

California Local Educational Agency Medi-Cal Billing Option Program

**Program Guide
State Fiscal Year 2020-21**



In Cooperation with:

**Local Educational Agencies
California Department of Education**

Background

Assembly Bill (AB) 3192 (O'Donnell, 2018) amended Welfare and Institutions (W&I) Code section 14115.8 to require the Department of Health Care Services (DHCS), in consultation with the Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) Ad Hoc Workgroup to issue and regularly maintain a Program Guide for the LEA BOP. Consistent with the intent of AB 3192, the Program Guide contains fiscal and programmatic compliance information regarding processes, documentation, and guidance necessary for the proper submission of claims and auditing of local educational agencies (LEAs) (a governing body of any school district or community college district, county office of education, charter school, state special school, California State University campus, or University of California campus), as required under the LEA BOP. LEAs are ultimately responsible for administrative functions and should be familiar with the LEA BOP Provider Manual, DHCS policies, program regulations, and the [LEA BOP Website](#).

The Program Guide includes, but is not limited to: state plan and state plan amendments (SPAs), frequently asked questions, policy and procedure letters, trainings, provider manuals, and other relevant types of instructional materials.

DHCS closely collaborated with the LEA BOP Ad Hoc Workgroup and other partners in the development of the Program Guide, and will continue to do so for all subsequent revisions. As new program policy is adopted during the course of state fiscal year (SFY) 2020-21, the Program Guide will be continually updated. As required by AB 3192, prior to revising to the Program Guide, DHCS will provide 30 calendar days written notification of the revision, including a statement of justification, to the LEA BOP Ad Hoc Workgroup and all other LEAs participating in the LEA BOP.

Table of Contents

LEA BOP Overview	4
Cost Reimbursement Comparison Schedule (CRCS)	5
LEA BOP Process and Documentation Information	6
LEA BOP Provider Manual	7
California School-Based RMTS	8
Policy and Procedure Letters	9
California State Plan	11
Frequently Asked Questions	12
LEA BOP Trainings	13
Instructional Materials	14

LEA BOP Overview

The LEA BOP was established in 1993, in collaboration with the California Department of Education (CDE), to fund Healthy Start Programs. It is authorized under California's W&I Code section 14132.06, and reimbursement is based upon a "fee-for-service" model.

The LEA BOP reimburses LEAs the federal share of the maximum allowable rate for approved health-related services provided by qualified health service practitioners to Medi-Cal enrolled students under the age of 22. Eligible services include:

<ul style="list-style-type: none">• Hearing Services• Health, Mental Health Evaluation and Education Assessments• Nursing Services<ul style="list-style-type: none">○ Activities of Daily Living• Nutritional Services• Occupational Therapy• Orientation and Mobility	<ul style="list-style-type: none">• Physical Therapy• Physician Services• Psychology/Counseling• Respiratory Care• Specialized Medical Transportation• Speech Therapy• Targeted Case Management (TCM)• Vision
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LEAs must annually certify that the public funds expended for LEA services that have already been provided are eligible for Federal Financial Participation (FFP) pursuant to Code of Federal Regulations, Title 42 section 433.51. DHCS must reconcile the interim Medi-Cal reimbursements to LEAs with the costs to provide the Medi-Cal services. The Cost and Reimbursement Comparison Schedule (CRCS) is used to compare each LEA's total actual costs for LEA BOP services provided to the interim Medi-Cal reimbursement for the preceding state fiscal year (SFY).

Cost Reimbursement Comparison Schedule (CRCS)

Participants in the LEA Medi-Cal Billing Option (LEA BOP) are required to annually certify, through the CRCS process, that the public funds expended to provide LEA BOP services are eligible for federal financial participation. Therefore, continued enrollment in the LEA BOP is contingent upon timely submission of the CRCS each fiscal year. Failure to meet this requirement may result in suspension from the LEA BOP.

The [LEA CRCS Webpage](#) outlines a submission schedule, CRCS documents, and instructions on how to submit the CRCS per each SFY.

The submission deadlines for the Cost and Reimbursement Comparison Schedule (CRCS) are detailed below:

State Fiscal Year	CRCS Due Date*
2020-21	3/01/22
2019-20	4/30/22
2015-16	6/30/22
2016-17	8/31/22
2017-18	10/31/22
2018-19	1/31/23
2021-22	3/01/23

**Due dates are currently being finalized with CMS and are subject to change.*

LEA BOP Process and Documentation Information

The LEA BOP's [Onboarding Handbook](#) outlines the operations of the LEA BOP. Topics include but are not limited to: enrollment requirements, claim processing, and compliance program documents such as the Provider Participation Agreement, the Annual Report, and CRCS. The LEA BOP updates the compliance program documents on an annual basis to reflect the appropriate SFY and any additional necessary information regarding policy change updates. In regards to documentation, LEA BOP providers must keep, maintain, and have available records that fully disclose the type and extent of LEA BOP services provided to Medi-Cal recipients. Please refer to the LEA BOP Provider Manual for more information as well as trainings on the documentation requirements (see the "Program Trainings" section of this Program Guide).

LEA BOP Provider Manual

The LEA BOP Provider Manual contains program policy regarding the operation of the LEA BOP. The [LEA BOP Provider Manual](#) covers the following subjects:

- Program Overview
 - Enrollment and Participation Requirements
 - Billing and Reimbursement Overview
 - Billing Codes and Reimbursement Rates
 - Billing Examples
 - Eligible Students
 - Individualized Plans
 - Rendering Practitioner Qualifications
 - LEA BOP Covered Services
 - Hearing, Health, Mental Health Evaluation and Education Assessments, Nursing and Activities of Daily Living, Occupational Therapy, Orientation and Mobility, Physical Therapy, Physician Procedures, Psychology/Counseling, Respiratory Care, Specialized Medical Transportation, Speech Therapy, TCM, and Vision
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SFY 2020-21 Updates:

- 1) March 15, 2021: The LEA BOP Provider Manual was updated to reflect the changes to the program that were identified in SPA 15-021, SPA 16-001, and additional items. The updates reflect:
 - New Current Procedural Terminology codes for practitioners and services, new policy related to reimbursement of covered services, and new rates.
 - New individual services sections
 - i. Orientation and Mobility Services, Nutritional Services, and Respiratory Therapy Services
 - Updated TCM section to include the new rate and new billing practitioner types (Licensed/Credentialed Speech-Language Pathologist, Licensed Occupational Therapist, and Licensed Physical Therapist)
 - New Practitioners
 - i. Licensed Physician Assistant, Orientation and Mobility Specialist, Licensed Respiratory Care Practitioner, Physical Therapist Assistant, Occupational Therapy Assistant, Speech-Language Pathology Assistant, Registered Dietician, Associate Marriage and Family Therapist, and Registered Associate Clinical Social Worker
 - LEA section (*loc ed*) includes the expanded list of the manual sections and includes an added section on parental consent.

California School-Based RMTS

As of July 1, 2020, the LEA BOP implemented the Random Moment Time Survey (RMTS), a statistically valid time survey methodology. The policies for RMTS for both School-Based Medi-Cal Programs can be found in the California School-Based Medi-Cal Administrative Activities Manual (California SMAA Manual), sections 5 and 6, as well as published Policy and Procedure Letters (PPLs) which can be found in the link below. PPLs relating to RMTS will be found in this section of the Program Guide. DHCS is in the process of securing federal approval of the standalone RMTS Manual that will apply to both School-Based programs. The “California School-Based Medi-Cal Random Moment Time Survey Manual” (California RMTS Manual) will incorporate RMTS PPLs and time survey policies and procedures based on the Centers for Medicare and Medicaid Services (CMS) requirements (see CMS’ Medicaid School-Based Administrative Claiming Guide (May 2003)). As of October 2021, the California RMTS Manual has not yet been approved by CMS. Upon CMS approval, sections 5 and 6 of the California SMAA Manual will no longer be applicable and will be removed.

RMTS Policy:

- [Section 5](#)- Activity Codes: Descriptions and Examples
 - [Section 6](#)- Time Survey
 - [RMTS PPLs](#)
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SFY2020-21 RMTS Updates:

- 1) PPL 20-031, published in July 2020, notifies LEA BOP providers of the new requirements for submitting a Participant Pool 1 Time Survey Participant (TSP) Equivalency Request (DHCS Form 4023) to DHCS.

Policy and Procedure Letters

DHCS issues PPLs regarding changes to the LEA BOP. The PPLs provide notification regarding new policies that are being applied to the LEA BOP or changes to an existing policy. Please refer to the published PPLs and their attachments that are located on the [LEA BOP PPL webpage](#).

SFY 2020-21 PPL Updates:

- 1) PPL 21-015, published in June 2021, notifies LEAs participating in the LEA BOP that claims for beneficiaries with an Unsatisfactory Immigration Status are not eligible for FFP reimbursement through the LEA BOP.
- 2) PPL 21-007, published in March 2021, Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) Interpretation of "Complete 15-Minute Period" Following an Initial Service Increment.
- 3) PPL 20-052, published in November 2020, notifies LEAs of TCM claiming costs related to both School-Based Medi-Cal Programs.
- 4) PPL 20-051, published in November 2020, notifies LEAs for stakeholders participating in the LEA BOP that DHCS encourages the coordination of mental health services with their respective Special Education Local Plan (SELPA), County Office of Education (COE), County Mental Health Plan (MHP) and Managed Care Organization (MCO).
- 5) PPL 20-046, published in November 2020, notifies LEAs of New Requirements for the quarter one TSP list for the LEA BOP under the RMTS Process.
- 6) PPL 20-045, published in October 2020, notifies stakeholders participating in the LEA BOP that Medi-Cal SPA 16-001 was approved by the CMS on October 22, 2020, with an effective date of January 2, 2016.
- 7) PPL 20-043, published in October 2020, notifies LEAs of the RMTS 85% Compliance Policy for School-Based Medi-Cal Programs.
- 8) PPL 20-040, published in August 2020, notifies LEAs participating in the LEA BOP that Specialized Medical Transportation (SMT) services will be cost settled using the Cost and Reimbursement Comparison Schedule (CRCS) as of July 1, 2019.
- 9) PPL 20-039, published in August 2020, notifies LEAs that new services and new practitioners will be integrated into the LEA BOP. The policy in this PPL is retroactive to July 1, 2015, the effective date of the SPA 15-021 governing LEA services.

- 10) PPL 20-038, published in August 2020, provides guidance to all LEAs participating in the LEA BOP regarding the temporary 6.2 percent increase to the Federal Medical Assistance Percentage for qualifying expenditures effective January 1, 2020, and extending through the last day of the calendar quarter in which the public health emergency declared by the Secretary of Health and Human Services for COVID-19.
- 11) PPL 20-037, published in August 2020, notifies LEAs interested in participating in the LEA BOP that the new quarterly enrollment process will begin on January 1, 2021. LEAs are required to submit all compliance documents to DHCS prior to the quarter for the participating SFY of enrollment. This policy is effective as July 1, 2020.
- 12) PPL 20-033, published in August 2020, notifies LEAs of reinstatement of TCM claiming for the LEA BOP.
- 13) PPL 20-031, published in July 2020, notifies LEA BOP providers of the new requirements for submitting a Participant Pool 1 TSP Equivalency Request to DHCS.
- 14) PPL 20-029, published in July 2020, notifies LEAs participating in the LEA BOP that the population of covered Medi-Cal beneficiaries has expanded, effective July 1, 2015.
- 15) PPL 20-028, published in July 2020, notifies stakeholders participating in the LEA BOP that DHCS will terminate the provider status for any LEAs that failed to submit the required Provider Participant Agreement for SFY 2020-21 by the due date of June 1, 2020.
- 16) PPL 20-014R, originally published on May 11, 2020, with a revised date of September 15, 2020, provides LEA BOP telehealth policy relative to the COVID-19. The revised version removes the limitation to students outside of an Individualized Education Plan/Individualized Family Service Plan and provides updated information on the requirement for contractors to enroll in Medi-Cal under the LEA BOP.
- 17) PPL 20-012R, originally published on May 1, 2020, with a revised date on September 8, 2020, notifies stakeholders participating in the LEA BOP that Medi-Cal SPA 15-021 was approved by CMS on April 27, 2020, with an effective date of July 1, 2015.
- 18) PPL 20-004R, published in August 2020, notifies LEAs of the SPA 15-021 requirements for LEA BOP providers, including the implementation of the RMTS process for LEAs participating in the LEA BOP. The PPL was revised in October 2020 to include additional edits to the specialized medical transportation section.

California State Plan

The Medicaid State Plan is based on requirements set forth in Title XIX of the Social Security Act and is a comprehensive written document created by the State of California that describes the nature and scope of its Medicaid program. It serves as a contractual agreement between the State of California and the federal CMS and must be administered in conformity with specific requirements of Title XIX of the Social Security Act and regulations outlined in Chapter IV of the Code of Federal Regulations. The State Plan contains all information necessary for CMS to determine if the State can receive FFP for its Medicaid program. There are several areas in the California State Plan that outline the requirements for covered services and the reimbursement methodology for the LEA BOP:

- [Attachment 3.1-A page 9; Limitations on Attachment 3.1-A](#) pages 9t and 26-29: Amount, Duration, and Scope of Medical and Remedial Care and Services- Categorically Needy, pages 9-9t and 26-29m
- [Attachment 3.1-B page 9; Limitations on Attachment 3.1-B](#) pages 9p and 25-28m: Amount, Duration, and Scope of Services Provided Medically Needy Groups, pages 9-9p and 25-28m
- [Supplement 8 to Attachment 4.19-B](#): Payment for LEA Services (including TCM), pages 1-12
- [Supplement 1c to Attachment 3.1-A](#): TCM Services- Children with an Individualized Education Plan and/or Individualized Family Service Plan (IEP and/or IFSP), pages 1-5

SFY 2020-21 State Plan Updates:

- 1) Supplement 1c to Attachment 3.1-A were amended and approved by CMS on October 22, 2020 (SPA 16-0001). The amendments allow TCM services to be available to Medi-Cal beneficiaries regardless of whether they have an (IEP and/or IFSP) under the Individuals with Disabilities Education Act.

Frequently Asked Questions

Frequently Asked Questions (FAQs) were developed to provide more guidance on existing LEA BOP policy. FAQs are based on several subjects and provide reference to policy stated in the LEA BOP Provider Manual, Medi-Cal policy, and State and Federal regulations. The older [LEA BOP FAQs](#) have been archived due to recent policy changes associated with SPA 15-021. However, DHCS developed new FAQs based on recent SPA 15-021 related trainings. Please see the LEA BOP Trainings section below for FAQs relating to SPA 15-021 policy.

SFY 2020-21 FAQ Updates:

- 1) [FAQs on EPSDT Screenings](#)- LEA BOP published these FAQs on July 7, 2021. These FAQs provide clarification to LEA BOP providers on EPSDT and how it relates to the LEA BOP.

LEA BOP Trainings

The LEA BOP provides training on a bi-monthly basis, as needed, or upon request from stakeholders. Trainings are posted on the [LEA BOP Training](#) webpage.

SFY 2020-21 Training Updates:

- 1) August 2020; Training topic was on “Preparing for Random Moment Time Survey” (Specialized Medical Transportation Update, Q2 to Q4 TSP List Development, Q1 TSP List Development, Future LEA BOP Enrollment, Roles and Responsibilities for RMTS, and Preparing for Random Moment Time Survey Training FAQs).
- 2) September 3, 2020; Training topic was on “Target Case Management” (TCM overview, Billing Scenarios, PPL 20-033 review, Coding TCM moments, and TCM FAQs).
- 3) September 15, 2020 & September 29, 2020; Training topic was on “Time Survey Participant” (RMTS overview, Responding to Moments, Moment Response Examples, and TSP FAQs).
- 4) October 7, 2020; Training topic was on “Documentation Training” (Overview of Documentation Requirements, Authorization Requirements, Non-Individuals Disabilities Education Act Population Requirements, Other Documentation Requirements, and Common Audit Findings).
- 5) November 10, 2020; Training topic was on “Time Survey Participant” (TSP List Development for Q3, TSP Equivalency Requests, TSP List Development for Q1, LEA Specific Scenarios, and November TSP List FAQs).
- 6) December 2, 2020; “Training topic was on “SPA 16-001” (SPA 16-001 Approval, Claiming TCM, Retroactive Claiming Timeline, LEA BOP Website Resources, LEA BOP Inbox FAQs).
- 7) February 3, 2021; Training topic was on “Provider Manual Updates” (Provider Manual Update FAQs).
- 8) April 7, 2021; Training topic was on “AWG Survey - Question and Answer Session” (Survey Session FAQs).
- 9) June 2, 2021; Training Topic was on “Breakout Sessions: Educationally Related Mental Health Services, LEA BOP 101 Walkthrough, or Telehealth Services” (Breakout Session).

Instructional Materials

The LEA BOP has published various instructional materials in order to supplement existing policy. These instructional materials can provide LEAs with easy references to certain policies or subjects within the LEA BOP. Instructional materials are available on the [LEA BOP website](#).

SFY 2020-21 Materials Update:

- 1) [Early and Periodic Screening, Diagnostic, and Treatment Services \(EPDST\)](#) are billable to Medi-Cal. Under the LEA BOP, reimbursement is available for federally eligible full-scope Medi-Cal beneficiaries under the age of 21 with a comprehensive, high-quality array of preventive (such as screening), diagnostic, and treatment services under EPSDT. Per [PPL 21-015](#), EPDST related claims for UIS beneficiaries are not eligible for federal financial participation (FFP) reimbursements through the LEA BOP. Furthermore, the LEAs are responsible to fund LEA BOP services provided to UIS beneficiaries through local funds and no state general fund (SGF) will be expended for this population.
- 2) [Screening FAQs](#) related to EPDST Screenings.