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DIRECTOR

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



EDMUND G. BROWN JR.
GOVERNOR

DATE: July 1, 2015

PPL No. 15-017

TO: Local Educational Agencies (LEAs)

SUBJECT: NOTIFICATION OF NEW COST AND REIMBURSEMENT COMPARISON
SCHEDULE (CRCS) CERTIFICATION STATEMENT FOR
PARTICIPATING LEAs RECEIVING NO LEA MEDI-CAL BILLING
OPTION REIMBURSEMENT DURING A FISCAL YEAR

This Policy and Procedure Letter (PPL) notifies LEAs participating in the LEA Medi-Cal Billing Option Program of a new certification statement pertaining to those LEAs that did not receive LEA Medi-Cal Billing Option reimbursement during the fiscal year.

To participate in the LEA Medi-Cal Billing Option Program, LEAs must submit a CRCS annually by the mandated date of November 30 to certify the public funds expended for LEA services pursuant to the requirements of the Code of Federal Regulations (CFR), Title 42, Part 433.5. This requirement is specified in the Provider Participation Agreement (PPA), and continued enrollment in the LEA Medi-Cal Billing Option Program is contingent upon submission of the CRCS.

Effective July 1, 2015, LEAs that do not receive any Medi-Cal reimbursement in the LEA Medi-Cal Billing Option Program must submit the new certification statement, "*Certification of Zero Reimbursements for LEA Services DHCS Form 2437a*", in lieu of the multi-schedule CRCS (existing DHCS Form 2437). The form may be accessed on the LEA Website.

If you have any questions concerning this PPL, please contact Mr. Rick Record, Chief, LEA Medi-Cal Billing Option Program, by phone at (916) 552-9222 or by e-mail at Rick.Record@dhcs.ca.gov.

Sincerely,

ORIGINAL SIGNED BY SHELLY TAUNK FOR

Michelle Kristoff, Chief
Medi-Cal Administrative Claiming Section