



# LEA Medi-Cal Billing Option Program

**December 2, 2020**

**1:00-3:00pm**

SPA 16-001 and LEA Program Updates

**TRAINING TO BEGIN AT 1:00PM**



# Introductions

## California Department of Health Care Services (DHCS)

Administers the Local Educational Agency Medi-Cal Billing Option Program (LEA Program) and School-Based Medi-Cal Administrative Activities Program (SMAA Program)

## Guidehouse

Contractor to DHCS  
Provides assistance to DHCS as a subject-matter expert



# Agenda

## Section

## Topic

- 
- |       |   |
|-------|---|
| 1     | SPA 16-001 Approval                     |
| ----- |   |
| 2     | Claiming Targeted Case Management (TCM) |
| ----- |   |
| 3     | Retroactive Claiming Timeline           |
| ----- |   |
| 4     | LEA Program Website Resources           |
| ----- |   |
| 5     | LEA Inbox FAQs                          |
| ----- |   |



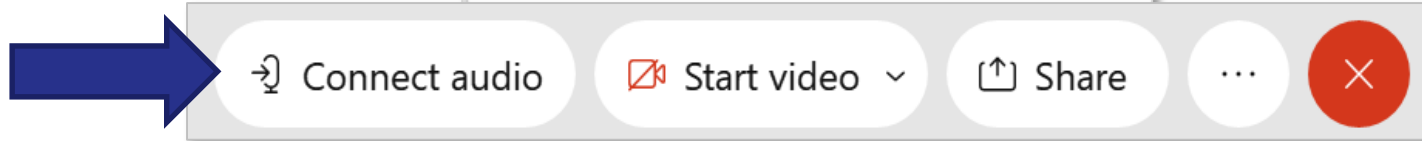
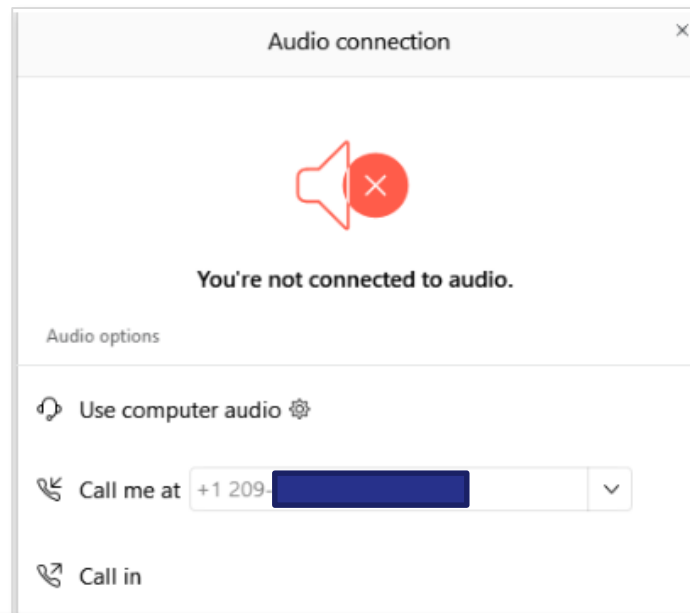
# Housekeeping Items

- Questions
  - Submit via the **Q&A function** (*not* the chat function)
  - Time for Q&A at end of each section
  - A FAQ document will be compiled with selected questions submitted via the Q&A function and those sent to [LEA@DHCS.CA.gov](mailto:LEA@DHCS.CA.gov) – DHCS **will not** be responding to every question
- Training materials will be distributed to all stakeholders on the LEA Program listserv
- LEA Program listserv:  
<http://apps.dhcs.ca.gov/listssubscribe/default.aspx?list=DHCSLEA>



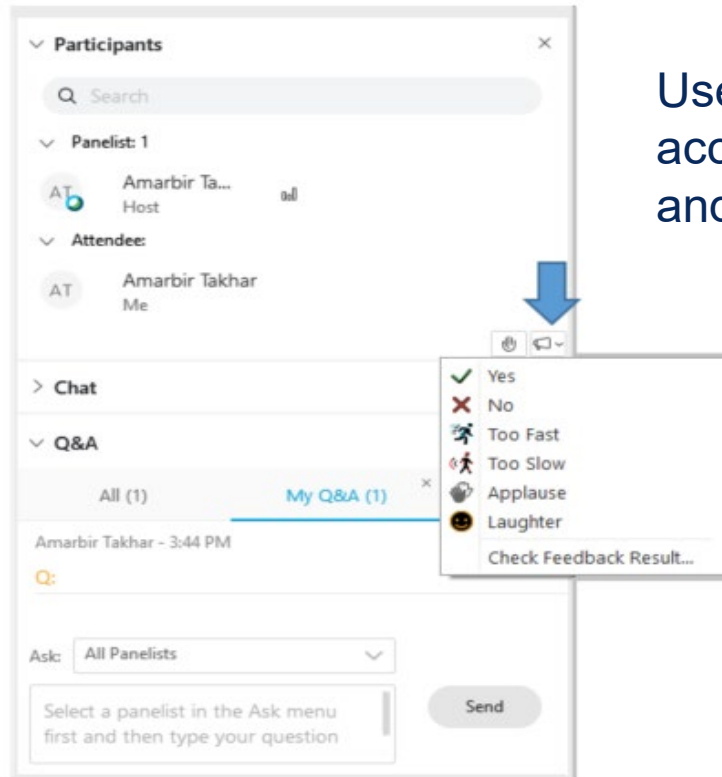
# Webex Audio Help

- Connect to meeting audio:
  - Open the event from Webex rather than calling the Webex call-in number, and use the call-in options provided there
  - Select microphone icon at bottom of screen
  - Select the option for how you would like to connect



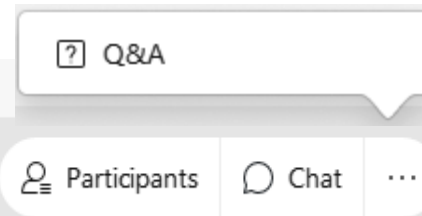


# Chat, Feedback, and Q&A



Use the bottom right bubble to access the Participant, Chat, and Q&A window.

The Q&A window is accessed by clicking the button with three dots then select the Q&A pop up.



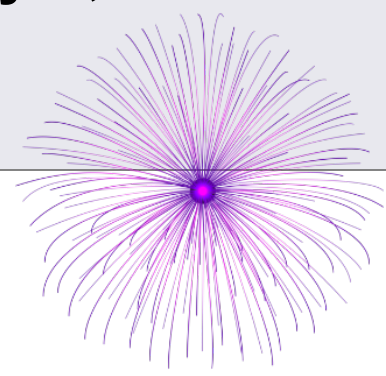
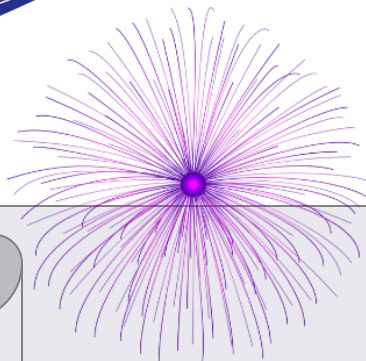


# Section 1

## SPA 16-001 Approval



# SPA 16-001 Approval



State Plan Amendment (SPA) 16-001 was officially **approved** by the Centers for Medicare and Medicaid Services (CMS) on October 22, 2020 with an effective date of **January 2, 2016!**





# Policy and Procedure Letter (PPL) #20-045

[PPL #20-045](#) is posted to the LEA Program PPL webpage

- SPA 16-001 expands TCM services to Medi-Cal beneficiaries covered under an Individualized Health and Support Plan (IHSP)

Other common names for an IHSP:  
Individualized School Healthcare Plan,  
Plan of Care, Nursing Plan, 504 Plan

***Generically, these will be referred to as “Care Plans”***

- SPA 16-001 expands the allowable practitioner types for TCM:
  - ✓ Licensed or Credentialed Speech-Language Pathologists
  - ✓ Licensed Occupational Therapists
  - ✓ Licensed Physical Therapists



# The Care Plan

- The Care Plan should identify the healthcare needs, and include, at minimum:



**Medical necessity** for services authorized by medical practitioner



Treatment **services to be provided** to the student



Plan for **duration and frequency** of services



**Necessary training, supervision and monitoring** of designated school staff



Plan for **evaluating and reporting outcomes** and changes



Method to **ensure and document safe, consistent provision of services** to the student



# TCM Services: Definition

## Service Definition

TCM services assist eligible children and eligible family members to access needed medical, social, educational and other services when TCM is covered by the student's IEP, IFSP, or IHSP

- TCM services are written into the IEP/IFSP/IHSP
- When 7+ continuous service minutes are rendered, a 15-minute increment can be billed
- **Components of TCM:**
  1. Comprehensive assessment and periodic reassessment of individual needs
  2. Development (and periodic revision) of a specific care plan
  3. Referral and related activities to help the eligible student obtain needed services
  4. Monitoring and follow-up activities



# Components of TCM

- 1. Comprehensive assessment and periodic reassessment of student needs to determine the need for any medical, educational, social or other services.**

These assessment activities include:



Reviewing student's records, such as cumulative files, health history and/or medical records



Interviewing the student and/or parent/guardian



Observing the student in the classroom and other appropriate settings



Writing a report to summarize assessment results and recommendations for additional LEA services



# Components of TCM (cont'd)

## 2. Development (and periodic revision) of a specific care plan that is based on the information collected through the assessment that:



Specifies the goals and actions to address the medical, social, educational and other services needed by the student



Includes meeting with the student and parent(s) or guardian(s) to establish needs



Includes activities such as ensuring the active participation of the eligible student, and working with the student (or the student's authorized health care decision maker) and others to develop those goals



Identifies a course of action to respond to the assessed needs of the eligible student



# Components of TCM (cont'd)

- 3. **Referral and related activities (such as scheduling appointments for the student) to help the eligible student obtain needed services including:**



Activities that help link the student with medical, social, educational providers or other programs and services that are capable of providing needed services to address identified needs and achieve goals specified in the care plan



# Components of TCM (cont'd)

## 4. Monitoring and follow-up activities:



Activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible student's needs, and which may be with the student, family members, service providers or other entities or students



Include at least one annual monitoring to determine whether: (1) services are being furnished in accordance with the student's care plan, (2) services in the care plan are adequate, and (3) changes in the needs or status of the student are reflected in the care plan



Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers. Periodic reviews will be completed at least every six months.



# Coordinating TCM

**DHCS recommends that each Medi-Cal eligible student is assigned one case manager who has the ability to provide students with comprehensive TCM services.**

However, it is recognized that some students will receive TCM services from more than one agency or provider.

**To avoid duplication of services and billing, LEAs must do the following:**

- ✓ **Clearly document** the LEA and TCM services rendered by each TCM agency or provider
- ✓ Where necessary, **develop written agreements to define the case management service(s)** each agency and/or provider will be responsible for rendering





# TCM Services: No Supervision

| Practitioners  | Supervision                           |
|--|---------------------------------------|
| <p>Licensed nurses<br/>Licensed vocational nurses (LVNs)<br/>Licensed clinical social workers (SWs)<br/>Credentialed school social workers<br/>Licensed psychologists<br/>Licensed educational psychologists<br/>Credentialed school psychologists<br/>Licensed marriage and family therapists (MFTs)<br/>Credentialed school counselors<br/>Program specialists<br/><b>Licensed speech-language pathologists*</b><br/><b>Credentialed speech-language pathologists*</b><br/><b>Licensed occupational therapists*</b><br/><b>Licensed physical therapists*</b></p> | <p><i>No supervision required</i></p> |

**\* New SPA 16-001 practitioner**



# TCM Services: Require Supervision

| Practitioners   | Supervision  |
|---|--|
| <p>Associate marriage and family therapist</p> <p>Registered associate clinical social worker</p> | <p><i>Supervision required by one of the following:</i></p> <ul style="list-style-type: none"><li>Licensed marriage and family therapist</li><li>Licensed clinical social worker</li><li>Licensed professional clinical counselor</li><li>Licensed psychologist</li><li>Licensed physician</li></ul> |



# TCM Services: Case Manager Qualifications

**Case managers employed by the case management agency (the LEA) must meet at least one of the requirements for education and/or experience:**

- **A Registered Nurse (RN) or a Public Health Nurse** that meets the educational and clinical experience requirements as defined by the California Board of Registered Nursing
- An individual with at least a **Bachelor's degree** from an accredited college or university, who has completed an **agency-approved case management training course**
- An individual with at least an **Associate of Arts degree** from an accredited college, who has completed an **agency-approved case management training course and has two years of experience performing case management duties** in the health or human services field
- An individual who has completed an **agency-approved case management training course and has four years of experience performing case management duties** in a health or human services field



# TCM Services: Billing

## Billing of Service

- TCM services are billed in 15-minute increments
- All LEAs paid the same rate (*no high, medium, low rates*)
- Limited to **32 units** per student per day



| Service   | Proc Code | IDEA Modifier | Practitioner  | Practitioner Modifier |
|---|-----------|---------------|---|-----------------------|
| <b>Targeted Case Management Services</b><br><br><i>T1017</i><br><br><i>TL (IFSP) or TM (IEP) *or Blank (IHSP)</i> |           |               | Nurses  | TD                    |
|   |           |               | LVNs  | TE                    |
|   |           |               | Licensed Clinical SWs, Credentialed School SWs  | AJ                    |
|   |           |               | Licensed Psychologists, Licensed Educational Psychologists, Credentialed School Psychologists | AH                    |
|   |           |               | Program Specialists   | HO                    |
|   |           |               | Licensed MFTs, Credentialed School Counselors   | No modifier           |

**(\*) denotes changes to billing under SPA 16-001. Updates to the claims processing system are expected by February 2021.**



# TCM Services: Billing (cont'd)

## Billing of Service

- TCM services are billed in 15-minute increments
- All LEAs paid the same rate (*no high, medium, low rates*)
- Limited to **32 units** per student per day



| Service   | Proc Code | IDEA Modifier | Practitioner                          | Practitioner Modifier |
|---|-----------|---------------|---------------------------------------|-----------------------|
| <b>Targeted Case Management Services</b><br><br><i>T1017</i><br><br><i>TL (IFSP) or TM (IEP) *or Blank (IHSP)</i> |           |               | Associate MFTs                        | HL                    |
|   |           |               | Reg. Associate Clinical SWs           | HM                    |
|   |           |               | <b>*Licensed OTs</b>                  | <b>*GO</b>            |
|   |           |               | <b>*Licensed PTs</b>                  | <b>*GP</b>            |
|   |           |               | <b>*Licensed or credentialed SLPs</b> | <b>*GN</b>            |

**(\*) denotes changes to billing under SPA 16-001. Updates to the claims processing system are expected by February 2021.**



# Documentation

Required documentation for TCM services **must include:**

- ✓ Service Plan
- ✓ Records of TCM activities
- ✓ Records with student and/or family progress



# QUESTIONS – SECTION 1

*While DHCS is compiling questions submitted via the Q&A function, a **practice session** will be initiated.*

**Any additional questions can be submitted to the LEA Program Inbox:**

**[LEA@DHCS.CA.gov](mailto:LEA@DHCS.CA.gov)**



# Section 2

## Claiming TCM





# School-Based TCM Reimbursement

**With the approval of SPA 15-021, the LEA Program was integrated into the RMTS process**

**In order to prevent duplication of reimbursement, LEAs will need to choose which school-based program to receive TCM reimbursement through:**

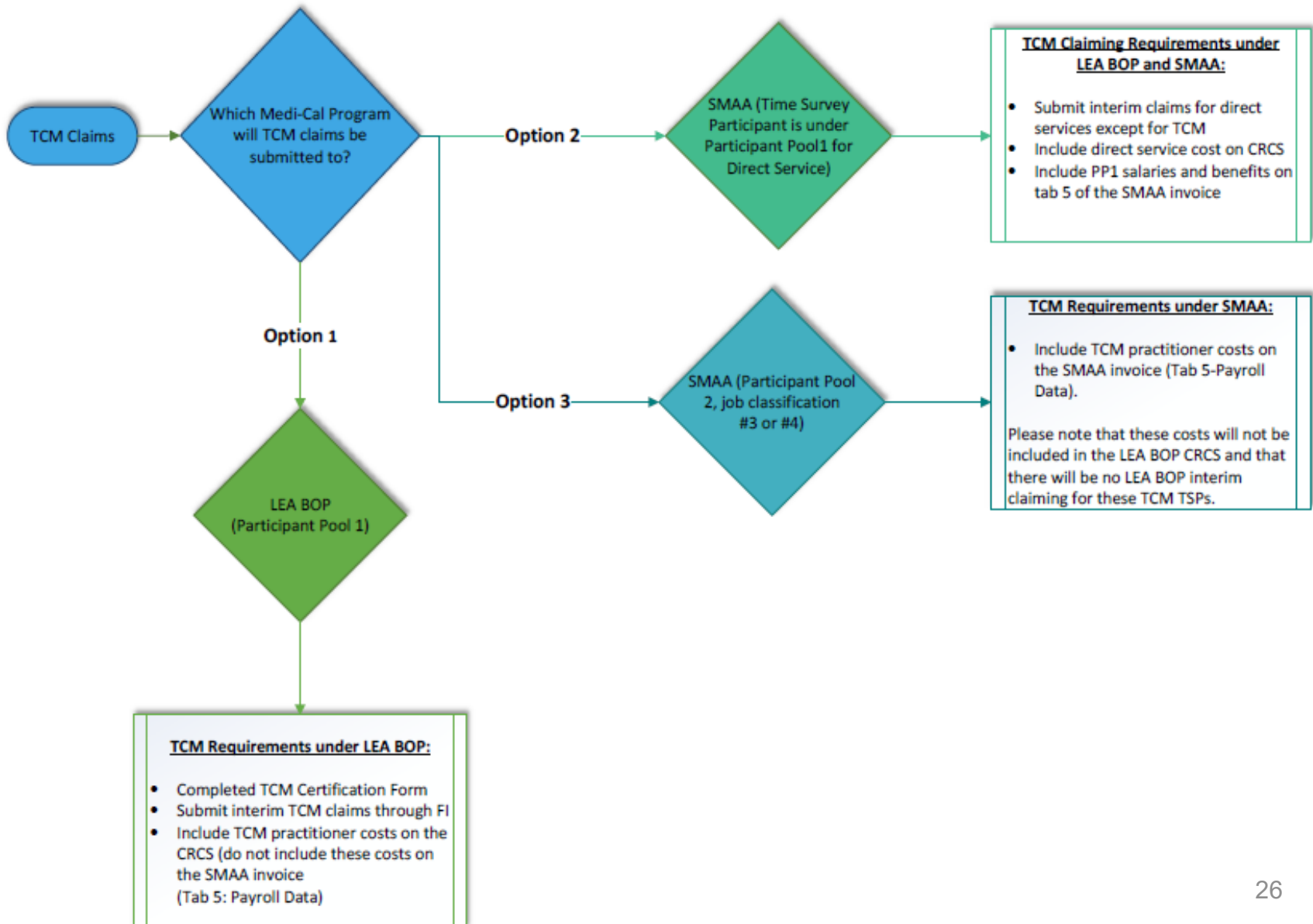
- **Option 1:** The LEA Program as a Pool 1 Participant
- **Option 2:** The SMAA Program as a Pool 1 Participant

*Note: Applicable only if the LEA participates in both the LEA Program and SMAA Program*

- **Option 3:** The SMAA Program as a Pool 2 Participant



# School-Based TCM Flow Chart





# Option 1: Claiming TCM Through the LEA Program

- TCM practitioners must be in **Participant Pool 1**
- LEA must complete a **TCM Certification Form** that includes all practitioners they intend to bill TCM services for during the quarter
- Only scenario where TCM moments can be **coded to 2A**
- LEAs will **submit interim claims** for TCM services
- Pool 1 practitioner costs **will be included on the LEA Program CRCS** for the applicable quarter(s)
- Costs for practitioners identified on the TCM Certification Form **must be removed from the SMAA invoice** for the applicable quarter(s)



## Option 2: Claiming TCM Through SMAA – Participant Pool 1

- Option 2 entails LEAs receiving **direct service reimbursement (except TCM)** through LEA BOP and TCM reimbursement through SMAA
- LEA **does not complete** the TCM Certification Form
- LEA **does not submit interim claims** for TCM Services
- TCM moments **not coded to 2A** (coded to 8, 10, or 12)
- Other direct service moments **could be** coded to 2A
- Pool 1 practitioner costs **will be included on the LEA Program CRCS** for the applicable quarter(s)
- Pool 1 practitioner costs can be **included on Tab 5 of the SMAA Invoice** (Payroll Data)



## Option 3: Claiming TCM Through SMAA – Participant Pool 2

- **LEA does not complete** the TCM Certification Form
- TCM moments **not coded to 2A** (coded to 8, 10, or 12)
- **No LEA Program interim claiming**
- **No Pool 2 costs on the LEA Program CRCS**
- Pool 2 costs are **included on Tab 5 of the SMAA Invoice** (Payroll Data)



# Additional TCM Resources

- On August 12, 2020, [PPL #20-033](#) (“Notification of Reinstatement of Targeted Case Management Claiming for the LEA BOP”) was posted to the LEA Program PPL webpage
  - ✓ The [TCM Certification Form](#) is posted as an attachment to the PPL
- On September 3, 2020, DHCS provided an in-depth training on Targeted Case Management

**The presentation slides and FAQs from the September TCM Training are available on the [LEA Program training webpage](#)**



# QUESTIONS – SECTION 2

*While DHCS is compiling questions submitted via the Q&A function, a **practice session** will be initiated.*

**Any additional questions can be submitted to the LEA Program Inbox:**

**[LEA@DHCS.CA.gov](mailto:LEA@DHCS.CA.gov)**



# Section 3

# Retroactive Claiming

# Timeline





# TCM Under SPA 15-021 and SPA 16-001

**SPA 15-021** approved TCM services covered  
under an **IEP or IFSP**

*Effective back to **July 1, 2015***

**SPA 16-001** approved TCM services covered  
under an **IHSP**

*Effective back to **January 2, 2016***



# Retroactive Claiming for TCM Services in an IEP/IFSP

SPA 15-021 Retroactive claiming is ***optional*** for LEAs

- TCM services **pursuant to an IEP or IFSP** can be claimed back to **July 1, 2015**
- For LEAs that choose to retroactively claim SPA 15-021 services, **DHCS will establish a retroactive claiming window** in which LEAs can submit claims

***IBM is currently preparing the claims processing system to accept claims with SPA 15-021 codes/modifiers***

***The current estimate for the SPA 15-021 retroactive claiming window is January 2021 – December 2021***



# Retroactive Claiming for TCM Services in an IHSP

SPA 16-001 Retroactive claiming is ***optional*** for LEAs

- TCM services **pursuant to an IHSP** can be claimed back to **January 2, 2016**
- For LEAs that choose to retroactively claim for SPA 16-001 services, **DHCS will establish a retroactive claiming window** in which LEAs can submit claims

***IBM is currently preparing the claims processing system to accept claims for SPA 16-001 codes/rates***

***The current estimate for the SPA 16-001 claiming window to begin is February 2021 to December 2021***



# Reimbursement and Cost Settlement

All interim reimbursement received during retroactive claiming will **impact the respective fiscal year's CRCS**

LEAs that choose **not** to retroactively claim for services may **begin moving forward with final cost settlement**

- The RMTS percentage must still be published before finalizing the CRCS

**✘ *Note: To ensure no double billing of TCM services, LEAs may NOT claim historical TCM services for practitioners that were included in Pool 2 on prior SMAA invoices***



# TCM Retroactive Claiming Timeline

**DHCS will issue an e-blast and PPL**  
**when retroactive claims**  
**may be submitted**

(both SPA 15-021 and 16-001 services)

*New CPT codes, modifiers, and rates will also  
be published on the LEA Program website*



# QUESTIONS – SECTION 3

*While DHCS is compiling questions submitted via the Q&A function, a **practice session** will be initiated.*

**Any additional questions can be submitted to the LEA Program Inbox:**

**[LEA@DHCS.CA.gov](mailto:LEA@DHCS.CA.gov)**



# Section 4

## LEA Program Website Resources



# LEA Program Homepage

<https://www.dhcs.ca.gov/provgovpart/Pages/LEA.aspx>

LEA Medi-Cal Billing

dhcs.ca.gov/provgovpart/Pages/LEA.aspx

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## Local Educational Agency Medi-Cal Billing Option

The Local Educational Agency (LEA) Medi-Cal Billing Option Program reimburses LEAs (school districts, county offices of education, charter schools, community college districts, California State Universities and University of California campuses) the federal share of the maximum allowable rate for approved health-related services provided by qualified health service practitioners to Medi-Cal eligible students.

The [LEA Program Overview](#) outlines the program's goals and services, and LEAs new to the program will find valuable information on how to get started in the [Onboarding Handbook](#). For a detailed description of program requirements and program policy, please refer to the [LEA Provider Manual](#).

### Getting Started

- [Onboarding Handbook](#)
- [Internal Administrative Functions Chart](#)
- [Technical Assistance/Site Visit Request](#)

### Provider Manual & Policy

- [Provider Manual](#)
- [Program Guide](#)
- [Policy and Procedure Letters](#)

### Enrollment and Compliance

- [Program Enrollment and Compliance Documents](#)
- [Cost and Reimbursement Comparison Schedule](#)

### Program Information

- [FAQs \(will be updated by September 1, 2020\)](#)

### Resources & Tools

- [Glossary of Terms](#)
- [Nursing and Health Aide Services Treatment Form](#)
- [Referral and Prescription Requirements](#)
- [Terminology Crosswalk](#)
- [Tool Box](#)

### Publications & Bulletins

- [Advisory Workgroup Minutes](#)
- [Email Notifications](#)
- [FYI - For Your Information](#)
- [Provider Bulletins](#)
- [Reports to the Legislature](#)

### Claims Information & Data





# LEA Provider Manual

<https://www.dhcs.ca.gov/provgovpart/Pages/LEAProviderManual.aspx>

LEA Provider Manual

dhcs.ca.gov/provgovpart/Pages/LEAProviderManual.aspx

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## Medi-Cal/LEA Program Provider Manual

[Back to LEA Home Page](#)

### Medi-Cal Provider Manual:

- [Part 1 - Medi-Cal Program and Eligibility](#)
- [Part 2 - Billing and Policy](#)

### LEA Billing Option Program Sections of Medi-Cal Provider Manual:

- [LEA Provider Manual](#) - Searchable PDF updated February 13, 2019  
(Note that the PDF may not include the most recent published versions of all sections. The individual LEA Provider Manual sections below contain the most updated information.)

The following items link to various sections of the LEA Provider Manual (Word format):

- [LEA \(loc ed\)](#) - updated Sept 2018
- [LEA: A Provider's Guide \(loc ed a prov\)](#) - updated Oct 2018
- [LEA: Billing and Reimbursement Overview \(loc ed bil\)](#) - updated Sept 2018
- [LEA: Billing Codes and Reimbursement Rates \(loc ed bil cd\)](#) - updated Jan 2019
- [LEA: Billing Examples \(loc ed bil ex\)](#) - updated Jan 2019
- [LEA: Eligible Students \(loc ed elig\)](#) - updated Jan 2019
- [LEA: Individualized Plans Overview \(loc ed indiv\)](#) - updated Sept 2013
- [LEA: Rendering Practitioner Qualifications \(loc ed rend\)](#) - updated Sept 2013



# LEA Program PPLs

[https://www.dhcs.ca.gov/formsandpubs/Pages/LEA\\_BOP\\_PPLs.aspx](https://www.dhcs.ca.gov/formsandpubs/Pages/LEA_BOP_PPLs.aspx)

**LEA Medi-Cal Billing Option Program Policy and Procedure Letters**

[Back to LEA Home Page](#)

[Back to Policy and Procedure Letters Archive by Year](#)

| Number & Date                                  | Description   | Attachment   |
|--|---|--|
| <a href="#">PPL 20-051</a><br>November 5, 2020 | Notification for Stakeholders Participating in the Local Educational Agency Billing Option Program that the Department 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). |  |
| <a href="#">PPL 20-046</a><br>November 2, 2020 | Notification of New Requirements for the Quarter One Time Survey Participant (TSP) List For The Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) Under The Random Moment Time Survey (RMTS) Process   |  |
| <a href="#">PPL 20-045</a><br>October 26, 2020 | Notification of Approved California State Plan Amendment (SPA) 16-001 Regarding Targeted Case Management (TCM) Services for the Local Educational Agency Medi-Cal Billing Option Program (LEA BOP)  |  |
| <a href="#">PPL 20-043</a><br>October 12, 2020 | Notification of Random Moment Time Survey (RMTS) 85% Compliance Policy for School Based Medi-Cal Programs   | <a href="#">RMTS Compliance Threshold Attachment</a> |
| <a href="#">PPL 20-040</a><br>August 26, 2020  | Notification of Cost Settlement Process for Specialized Medical Transportation (SMT) in the Local Educational Agency Medi-Cal Billing Option Program (LEA BOP)  |  |



# RMTS Webpage

<https://www.dhcs.ca.gov/provgovpart/Pages/School-Based-RMTS.aspx>

School Based RMTS

dhcs.ca.gov/provgovpart/Pages/School-Based-RMTS.aspx

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**School Based Claiming Random Moment Time Survey**

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[Back to SMAA Home Page](#)

As of July 1, 2020, the Department of Health Care Services will use the Random Moment Time Survey (RMTS) methodology for both California School-Based Medi-Cal Programs: the Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) and the School-Based Medi-Cal Administrative Activities program (SMAA). The RMTS is a federally approved, web-based, and accepted statistical sampling method that will be used to capture the amount of time spent providing both administrative activities and direct services to Medi-Cal enrolled students.

This webpage contains information and resources to assist LEAs with the administration of RMTS for both school-based programs. For specific program information relating to either the LEA BOP or SMAA Program, please visit their respective websites listed at the top of the page.

**RMTS Manual and Policy**

- 2020 California RMTS Manual (under review)
- 2019 SMAA Manual - RMTS Sections:
  - [Section 5](#) - Activity Codes: Descriptions and Examples
  - [Section 6](#) - Time Survey
- [School-Based RMTS Index of Policy and Procedure Letters](#)

**Required Forms**

[TSP Equivalency Request](#)

[TSP Equivalency Request Practitioner Reference Sheet](#)

[TCM Certification Form](#)

**Resources**

[RMTS Fact Sheet](#)



# FY 2019-21 LEA Program Training Materials

<https://www.dhcs.ca.gov/2020-lea-program-training>

The screenshot shows a web browser window with the URL [dhcs.ca.gov/2020-lea-program-training](https://www.dhcs.ca.gov/2020-lea-program-training). The page header includes the DHCS logo and navigation links for Home, About DHCS, and Translate. A secondary navigation bar contains icons for Services, Individuals, Providers & Partners, Laws & Regulations, Data & Statistics, Forms & Publications, and Search. The main content area is titled "2020-21 LEA BOP Training" and includes two backlinks: [Back to LEA BOP Training Page](#) and [Back to LEA BOP Homepage](#). A prominent purple heading states: "All training materials are available per request until posted by October 30th, 2020". Below this, a note asks users to email [lea@dhcs.ca.gov](mailto:lea@dhcs.ca.gov) for requests. A list of training materials follows, with two items highlighted by purple boxes: [February 12, 2020 SPA 15-021 Overview Training Slides](#) and [May 14, 2020 SPA 15-021 Implementation Training Slides](#). Other items include SPA 15-021 Overview Training FAQs, March 5, 2020 SPA 15-021 New Services Training Slides, New Services Training FAQs, March 10, 2020 Vendor Meeting Slides, Vendor Meeting FAQs (will be published by 11/30/2020), April 8, 2020 Specialized Medical Transportation and Targeted Case Management Training Slides, Specialized Medical Transportation and Targeted Case Management Training FAQs (will be published by 11/30/2020), SPA 15-021 Implementation Training FAQs, and June 3, 2020 Cost Reimbursement and Comparison Report Training Slides.



# CRCS Resources and Materials

[https://www.dhcs.ca.gov/provgovpart/Pages/CRCS\\_Forms.aspx](https://www.dhcs.ca.gov/provgovpart/Pages/CRCS_Forms.aspx)

CRCS Forms

dhcs.ca.gov/provgovpart/Pages/CRCS\_Forms.aspx

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## LEA Program Cost and Reimbursement Comparison Schedule

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### Cost and Reimbursement Comparison Schedule (CRCS) Resources

- Includes CRCS reports for Fiscal Years 2009-10 and 2010-11 (note not all audited CRCS reports are included) and includes a [Summary of Audited Impact on Program Expenditures](#).
- [CRCS Documentation Training](#).
- [CRCS FAQs](#)
- [CRCS Flow Chart](#)
- [CRCS Submission Checklist](#)
- [California School Accounting Manual \(CSAM\)](#)
- [LEA Indirect Cost Rate Data](#)
- [Standardized Accounting Code Structure \(SACS\) Guidance](#)
- CRCS Questions: [LEA.CRCS.Questions@DHCS.CA.GOV](mailto:LEA.CRCS.Questions@DHCS.CA.GOV)
- CRCS Submissions: [LEA.CRCS.Submission@DHCS.CA.GOV](mailto:LEA.CRCS.Submission@DHCS.CA.GOV)

### CRCS Forms

Below are CRCS forms for Fiscal Years 2009-10 through 2018-19. Note that the link to the CRCS and Certification of Zero Reimbursements for Fiscal Year 2013-14 is currently unavailable - please contact the LEA Program directly at [lea@dhcs.ca.gov](mailto:lea@dhcs.ca.gov) to request those documents.

[CRCS for Fiscal Year 2018-19](#)  
Included Certification of Zero Reimbursements

[CRCS for Fiscal Year 2017-18](#)  
Includes Certification of Zero Reimbursements



# CRCS MER Information

<https://www.dhcs.ca.gov/provgovpart/Pages/CRCS-for-Fiscal-Year-2018-19.aspx>

CRCS for Fiscal Year 2018-19

dhcs.ca.gov/provgovpart/Pages/CRCS-for-Fiscal-Year-2018-19.aspx

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## Cost and Reimbursement Comparison Schedules for FY 2018-19

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### Submission Deadline

The submission deadline for the Cost and Reimbursement Comparison Schedule (CRCS) for Fiscal Year 2018-19 is **November 30, 2020**.

### Mandatory CRCS Requirement:

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.

### LEA Annual Reimbursement Report:

- [FY 2018-19 Annual Reimbursement Report \(Updated 10/30/2020\)](#)

**Note:** The LEA Annual Reimbursement Report will assist LEAs to complete CRCS Worksheet E. LEAs should verify the reasonableness between your internal accounting system and the LEA Annual Reimbursement Report and accurately input encounters, units and reimbursement information for each service type on your CRCS form. Potential discrepancies between the LEA Annual Reimbursement Report and your internal system numbers should be documented to support the numbers you input on the CRCS forms and to provide an accounting documentation trail for review and audit.

### LEA Medi-Cal Eligibility Ratio (MER) Calculation:

- [FY 2018-19 Beneficiary Count \(used only if your LEA selects Option 1 below\)](#)

**Note:** For FY 2018-19, two options are provided on the Allocation Statistics Worksheet of the CRCS to allow LEAs flexibility regarding how they determine the FY 2018-19 Medi-Cal Eligibility Ratio. LEAs must select **either** option 1 or option 2, as detailed below:

### Option 1 (Based on LEA Eligibility Data):

**Numerator:** *Number of Medi-Cal Eligible Students in the LEA*



# Claims Processing Webpage

<https://www.dhcs.ca.gov/provgovpart/Pages/LEAClaimsProcessing.aspx>

The screenshot shows a web browser window with the URL [dhcs.ca.gov/provgovpart/Pages/LEAClaimsProcessing.aspx](https://www.dhcs.ca.gov/provgovpart/Pages/LEAClaimsProcessing.aspx) in the address bar. The page header includes the DHCS logo and navigation links for Home, About DHCS, and Translate. A secondary navigation bar contains icons for Services, Individuals, Providers & Partners, Laws & Regulations, Data & Statistics, Forms & Publications, and Search. The main content area is titled "LEA Program Claims Processing" and features a "Back to LEA Home Page" link. Two primary menu items are highlighted with red boxes: "Rate Inflation" and "EPC Letters". Under "Rate Inflation", there are links for "FY 2019-20 Rebased Rates", "FY 2018-19 Inflated Rates (inc FY 2017-18)", and "FY 2016-17 Inflated Rates". Under "EPC Letters", there are links for "Retroactive Rate Adjustments for LEA Services (6-5-18)", "Resubmission of Erroneously Denied LEA Claims (9-15-17)", "Resubmission of Erroneously Denied LEA Claims (8-17-17)", "Resubmission of Erroneously Denied LEA Claims (7-26-17)", "Adjustment of Claims for Code 99401 (11-9-16)", "Void and Resubmission of TCM LEA Claims (5-27-16)", and "Retroactive Rate Adjustments for LEA Services (3-2-16)". A third menu item, "Annual Accounting of Funds Summary Report", is also visible with links for "FY 2016-17 Annual Accounting of Funds Summary Report", "FY 2015-16 Annual Accounting of Funds Summary Report", and "FY 2014-15 Annual Accounting of Funds Summary Report". The footer contains a "Non-Discrimination Policy and Language Access" section, a list of languages (العربية, বাংলা, 藏語, 繁體中文, فارسی, हिंदी, Hmoob, 日本語, 한국어, བོད་སྐད་ཀྱི་སྐད་ཀྱི་སྐད་, Русский, Español, Tagalog, ภาษาไทย, Tiếng Việt), and links for "About Us", "Careers", "Conditions of Use", "Privacy Policy", "Contact Us", and "Accessibility Certification". The copyright notice is "Copyright © 2020 State of California".

**LEA Program Claims Processing**

[Back to LEA Home Page](#)

**Rate Inflation**

- [FY 2019-20 Rebased Rates](#)
- [FY 2018-19 Inflated Rates \(inc FY 2017-18\)](#)
- [FY 2016-17 Inflated Rates](#)

**Annual Accounting of Funds Summary Report**

- [FY 2016-17 Annual Accounting of Funds Summary Report](#)
- [FY 2015-16 Annual Accounting of Funds Summary Report](#)
- [FY 2014-15 Annual Accounting of Funds Summary Report](#)

**EPC Letters**

- [Retroactive Rate Adjustments for LEA Services \(6-5-18\)](#)
- [Resubmission of Erroneously Denied LEA Claims \(9-15-17\)](#)
- [Resubmission of Erroneously Denied LEA Claims \(8-17-17\)](#)
- [Resubmission of Erroneously Denied LEA Claims \(7-26-17\)](#)
- [Adjustment of Claims for Code 99401 \(11-9-16\)](#)
- [Void and Resubmission of TCM LEA Claims \(5-27-16\)](#)
- [Retroactive Rate Adjustments for LEA Services \(3-2-16\)](#)

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**Non-Discrimination Policy and Language Access**

Access Health Care Language Assistance Services (SB 223)

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# Contact Information and Program Related Links

<https://www.dhcs.ca.gov/provgovpart/Pages/LEA.aspx>

The screenshot shows the DHCS website interface. The browser address bar is highlighted with a purple box, showing the URL [dhcs.ca.gov/provgovpart/Pages/LEA.aspx](https://www.dhcs.ca.gov/provgovpart/Pages/LEA.aspx). The website header includes the DHCS logo and navigation links: Home, About DHCS, Translate, Services, Individuals, Providers & Partners, Laws & Regulations, Data & Statistics, Forms & Publications, and Search. The main content area is organized into several sections:

- Provider Manual & Policy**
  - Provider Manual
  - Program Guide
  - Policy and Procedure Letters
- Enrollment and Compliance**
  - Program Enrollment and Compliance Documents
  - Cost and Reimbursement Comparison Schedule
- Program Information**
  - FAQs (will be updated by September 1, 2020)
  - School Based Claiming Random Moment Time Survey
  - Free Care Overview
  - LEA Program Overview
  - LEA BOP State Plan Overview
  - Targeted Case Management Billing
- Manuals & Training**
  - LEA Program Training
  - LEA CRCS Documentation Training
  - ICD-10 General Equivalence Mapping
  - Ordering, Referring or Prescribing Guide
  - Transportation Billing Guide
  - SPA 15-021 Implementation Training
- Terminology Crosswalk**
  - Terminology Crosswalk
  - Tool Box
- Publications & Bulletins**
  - Advisory Workgroup Minutes
  - Email Notifications
  - FYI - For Your Information
  - Provider Bulletins
  - Reports to the Legislature
- Claims Information & Data**
  - Claims Processing
  - Paid Claims Data Reports
- Legislation & State Plans**
  - California Laws and Regulations
  - Federal Laws and Regulations
  - State Plans
- Contact Information & Program Related Links** (highlighted with a purple box)
  - General Inquiries (LEA@dhcs.ca.gov)
  - Email Subscription Service
  - Update Your LEA Contact Information
  - Related Programs

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# QUESTIONS – SECTION 4

*While DHCS is compiling questions submitted via the Q&A function, a **practice session** will be initiated.*

**Any additional questions can be submitted to the LEA Program Inbox:**

**[LEA@DHCS.CA.gov](mailto:LEA@DHCS.CA.gov)**



# Section 5

## LEA Inbox Frequently Asked Questions (FAQs)



# LEA Inbox Reminders

- Very large influx of questions recently
- Once current backlog is cleared, LGFD's goal is to respond to emails within 5-10 business days
- Direct questions to the appropriate inbox:

| Type of Questions                                   | Email  |
|---|--|
| Program Questions                                   | <a href="mailto:LEA@DHCS.CA.gov">LEA@DHCS.CA.gov</a>                                 |
| LEA Document Submission                             | <a href="mailto:LEA.AnnualReport@dhcs.ca.gov">LEA.AnnualReport@dhcs.ca.gov</a>       |
| RMTS Questions (including TSP equivalency requests) | <a href="mailto:RMTS@DHCS.CA.gov">RMTS@DHCS.CA.gov</a>                               |
| CRCS Questions                                      | <a href="mailto:LEA.CRCS.Questions@DHCS.CA.gov">LEA.CRCS.Questions@DHCS.CA.gov</a>   |
| CRCS Submissions                                    | <a href="mailto:LEA.CRCS.Submission@DHCS.CA.gov">LEA.CRCS.Submission@DHCS.CA.gov</a> |

- **Do not CC all LEA inboxes or LGFD staff – this leads to more work for our limited staff!**



## FAQs: CRCS

For FY 18-19, our district has \$80 more dollars in reimbursement than the published Annual Reimbursement Report (ARR). Are you going to issue a corrected report?

*The ARR is the best estimate of interim reimbursement at the time DHCS posts the report. DHCS is aware that the published ARR will require updates in the future for two main reasons:*

- (1) DHCS is currently running EPCs that may impact FY 18-19 total reimbursement;*
- (2) updates will be needed to account for services billed during the retroactive claiming period (the period wherein LEAs will submit claims back to the SPA's effective date of July 1, 2015).*

*The report will be re-run, but not until LEAs are getting ready to submit the **amended** FY 18-19 CRCS in early 2023.*



# Medicaid Eligibility Rate (MER)

Does each LEA gather their MER data or is there a process that is run through CDE for obtaining the MER?

**LEA Medi-Cal Eligibility Ratio (MER) Calculation:**

- [FY 2018-19 Beneficiary Count \(used only if your LEA selects Option 1 below\)](#)

**Note:** For FY 2018-19, two options are provided on the Allocation Statistics Worksheet of the CRCS to allow LEAs flexibility regarding how they determine the FY 2018-19 Medi-Cal Eligibility Ratio. LEAs must select **either** option 1 or option 2, as detailed below:

**Option 1 (Based on LEA Eligibility Data):**

**Numerator: Number of Medi-Cal Eligible Students in the LEA**  
Report the unduplicated count of Medi-Cal eligible and enrolled students as of any date in FY 2018-19. The number of Medi-Cal eligible students will be determined based on the Medi-Cal Data Tape Match, used to check Medi-Cal student eligibility. **If your LEA did not retain any Medi-Cal Data Tape Match results from FY 2018-19, you may use the unduplicated beneficiary count based on paid claims for your NPI for dates of service within FY 2018-19, using the above Excel file.**

**Denominator: Total Number of Students Enrolled in the LEA**  
Report the unduplicated count of all students enrolled in the LEA. LEA enrollment by fiscal year is available on the [California Department of Education's Dataquest Site](#).  
Districts may also have enrollment figures within their student information systems.

**Option 2 (Based on the SMAA Medi-Cal Eligibility Ratios in FY 2018-19):**  
Report the average Medi-Cal Eligibility Rate based on amounts reported on your LEA's quarterly SMAA invoices for FY 2018-19. If your LEA elects this option, a simple average of the figures reported quarterly in the FY 18-19 SMAA invoices may be input into the "Option 2" cell on the Allocation Statistics Worksheet. The Medi-Cal Eligibility Rate information is found on Tab 2, Column C, Row 13 of the SMAA Invoice. Note that this option is only available to LEAs that participated in SMAA in FY 2018-19. If you have selected to use Option 2, you do not need any data in the above Excel file.

*Each LEA is responsible for obtaining data to calculate their MER for the CRCS. The [CRCS webpage](#) on the LEA website contains instructions on the two options for determining the MER.*



## FAQs: MER

Our LEA did not participate in SMAA in FY18-19 so we are limited to “Option 1” to calculate the MER. However, using the unduplicated beneficiary count for the numerator (based on paid claims data from the website), our Medi-Cal percentage is only 3% (it should be about 30%) What should we do?

*LGFD is working internally with the group that maintains historical eligibility data. There is a possibility that if your LEA can provide a file with **first name, last name and date of birth for all enrolled students in FY 18-19**, DHCS can check eligibility data for this period. If your LEA is interested in this approach, please reach out to our contractor, Guidehouse, at [LEA@Guidehouse.com](mailto:LEA@Guidehouse.com).*

**DO NOT transfer data to Guidehouse**; you will receive instructions on the process once we know your LEA is interested in this approach, and able to provide the three required fields.



# FAQs: Trainings

## Where do I register for trainings?

*It is not necessary for LEAs to register for trainings. DHCS will send an eblast with the training information and LEAs may use this information at the time of the training to join the WebEx.*

## How do I get copies of the training slides?

*The slides are posted to the LEA Program website after trainings are conducted (<https://www.dhcs.ca.gov/2020-lea-program-training>). DHCS also posts the recording link and FAQs to each training. Keep in mind that DHCS must ensure that training documents are ADA compliant and it may take some time to get materials posted.*



## FAQs: Covered Services

Will schools be able to bill Medi-Cal for the reimbursement of the COVID-19 tests they will be administering?

*No, administration of COVID-19 tests will not be a billable LEA Program service.*

If an assessment takes multiple meetings with a student, for example a Monday, Wednesday and Thursday, can the transportation for those 3 days also be billed?

*If specialized medical transportation services are in the IEP and the assessment takes three days to administer, the transportation would be allowable for all three days. This assumes that the student is involved in the assessment all three days, versus being involved in the assessment on day 1 and then the practitioner writing the report on the 2nd/3rd day. The LEA must be able to substantiate the student's involvement in the assessment for all three days, in the event of audit.*





## FAQs: Practitioners

Are BCBA's (Board Certified Behavior Analyst) qualified to bill LEA BOP psychosocial status assessments and counseling services and / or bill TCM services ?

*No, BCBA's are not qualified LEA BOP rendering practitioners.*

Does a Speech-Language Pathologist (SLP) have to be credentialed to participate?

*Please see the [LEA Provider Manual](#), which includes detailed requirements. For speech services, qualified practitioners are found in loc ed serv spe. Both licensed and credentialed SLPs may provide services, although some credentialed staff require supervision in order to bill Medi-Cal for services.*



## FAQs: Supervision

What are the supervision requirements for licensed mental health providers who do not hold a Pupil Personnel Services (PPS) Credential?

*This requirement is imposed by the California Department of Education (CDE). Please see the attached link for additional detail on this subject, including details on what the term "supervision" means in this context:*

<https://www.cde.ca.gov/sp/se/ac/reqsecuresrvcs.asp>.



## FAQs: Referrals

Our billing company has started using DocuSign to generate the referral form for counseling services. The date is auto-populated with the first day of service rather than the date that I am reviewing the information. Should I be dating the referral document on the day that I review the information? I want to make sure I am proceeding properly.

*The referral should be dated on the day that the authorization is granted, and not backdated. Medi-Cal services require authorization from a health service practitioner in order to be billed to Medi-Cal. Services provided before that authorization is granted may not be billed.*



# FAQs: Ordering, Referring, Prescribing (ORP) Practitioners

Regarding the new SPA approved treatment services, will guidance be sent out as to who is the qualified ORP for the new services?  
(Orientation/Mobility, Respiratory Therapy, etc.)

*The slides from the [New Services training](#), which took place on March 5, 2020, include information on which practitioners are qualified to prescribe, refer or recommend for the new treatment services. Please refer to the March 5 slides in Section 3, which include the authorized practitioner(s) for each new service. In addition, DHCS published [PPL#20-039](#), which also includes detail on the new covered services.*



# QUESTIONS – SECTION 5

*While DHCS is compiling questions submitted via the Q&A function, a **practice session** will be initiated.*

**Any additional questions can be submitted to the LEA Program Inbox:**

**[LEA@DHCS.CA.gov](mailto:LEA@DHCS.CA.gov)**