300 minimal audits have been completed; 100 audits have been re-scoped to be limited or field audits. The remaining 214 audits have not yet started.

- Currently, there is one informal appeal from 2014. In addition, there are eight formal appeals two completed and awaiting a decision, two scheduled for September, and four that are yet to be scheduled.
- A stakeholder asked why an audit would be re-scoped. FAB noted that LEAs that
 have not had a field audit over a longer period of time, or those LEAs that show
 significant changes in reported costs from prior periods, may cause an audit to be
 rescoped as a limited or field audit.

DHCS Safety Net Financing Division (SNFD) Status Updates

• FY 2017-18 Annual Report (AR) Submissions

- As of March 26, 2019, 458 LEAs out of approximately 596 have submitted the FY 2017-18 AR.
- The AR was due from all participating LEAs by November 30, 2018.

• FY 2018-19 Provider Participation Agreement (PPA) Submissions

- As of March 26, 2019, 461 LEAs out of approximately 596 have submitted the FY 18-19 PPA.
- The PPA was due from all participating LEAs by March 1, 2019.

• FY 2018-21 Data Use Agreement (DUA) Submissions

- o As of March 26, 2019, 535 LEAs have submitted the FY 2018-21 DUA.
- The DUA was due from all participating LEAs that use billing vendors by January 31, 2019.

• Cost and Reimbursement Comparison Schedule (CRCS) and Certification of Zero Reimbursement Reports Update (as of March 27, 2019)

- FY 2016-17: A&I received 514 out of approximately 596 participants and accepted 499 submissions.
 - 479 DHCS Form 2437 Medi-Cal Cost and Reimbursement Comparison Schedule
 - 20 DHCS Form 2437a Certification of Zero Reimbursements for LEA Services
- FY 2015-16: A&I received 531 and accepted 514 submissions.
 - 497 DHCS Form 2437
 - 17 DHCS Form 2437a
- FY 2014-15: A&I received 540 CRCS and accepted 531 submissions.
 - 514 DHCS Form 2437
 - 17 DHCS Form 2437a
- Delinguent CRCS Reports: 72 LEAs are delinguent.

Policy for Non-Compliant LEAs

 DHCS is finalizing the compliance policy for the CRCS report and expects to publish a new Policy and Procedure Letter (PPL) in Q4 FY 2018-19.

LEA E-blasts

- E-blast March 26, 2019: SAVE THE DATES SPA 15-021 Southern and Northern California General Training
- E-blast March 1, 2019: SAVE THE DATE SPA 15-021 General Training (Southern California)
- E-blast February 15, 2019: Memorandum of Understanding (MOU)
- LEA Provider Manual Searchable PDF Updated February 13, 2019
- NEW Map of Participating LEAs
 - A stakeholder asked what classifies a LEA as participating. SNFD stated that a LEA with a current PPA is classified as a participating provider.
- Correction to FY 2018-19 Rate Table (96103 corrected to read 96130)

• OIL 073-19 - Exempt LEA Codes from Managed Care Edits

- SNFD is working with Managed Care Division on OIL 073-19 (Managed Care OIL) to exempt LEA codes from Managed Care edits.
- Expected implementation April 22, 2019

• Problem Statement 49759 - Managed Care Related Claims Denials

- Certain claims associated with the new OT/PT Assessment CPT Codes that were effective July 1, 2018 denied with Remittance Advice Details (RAD) codes indicating capitated payment or covered under Managed Care Plan. SNFD is working with the fiscal intermediary to identify the new CPT codes as non-capitated (see OIL 073-19). DHCS will issue an EPC for those claims incorrectly denied, once OIL 073-19 is implemented. There is no additional action necessary by LEAs.
- SNFD identified that newly implemented CPT code 96130, which implemented January 1, 2019, was impacted by Managed Care denials, and Conduent corrected the issue on January 31, 2019. DHCS will issue an EPC for those claims incorrectly denied, once OIL 073-19 is implemented. There is no additional action necessary by LEAs.

System Development Notice (SDN) 18-046 – Implement Other Health Coverage (OHC) Policy

- The 90-day timeframe for pursuing third party liability has been changed to a 45-day timeframe, per Senate Bill 276.
 - DHCS received an initial estimate from Conduent to implement this policy via SDN and cancelled the SDN.

Operating Instruction Letter (OIL) 362-18 – Update LEA BOP Reimbursement Rates with 2018-19 Reimbursement Rates for LEA Services

- Effective retroactively for dates of service on or after July 1, 2018, the LEA Services Billing Codes Chart was updated with the most recent rates for the LEA BOP for FY 2018-19.
 - Implementation occurred March 25, 2019; EPC is forthcoming

• OIL 101-18 - Rate Table Updates Related to SPA 15-021 - PLACEHOLDER

 OIL to change the LEA Rate Table to include new CPT codes/modifiers for new services and practitioners that will be implemented via SPA 15-021.

OIL 058-18 – Remove Non-IEP and Non-IFSP Utilization Controls -PLACEHOLDER

 OIL to remove the limitation that LEAs may only bill up to 24 non-IEP/IFSP services per fiscal year for a Medi-Cal eligible student per SPA 15-021.

• OIL 018-19 - Aid Code Updates

 An OIL to update the '0109 Table' that identifies the ineligible and eligible aid codes for the LEA BOP, is scheduled to be implemented by July 1, 2019.

FY 2015-16 Fair Share Analysis

- Conduent processed reimbursements and recoupments due to reconciliation of the 1.5% withhold:
 - DHCS over withholding approximately \$1,100,073
 - DHCS under withholding approximately \$154,222
- Implementation occurred March 11, 2019 and RADs will appear on checkwrites as follows:
 - RAD 720 = Amount withheld as a result of provider debt other than a cost settlement or claims
 - DHCS RAD 728 = Payment to provider of an amount resulting from other than a cost settlement

• Ordering Referring Prescribing (ORP) Enrollment Update

- The effective date of enrollment for an approved DHCS 6219 form or equivalent PAVE e-form is one year prior to the date DHCS received the complete application package.
- In order to allow Registered Credentialed School Nurse and Licensed Educational Psychologist practitioners to enroll as ORP practitioners in the LEA Program, who have been recently denied enrollment, a workaround is currently being proposed to DHCS's Provider Enrollment. SNFD will notify stakeholders as soon as program policy is finalized.
- DCHS noted that they expect to have this issue resolved shortly, confirming that they anticipate this will be resolved prior to the end of the fiscal year.

• SPA 15-021 (New Services and RMTS Implementation)

- DHCS submitted a backcasting methodology to CMS, and they have requested a meeting in mid-April to discuss the methodology. DHCS expects to quickly respond to any questions that CMS may have on backcasting, then formally resubmit SPA 15-021.
- DHCS has confirmed with CMS that, in the future, the CRCS will be due 8 months after the close of the reporting fiscal year (by March 1), not 5 months

- as previously noted. DHCS will provide a formal announcement of the change in policy following re-submission of the SPA.
- DHCS announced that they will be holding two SPA 15-021 training sessions, one in southern California on April 22 and another in northern California on May 9. Both training sessions can be attended remotely. Even though the SPA is not yet approved, DHCS believes it is important to educate the stakeholders on upcoming changes.
- SNFD is continuing to draft and review PPLs and Provider Manual updates related to SPA 15-021.
- A LEC representative asked about the contract between DHCS and the LECs/LGAs, noting that this contract must be finalized before the LEAs can contract with the LECs/LGAs for administration of the RMTS. DHCS noted that they understand this constraint and are moving swiftly to get the SPA back on the clock with CMS, which will help all parties to finalize contract details.
 - DHCS indicated that CCSESA has agreed to draft initial contract language between the LECs and DHCS, which will then be reviewed by DHCS's Office of Legal Services.
 - DHCS noted that the Department is moving away from Master Service Contracts and towards a participation agreement so Legal Services will have input on draft contract language with this context in mind.
 - LEC representatives asked if DHCS can provide a copy of the draft CMS-approved SMAA Manual that will incorporate LEA into the RMTS process. DHCS indicated that they will discuss this with management and provide a copy, if approved.
- DHCS indicated that they have approached CMS with the possibility of a FY 2020-21 RMTS implementation and are awaiting CMS response on this issue.
 Stakeholders noted that RMTS can't be rolled out by July 1 and they support a delayed RMTS start date for the LEA Program.

SPA 19-0009 (Vision Services)

- On March 26, 2019, DHCS formally submitted SPA 19-0009 to CMS. A
 preliminary teleconference with CMS has been scheduled for mid-April. DHCS
 expects RAIs to follow this initial conference call.
- SPA 19-0009 will provide additional comprehensive vision services to Medi-Cal eligible students in the LEA BOP. The effective date is January 1, 2019, pending CMS approval.
- A stakeholder asked about the provision in Education Code (51520) restricting licensed optometrists from using voluntary vision testing programs for the generation of referrals or for financial benefit. DHCS noted that their Office of Legal Services has reviewed this language and does not believe that SPA 19-0009 conflicts with this regulation.
- A stakeholder suggested that DHCS talk to the State Optometry Board regarding the SPA, since they have supported prior legislation to mandate comprehensive eye exams.

• SPA 19-0010 (Credentialing Requirements)

- Following internal review, DHCS has revised the scope of SPA 19-0010 to remove most practitioner requirements related to credentialing and supervision. Although some components may remain in the LEA Provider Manual, DHCS will no longer publish these as LEA Program requirements, since practitioners should be aware of professional requirements and abide by these, regardless of where they are employed. Although SNFD is removing these requirements from the State Plan, credentialing and supervision components required by licensing/certifying agencies will continue to be applicable to practitioners.
- Further, the SPA will remove all general practitioner education and qualification requirements in the State Plan as those are subject to change and are outside the purview of DHCS; however, they may remain in the Provider Manual.
- The effective date of SPA 19-0010 is July 1, 2019, pending CMS approval.
- A CDE representative asked how this impacts documentation requirements for the LEA Program. SNFD noted that LEAs should maintain documentation of practitioner credentials/licenses for audit/review purposes. However, when it comes to requirements that exist pursuant to a specific license/credential, practitioners should be familiar with professional practice acts and related regulations and follow professional requirements.
- DHCS will work with the provider manual subcommittee to decide what level of detail should remain in the LEA Provider Manual.

Report to the Legislature for FY 2017-18

- SNFD is currently preparing the FY 2017-18 Legislative Report for managerial review.
- The report has been revised to be shortened and more streamlined, by removing or re-writing unnecessary and duplicative information

• FY 2018-19 Advisory Workgroup Meeting Dates (1700 K Street, First Floor, Sacramento)

The last meeting for FY 2018-19 will take place on June 5, 2019.

Physician Authorization for Services

- DHCS reviewed the requirements for authorizing treatment services via prescriptions/referrals/recommendations (collectively termed "orders").
 - Orders are good for one year from the date of the order.
 - The order must be in place before the LEA can bill for services.
 - Must be written by a physician (either employed or contracted), or appropriate health service practitioner as defined in the *loc ed serv* sections of the LEA Provider Manual.
- A stakeholder asked whether an 'effective' date may be added to a physician prescription to better align billing and service delivery. For example, a physician

signs the order on November 1st, but writes an effective date for services as of September 5th. Can the LEA bill for services as of September 5th?

 DHCS indicated that they would follow up with the Benefits branch on this question and will report out on this at the next AWG meeting.

• AB 3192: LEA Program Guide - Report Out

- DCHS reported that they had a conference call with the subcommittee members last week regarding the contents of the Program Guide.
- DHCS is currently putting an outline of the Guide together and will provide a status update at the June AWG meeting.

Random Moment Time Survey (RMTS) Updates

- DHCS provided an update on RMTS, indicating that they are asking CMS for a delay in implementation until FY 2020-21. Attendees asked several RMTS technical questions:
 - A stakeholder asked about the Cost Pool 1 TSP list and whether the TSPs listed must bill for LEA services. DHCS indicated that providers on the TSP list must be employed by the LEA, have a primary job function of providing health services to students, and be eligible to bill for LEA services (e.g., they are licensed/credentialed, supervised, if required). Since the TSP list is created before the quarter begins, it is not a requirement that they bill for services during the upcoming quarter. However, DHCS expects that providers on the TSP list bill for services, when eligible under Program requirements.
 - A stakeholder asked DHCS whether all moment responses by a TSP in Cost Pool 1 will be coded to Code 2 (direct health services). DHCS indicated that there are parameters regarding code 2A (billable LEA services) versus code 2Z (non-billable LEA services). Since moments are randomly generated, the coding will be dependent upon what the practitioner is doing during their minute in time. Just because a TSP is in Cost Pool 1 does not mean that all of their moments are coded as 2A. TSPs in Pool 1 deliver health services, as well as perform administrative activities.
 - A stakeholder asked for clarification on whether the TSP list can include vacancies. In addition, the stakeholder asked whether replacement staff may bill when hired or must wait to bill until the following quarter. DHCS noted that these are technical questions that are currently being discussed with CMS. DHCS will provide further clarification on these issues when CMS provides guidance on these issues.

AWG Group Discussion

The goal of the AWG group discussion is to brainstorm challenges and barriers, use combined expertise to provide guidance to DHCS and suggest potential solutions. At this meeting, DHCS facilitated a conversation around two areas: RMTS technical questions and Physician Assistant (PA) and Nurse Practitioner (NP) prescription requirements.

- DHCS presented several stakeholder RMTS questions received via the LEA Program mailbox. DHCS provided draft responses that were discussed with the group, all of which are pending CMS approval. Meeting attendees requested copies of the draft questions and answers, which DHCS emailed to meeting participants on April 4th.
- DHCS has confirmed that PAs and NPs working under a physician may authorize LEA Program services. This new requirement will be effective when published in the LEA Provider Manual, likely with an effective date of July 1, 2019. DHCS noted that this policy is not retroactive. A Policy and Procedure Letter will be published to notify LEAs of the effective date of this change. This policy will also be included in the revised Provider Manual that will be published upon approval of SPA 15-021.

DHCS thanked all participants for their feedback and comments throughout the meeting and group discussion.

Next Meeting

The next meeting will take place on Wednesday, June 5.