

**REPORT ON THE
LOCAL EDUCATIONAL AGENCY
MEDI-CAL COST AND REIMBURSEMENT
COMPARISON SCHEDULE**

**MURRIETA VALLEY UNIFIED SCHOOL DISTRICT
MURRIETA, CALIFORNIA
PROVIDER NUMBER: SS3375200
NATIONAL PROVIDER IDENTIFIER (NPI): 1962698845**

**FISCAL PERIOD ENDED
JUNE 30, 2009**

**Special Programs Section
Financial Audits Branch
Audits and Investigations
Department of Health Care Services**

**Section Chief: Alan J. Eng
Audit Supervisor: Martin Alvarez
Auditor: Ruixia Howe**



TOBY DOUGLAS
DIRECTOR

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



EDMUND G. BROWN JR.
GOVERNOR

April 15, 2014

James Schneider
Program Specialist
Murrieta Valley Unified School District
41870 McAlby Court
Murrieta, CA 92562

MURRIETA VALLEY UNIFIED SCHOOL DISTRICT
PROVIDER NUMBER SS3375200
NATIONAL PROVIDER IDENTIFIER 1962698845
FISCAL PERIOD ENDED JUNE 30, 2009

We have reviewed the Local Educational Agency's (LEA) Medi-Cal Cost and Reimbursement Comparison Schedule (CRCS) for the above-referenced fiscal period. Our minimal review was made under the authority of Section 14170 of the Welfare and Institutions Code and was limited to a review of the CRCS and the State's fiscal intermediary's paid claims data.

In our opinion, the audited settlement for the fiscal period due the State in the amount of \$266,806, and the audited costs represents a proper determination in accordance with Medi-Cal reimbursement principles.

This audit report includes the:

1. Summary of Findings and Supporting Schedules
2. Audit Adjustments

The audited settlement will be incorporated into a Statement(s) of Account Status, which may reflect tentative retroactive adjustment determinations, payments from the Provider, and other financial transactions initiated by the Department. The Statement(s) of Account Status will be forwarded to the Provider by the State's fiscal intermediary. Instructions regarding payment will be included with the Statement(s) of Account Status.

Notwithstanding this audit report, overpayments to the provider are subject to recovery pursuant to Section 51458.1, Article 6 of Division 3, Title 22, California Code of Regulations.

James Schneider
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April 15, 2014

If you disagree with the decision of the Department, you may appeal by writing to:

Chief
Office of Administrative Hearings and Appeals
1029 J Street, Suite 200, MS 0017
Sacramento, CA 95814
(916) 322-5603

The written notice of disagreement must be received by the Department within 60 calendar days from the day you receive this letter. A copy of this notice should be sent to:

United States Postal Service (USPS)

Assistant Chief Counsel
Department of Health Care Services
Office of Legal Services
MS 0010
PO Box 997413
Sacramento, CA 95899-7413

Courier (UPS, FedEx, etc.)

Assistant Chief Counsel
Department of Health Care Services
Office of Legal Services
MS 0010
1501 Capitol Avenue, Suite 71.5001
Sacramento, CA 95814-5005
(916) 440-7700

The procedures that govern an appeal are contained in Welfare and Institutions Code, Section 14171, and California Code of Regulations, Title 22, Section 51016, et seq.

If you have questions regarding this report, you may call the Special Programs Section at (916) 327-2666.

Original Signed By

Alan J. Eng, Chief
Special Programs Section
Financial Audits Branch

Certified

Schedule 1 - Summary of Findings

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

Reported Total Net Overpayment/(Underpayment) for All LEA Services	\$ 201,593
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1 Audited Medi-Cal Maximum Reimbursable for Services Documented in an IEP or IFSP (7/1/08-9/30/08)	\$ 110,175
2 Audited Medi-Cal Maximum Reimbursable for Services Documented in an IEP or IFSP (10/1/08-6/30/09)	\$ 665,189
3 Audited Medi-Cal Maximum Reimbursable for Services Not documented in an IEP or IFSP (7/1/08-9/30/08)	\$ -
4 Audited Medi-Cal Maximum Reimbursable for Services Not documented in an IEP or IFSP (10/1/08-6/30/09)	\$ 104
Total Audited Maximum Reimbursement for Services	\$ 775,468

5 Audited Interim Payment for Services Documented in an IEP or IFSP (7/1/08-9/30/08)	\$ 148,272
6 Audited Interim Payment for Services Documented in an IEP or IFSP (10/1/08-6/30/09)	\$ 893,842
7 Audited Interim Payment for Services Not Documented in an IEP or IFSP (7/1/08-9/30/08)	\$ -
8 Audited Interim Payment for Services Not Documented in an IEP or IFSP (10/1/08-6/30/09)	\$ 160
Total Interim Payment for LEA Services	\$ 1,042,274

9 Recovery of LEA payments for Unknown Modifiers (Adj)	
10 Other payment recovery adjustments (Adj)	
11 Audited Amount Due Provider (State)	\$ (266,806)

Schedule 2 - Summary of Services Documented in an IEP or IFSP
Dates of Service 7/1/08-9/30/08

LEA Provider Name:
 MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
 JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
 1962698845

(Object Code)	Reported Total Personnel Costs	Reported	Reported Cost	Audited Total Personnel Costs	Audited Percent of	Calculated Cost of	Excess of	Audited Cost of
		Percent of Time Providing LEA Services Documented in an IEP or IFSP	of Providing LEA Services Documented in an IEP or IFSP		Time Providing LEA Services Documented in an IEP or IFSP	Cost of Providing LEA Services Documented in an IEP or IFSP	calculated LEA costs over audited personnel expenditures	
Practitioner Type	A	B	A*B=C	D	E	D*E=F	G	F-G=H
				(Schedule 4)	(Schedule 8)			
1. Psychologists	1,170,626	0.58%	6,816	1,170,626	0.47%	5,545	0	5,545
2. Social Workers	1,357,133	0	-	1,357,133	0	-	0	-
3. Counselors	-	0	-	-	0	-	0	-
4. School Nurses	445,473	0.08%	344	445,473	0.08%	344	0	344
5. Licensed Vocational Nurses	84,027	0	-	84,027	0	-	0	-
6. Trained Health Care Aides	2,815,680	6.77%	190,760	2,815,680	6.77%	190,760	0	190,760
7. Speech-Language Pathologists	1,883,982	1.55%	29,261	1,883,982	0.83%	15,639	0	15,639
8. Audiologists	7,634	1.18%	90	7,634	1.18%	90	0	90
9. Physical Therapists	315,795	0.15%	475	315,795	0.15%	475	0	475
10. Occupational Therapists	313,211	0.13%	416	313,211	0.13%	416	0	416
11. Physicians/Psychiatrists	-	0	-	-	0	-	0	-

a. Service Costs (Sum, F1 - F11)	\$ 228,162	Audited	\$ 213,270
b. Service costs excluded from indirect cost rate application	\$ -		\$ -
c. Service costs included in indirect cost rate application (a-b)	\$ 228,162		\$ 213,270
d. Indirect Cost Rate (Schedule 7)	3.32%		3.32%
e. Indirect Costs (c * d)	\$ 7,575		\$ 7,081
f. Total Service Costs (a + c)	\$ 235,737		\$ 220,351
g. Federal Medical Assistance Percentage (FMAP)	50.00%		50.00%
h. Medi-Cal Maximum Reimbursable (f * g)	\$ 117,868		\$ 110,175
i. Interim Payment for services documented in an IEP (Schedule 10)	\$ 148,272		\$ 148,272
j. Overpayment/(Underpayment) (i - h)	\$ 30,404		\$ 38,097

**Schedule 2 - Summary of Services Documented in an IEP or IFSP
Dates of Service 10/1/08-6/30/09**

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

<i>(Object Code)</i>	Reported Total Personnel Costs	Reported Percent of Time Providing LEA Services Documented in an IEP or IFSP	Reported Cost of Providing LEA Services Documented in an IEP or IFSP	Audited Total Personnel Costs	Audited Percent of Time Providing LEA Services Documented in an IEP or IFSP	Calculated Cost of Providing LEA Services Documented in an IEP or IFSP	Excess of calculated LEA costs over audited personnel expenditures	Audited Cost of Services Documented in an IEP or IFSP
<u>Practitioner Type</u>	<u>A</u>	<u>B</u>	<u>A*B=C</u>	<u>D</u>	<u>E</u>	<u>D*E=F</u>	<u>G</u>	<u>F-G=H</u>
				(Schedule 4)	(Schedule 8)			
1. Psychologists	1,170,626	3.93%	46,056	1,170,626	3.45%	40,408	0	40,408
2. Social Workers	1,357,133	0	-	1,357,133	0	-	0	-
3. Counselors	-	0	-	-	0	-	0	-
4. School Nurses	445,473	1.11%	4,934	445,473	1.11%	4,934	0	4,934
5. Licensed Vocational Nurses	84,027	15.87%	13,332	84,027	15.87%	13,332	0	13,332
6. Trained Health Care Aides	2,815,680	31.57%	889,038	2,815,680	31.57%	889,038	0	889,038
7. Speech-Language Pathologists	1,883,982	9.40%	177,170	1,883,982	4.98%	93,853	0	93,853
8. Audiologists	7,634	2.35%	180	7,634	2.35%	180	0	180
9. Physical Therapists	315,795	0.35%	1,109	315,795	0.35%	1,109	0	1,109
10. Occupational Therapists	313,211	0.79%	2,469	313,211	0.79%	2,469	0	2,469
11. Physicians/Psychiatrists	-	0	-	-	0	-	0	-
			Reported					Audited
a. Service Costs (Sum, F1 - F11)			\$ 1,134,287					\$ 1,045,323
b. Service costs excluded from indirect cost rate application			\$ -					\$ -
c. Service costs included in indirect cost rate application (a-b)			\$ 1,134,287					\$ 1,045,323
d. Indirect Cost Rate (Schedule 7)			3.32%					3.32%
e. Indirect Costs (c * d)			\$ 37,658					\$ 34,705
f. Total Service Costs (a + c)			\$ 1,171,945					\$ 1,080,028
g. Federal Medical Assistance Percentage (FMAP)			61.59%					61.59%
h. Medi-Cal Maximum Reimbursable (f * g)			\$ 721,801					\$ 665,189
i. Interim Payment for services documented in an IEP (Schedule 10.1)			\$ 892,979					\$ 893,842
j. Overpayment/(Underpayment) (i - h)			\$ 171,178					\$ 228,653

Schedule 3 - Summary of Services Not Documented in an IEP or IFSP
Dates of Service 7/1/08-9/30/08

LEA Provider Name:
 MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
 JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
 1962698845

(Object Code)	Reported	Reported	Reported Cost of	Audited Total	Audited Percent of	Calculated Cost of	Excess of	Audited Cost of
	Total	Percent of Time	Providing LEA		Time Providing LEA	Providing LEA	calculated LEA	Providing LEA
Practitioner Type	Personnel	Providing LEA	Services Not	Personnel Costs	Services Not	Services Not	costs over	Services Not
	Costs	Documented in	an IEP or IFSP		Documented in an	Documented in an	audited	Documented in
		an IEP or IFSP	an IEP or IFSP		IEP or IFSP	IEP or IFSP	personnel	an IEP or IFSP
	A	B	A*B=C	D	E	D*E=F	G	F-G=H
				(Schedule 4)	(Schedule 8)			
1. Psychologists	1,170,626	0	-	1,170,626	0	-	0	-
2. Social Workers	1,357,133	0	-	1,357,133	0	-	0	-
3. Counselors	-	0	-	-	0	-	0	-
4. School Nurses	445,473	0	-	445,473	0	-	0	-
5. Licensed Vocational Nurses	84,027	0	-	84,027	0	-	0	-
6. Trained Health Care Aides	2,815,680	0	-	2,815,680	0	-	0	-
7. Speech-Language Pathologists	1,883,982	0	-	1,883,982	0	-	0	-
8. Audiologists	7,634	0	-	7,634	0	-	0	-
9. Physical Therapists	315,795	0	-	315,795	0	-	0	-
10. Occupational Therapists	313,211	0	-	313,211	0	-	0	-
11. Physicians/Psychiatrists	-	0	-	-	0	-	0	-
12. Optometrists	17,056	0	-	17,056	0	-	0	-
13. Audiometrists	-	0	-	-	0	-	0	-
			Reported					Audited
a. Service Costs (Sum, F1 - F11)			\$ -					\$ -
b. Service costs excluded from indirect cost rate application			\$ -					\$ -
c. Service costs included in indirect cost rate application (a-b)			\$ -					\$ -
d. Indirect Cost Rate (Schedule 7)			3.32%					3.32%
e. Indirect Costs (c * d)			\$ -					\$ -
f. Total Service Costs (a + c)			\$ -					\$ -
g. Federal Medical Assistance Percentage (FMAP)			50.00%					50.00%
h. Medi-Cal Maximum Reimbursable (f * g)			\$ -					\$ -
i. Interim Payment for services not documented in an IEP (schedule 11)			\$ -					\$ -
j. Overpayment/(Underpayment) (i - h)			\$ -					\$ -

Dates of Service 10/1/08-6/30/09

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

(Object Code)	Reported Total Personnel Costs	Reported Percent of Time Providing LEA Services Not Documented in an IEP or IFSP	Reported Cost of Providing LEA Services Not Documented in an IEP or IFSP	Audited Total Personnel Costs	Audited Percent of Time Providing LEA Services Not Documented in an IEP or IFSP	Calculated Cost of Providing LEA Services Not Documented in an IEP or IFSP	Excess of calculated LEA costs over audited personnel expenditures	Audited Cost of Providing LEA Services Not Documented in an IEP or IFSP	
									A
1. Psychologists	1,170,626	0	-	1,170,626	0	-	0	-	
2. Social Workers	1,357,133	0	-	1,357,133	0	-	0	-	
3. Counselors	-	0	-	-	0	-	0	-	
4. School Nurses	445,473	0	-	445,473	0	-	0	-	
5. Licensed Vocational Nurses	84,027	0	-	84,027	0	-	0	-	
6. Trained Health Care Aides	2,815,680	0	-	2,815,680	0	-	0	-	
7. Speech-Language Pathologists	1,883,982	0.01%	163	1,883,982	0.01%	163	0	163	
8. Audiologists	7,634	0	-	7,634	0	-	0	-	
9. Physical Therapists	315,795	0	-	315,795	0	-	0	-	
10. Occupational Therapists	313,211	0	-	313,211	0	-	0	-	
11. Physicians/Psychiatrists	-	0	-	-	0	-	0	-	
12. Optometrists	17,056	0	-	17,056	0	-	0	-	
13. Audiometrists	-	0	-	-	0	-	0	-	
			Reported				Audited		
a.	Service Costs (Sum, F1 - F11)		\$	163				\$	163
b.	Service costs excluded from indirect cost rate application		\$	-				\$	-
c.	Service costs included in indirect cost rate application (a-b)		\$	163				\$	163
d.	Indirect Cost Rate (Schedule 7)			3.32%					3.32%
e.	Indirect Costs (c * d)		\$	5				\$	5
f.	Total Service Costs (a + c)		\$	168				\$	168
g.	Federal Medical Assistance Percentage (FMAP)			61.59%					61.59%
h.	Medi-Cal Maximum Reimbursable (f * g)		\$	104				\$	104
i.	Interim Payment for services not documented in an IEP (schedule 11.1)		\$	115				\$	160
j.	Overpayment/(Underpayment) (i - h)		\$	11				\$	56

Schedule 4 - Summary of Audited Personnel Costs

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

<i>(Object Code)</i>	Salary Expenditures <i>(1000-2999)</i>	Benefit Expenditures <i>(3000-3999)</i>	Other Costs	Total Personnel Costs
<u>Practitioner Type</u>	<u>A</u>	<u>B</u>	<u>C</u>	<u>D = A+B+C</u>
	(From Schedule 5)	(From Schedule 5)	(From Schedule 6)	
1. Psychologists	971,537	188,391	10,698	1,170,626
2. Social Workers	-	-	1,357,133	1,357,133
3. Counselors	-	-	-	-
4. School Nurses	373,689	71,784	-	445,473
5. Licensed Vocational Nurses	-	-	84,027	84,027
6. Trained Health Care Aides	1,918,808	896,872	-	2,815,680
7. Speech-Language Pathologists	1,822,331	42,504	19,147	1,883,982
8. Audiologists	-	-	7,634	7,634
9. Physical Therapists	245,831	69,964	-	315,795
10. Occupational Therapists	217,377	90,322	5,512	313,211
11. Physicians/Psychiatrists	-	-	-	-
12. Optometrists	-	-	17,056	17,056
13. Audiometrists	-	-	-	-
				(Schedule 2,3)

Schedule 5 - Salary Expenditures

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

<i>(Object Code)</i>	Reported Salary Expenditures <i>(1000-2999)</i>	Audit Adjs	Audited Salary Expenditures	Benefit Expenditures <i>(3000-3999)</i>	Audit Adjs	Audited Benefit Expenditures
<u>Practitioner Type</u>	<u>A</u>	<u>()</u>		<u>B</u>	<u>()</u>	
1. Psychologists	971,537		971,537	188,391		188,391
2. Social Workers			-			-
3. Counselors			-			-
4. School Nurses	373,689		373,689	71,784		71,784
5. Licensed Vocational Nurses			-			-
6. Trained Health Care Aides	1,918,808		1,918,808	896,872		896,872
7. Speech-Language Pathologists	1,822,331		1,822,331	42,504		42,504
8. Audiologists			-			-
9. Physical Therapists	245,831		245,831	69,964		69,964
10. Occupational Therapists	217,377		217,377	90,322		90,322
11. Physicians/Psychiatrists			-			-
12. Optometrists			-			-
13. Audiometrists			-			-
			(To Schedule 4)			(To Schedule 4)

Schedule 6 - Other Costs

LEA Provider Name:

MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:

JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:

1962698845

Reported Practitioner Type	Materials, Supplies and Reference Materials Expenditures (4200-4300)	Non-capitalized Equipment Expenditures (4400)	Travel and Conference Expenditures (5200)	Dues and Membership Expenditures (5300)	Contractor Costs (5800)	Contractor Costs (5100)	Communications Expenditures (5900)	Total Reported Other Costs H = Sum of A-G
	A	B	C	D	E	F	G	
1. Psychologists	10,378		55				265	10,698
2. Social Workers					103,873	1,253,260		1,357,133
3. Counselors								-
4. School Nurses								-
5. Licensed Vocational Nurses					83,733		294	84,027
6. Trained Health Care Aides								-
7. Speech-Language Pathologists	6,981	1,104	2,432		8,630			19,147
8. Audiologists					7,634			7,634
9. Physical Therapists								-
10. Occupational Therapists	5,037				475			5,512
11. Physicians/Psychiatrists								-
12. Optometrists					17,056			17,056
13. Audiometrists								-

Audited Practitioner Type	Materials, Supplies and Reference Materials Expenditures (4200-4300)	Non-capitalized Equipment Expenditures (4400)	Travel and Conference Expenditures (5200)	Dues and Membership Expenditures (5300)	Contractor Costs (5800)	Contractor Costs (5100)	Communications Expenditures (5900)	Total Audited Other Costs H = Sum of A-G
	A	B	C	D	E	F	G	
1. Psychologists	10,378	-	55	-	-	-	265	10,698
2. Social Workers	-	-	-	-	103,873	1,253,260	-	1,357,133
3. Counselors	-	-	-	-	-	-	-	-
4. School Nurses	-	-	-	-	-	-	-	-
5. Licensed Vocational Nurses	-	-	-	-	83,733	-	294	84,027
6. Trained Health Care Aides	-	-	-	-	-	-	-	-
7. Speech-Language Pathologists	6,981	1,104	2,432	-	8,630	-	-	19,147
8. Audiologists	-	-	-	-	7,634	-	-	7,634
9. Physical Therapists	-	-	-	-	-	-	-	-
10. Occupational Therapists	5,037	-	-	-	475	-	-	5,512
11. Physicians/Psychiatrists	-	-	-	-	-	-	-	-
12. Optometrists	-	-	-	-	17,056	-	-	17,056
13. Audiometrists	-	-	-	-	-	-	-	-

(To Schedule 4)

Schedule 7 - Adjustments to Other Costs

LEA Provider Name:

MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:

JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:

1962698845

Practitioner Type	Materials, Supplies and Reference Materials Expenditures (4200-4300)	Non-capitalized Equipment Expenditures (4400)	Travel and Conference Expenditures (5200)	Dues and Membership Expenditures (5300)	Contractor Costs (5800)	Contractor Costs (5100)	Communications Expenditures (5900)	Total Adj.
	A	B	C	D	E	F	G	
	Audit ADJ ()	Audit ADJ ()	Audit ADJ ()	Audit ADJ ()	Audit ADJ ()	Audit ADJ ()	Audit ADJ ()	
1. Psychologists								-
2. Social Workers								-
3. Counselors								-
4. School Nurses								-
5. Licensed Vocational Nurses								-
6. Trained Health Care Aides								-
7. Speech-Language Pathologists								-
8. Audiologists								-
9. Physical Therapists								-
10. Occupational Therapists								-
11. Physicians/Psychiatrists								-
12. Optometrists								-
13. Audiometrists								-
								(To Schedule 6)
Reported Indirect Cost Rate	3.32%							
Audit Adj ()								
Audited Indirect Cost Rate	3.32%							
(To Schedule 2,3)								

**Schedule 8 - Percent of Time Providing LEA Services
LEA Services Documented in an IEP or IFSP**

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

Practitioner Type	Total Hours Required to Work (Employees)	Total Hours Worked by Contractors	Total Hours Worked by Employees and Contractors	Total Hours Reimbursed for LEA Services Documented in an IEP or IFSP	Percent of Time Providing LEA Services Documented in an IEP or IFSP	Total Hours Reimbursed for LEA Services Documented in an IEP or IFSP	Percent of Time Providing LEA Services Documented in an IEP or IFSP
	A (Schedule 9)	B (Schedule 9)	C=A+B	D (Schedule 10)	E = D/C	F (Schedule 10.1)	G = F/C
1. Psychologists	16,960	-	16,960	80	0.47%	585	3.45%
2. Social Workers	-	22,619	22,619	-	0	-	0
3. Counselors	-	-	-	-	0	2	0
4. School Nurses	8,736	-	8,736	7	0.08%	97	1.11%
5. Licensed Vocational Nurses	-	2,792	2,792	-	0	443	15.87%
6. Trained Health Care Aides	132,245	-	132,245	8,960	6.77%	41,756	31.57%
7. Speech-Language Pathologists	37,440	192	37,632	312	0.83%	1,875	4.98%
8. Audiologists	-	170	170	2	1.18%	4	2.35%
9. Physical Therapists	5,740	-	5,740	9	0.15%	20	0.35%
10. Occupational Therapists	9,512	8	9,520	13	0.13%	75	0.79%
11. Physicians/Psychiatrists	-	-	-	-	0	-	0
12. Optometrists	-	172	172	N/A	0	N/A	0
13. Audiometrists	-	-	-	N/A	0	N/A	0
					(To Schedule 2)		(To Schedule 2)

**Schedule 8 - Percent of Time Providing LEA Services
LEA Services Not Documented in an IEP or IFSP**

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

Practitioner Type	Total Hours Required to Work (Employees)	Total Hours Worked by Contractors	Total Hours Worked by Employees and Contractors	Total Hours Reimbursed for LEA Services Not Documented in an IEP or IFSP (Dates of Service 7/1/08- 9/30/08)	Percent of Time Providing LEA Services Not Documented in an IEP of IFSP (Dates of Service 7/1/08- 9/30/08)	Total Hours Reimbursed for LEA Services Not Documented in an IEP or IFSP (Dates of Service 10/1/08-6/30/09)	Percent of Time Providing LEA Services Not Documented in an IEP of IFSP (Dates of Service 10/1/08-6/30/09)
	A	B	C=A+B	D	E = D/C	F	G = F/C
	(Schedule 9)	(Schedule 9)		(Schedule 11)		(Schedule 11.1)	
1. Psychologists	16,960	-	16,960	-	0	-	0
2. Social Workers	-	22,619	22,619	-	0	-	0
3. Counselors	-	-	-	-	0	0	0
4. School Nurses	8,736	-	8,736	-	0	-	0
5. Licensed Vocational Nurses	-	2,792	2,792	-	0	-	0
6. Trained Health Care Aides	132,245	-	132,245	-	0	-	0
7. Speech-Language Pathologists	37,440	192	37,632	-	0	3	0.01%
8. Audiologists	-	170	170	-	0	-	0
9. Physical Therapists	5,740	-	5,740	-	0	-	0
10. Occupational Therapists	9,512	8	9,520	-	0	-	0
11. Physicians/Psychiatrists	-	-	-	-	0	-	0
12. Optometrists	-	172	172	-	0	-	0
13. Audiometrists	-	-	-	-	0	-	0
					(To Schedule 3)		(To Schedule 3)

Schedule 9 - Adjustments to Reported Time

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

W/S A-3/B-3 Col C Practitioner Type	As Reported Total Hours Required to Work (Employees)	Audit Adj.	As Audited Total Hours Required to Work (Employees)						
	C	0	0	0	0	0	0	0	
1. Psychologists	16,960								16,960
2. Social Workers									-
3. Counselors									-
4. School Nurses	8,736								8,736
5. Licensed Vocational Nurses									-
6. Trained Health Care Aides	132,245								132,245
7. Speech-Language Pathologists	37,440								37,440
8. Audiologists									-
9. Physical Therapists	5,740								5,740
10. Occupational Therapists	9,512								9,512
11. Physicians/Psychiatrists									-
12. Optometrists									-
13. Audiometrists									-

(To Schedule 8)

W/S A-3/B-3 Col D Practitioner Type	As Reported Total Contractor Hours Paid	Audit Adj.	Audited Total Contractor Hours Paid						
	D	0	0	0	0	0	0	0	
1. Psychologists									-
2. Social Workers	22,619								22,619
3. Counselors									-
4. School Nurses									-
5. Licensed Vocational Nurses	2,792								2,792
6. Trained Health Care Aides									-
7. Speech-Language Pathologists	192								192
8. Audiologists	170								170
9. Physical Therapists									-
10. Occupational Therapists	8								8
11. Physicians/Psychiatrists									-
12. Optometrists	172								172
13. Audiometrists									-

(To Schedule 8)

**Schedule 10: Units and Reimbursement of Providing LEA Services Documented in an IEP or IFSP
Dates of Service 7/1/08-9/30/08**

Row	Service Description	Procedure Code	IFSP (TL) or IEP (TM) Modifier	Other Required Modifier(s)	Reported Total Units <i>B</i>	Audit Adj <i>(-)</i>	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP
1a	IFSP Psychological Assessment: Initial	96101	TL	-			-	-	0
1b	IFSP Psychological Assessment: Annual	96101	TL	52			-	-	0
1c	IFSP Psychological Assessment: Amended	96101	TL	TS			-	-	0
1d	IEP Psychological Assessment: Initial/Triennial	96101	TM	-	9		9	54	54
1e	IEP Psychological Assessment: Annual	96101	TM	52	2		2	4	4
1f	IEP Psychological Assessment: Amended	96101	TM	TS	2		2	4	4
1g	IFSP Psychology Counseling, Individual Treatment - Initial	96152	TL	AH			-	-	0
1h	IFSP Psychology Counseling, Individual Treatment - Additional	96152	TL	AH, 22			-	-	0
1i	IEP Psychology Counseling, Individual Treatment - Initial	96152	TM	AH	27	(13)	14	25	13
1j	IEP Psychology Counseling, Individual Treatment - Additional	96152	TM	AH, 22	5		5	1	1
1k	IFSP Psychology Counseling, Group Treatment - Initial	96153	TL	AH			-	-	0
1l	IFSP Psychology Counseling, Group Treatment - Additional	96153	TL	AH, 22			-	-	0
1m	IEP Psychology Counseling, Group Treatment - Initial	96153	TM	AH	53	(32)	21	11	4
1n	IEP Psychology Counseling, Group Treatment - Additional	96153	TM	AH, 22			-	-	0
Psychologists - Totals								99	80
2a	IFSP Psychosocial Status Assessment: Initial	96150	TL	AJ			-	-	0
2b	IFSP Psychosocial Status Assessment: Annual	96150	TL	AJ, 52			-	-	0
2c	IFSP Psychosocial Status Assessment: Amended	96151	TL	AJ			-	-	0
2d	IEP Psychosocial Status Assessment: Initial/Triennial	96150	TM	AJ			-	-	0
2e	IEP Psychosocial Status Assessment: Annual	96150	TM	AJ, 52			-	-	0
2f	IEP Psychosocial Status Assessment: Amended	96151	TM	AJ			-	-	0
2g	IFSP Psychology Counseling, Individual Treatment - Initial	96152	TL	AJ			-	-	0
2h	IFSP Psychology Counseling, Individual Treatment - Additional	96152	TL	AJ, 22			-	-	0
2i	IEP Psychology Counseling, Individual Treatment - Initial	96152	TM	AJ			-	-	0
2j	IEP Psychology Counseling, Individual Treatment - Additional	96152	TM	AJ, 22			-	-	0
2k	IFSP Psychology Counseling, Group Treatment - Initial	96153	TL	AJ			-	-	0
2l	IFSP Psychology Counseling, Group Treatment - Additional	96153	TL	AJ, 22			-	-	0
2m	IEP Psychology Counseling, Group Treatment - Initial	96153	TM	AJ			-	-	0
2n	IEP Psychology Counseling, Group Treatment - Additional	96153	TM	AJ, 22			-	-	0
Social Workers - Totals								-	-
3a	IFSP Psychosocial status Assessment: Initial	96150	TL	-			-	-	0
3b	IFSP Psychosocial status Assessment: Annual	96150	TL	52			-	-	0
3c	IFSP Psychosocial status Assessment: Amended	96151	TL	-			-	-	0
3d	IEP Psychosocial status Assessment: Initial/Triennial	96150	TM	-			-	-	0
3e	IEP Psychosocial status Assessment: Annual	96150	TM	52			-	-	0
3f	IEP Psychosocial status Assessment: Amended	96151	TM	-			-	-	0
3g	IFSP Psychology Counseling, Individual Treatment - Initial	96152	TL	-			-	-	0
3h	IFSP Psychology Counseling, Individual Treatment - Additional	96152	TL	22			-	-	0
3i	IEP Psychology Counseling, Individual Treatment - Initial	96152	TM	-			-	-	0
3j	IEP Psychology Counseling, Individual Treatment - Additional	96152	TM	22			-	-	0
3k	IFSP Psychology Counseling, Group Treatment - Initial	96153	TL	-			-	-	0
3l	IFSP Psychology Counseling, Group Treatment - Additional	96153	TL	22			-	-	0
3m	IEP Psychology Counseling, Group Treatment - Initial	96153	TM	-			-	-	0
3n	IEP Psychology Counseling, Group Treatment - Additional	96153	TM	22			-	-	0
Counselors - Totals								-	-

**Schedule 10: Units and Reimbursement of Providing LEA Services Documented in an IEP or IFSP
Dates of Service 7/1/08-9/30/08**

Row	Service Description	Procedure Code	IFSP (TL) or IEP (TM) Modifier	Other Required Modifier(s)	Reported Total Units <i>B</i>	Audit Adj <i>(- 1)</i>	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP
4a	IFSP Health Assessment: Initial	T1001	TL	-			-	-	0
4b	IFSP Health Assessment: Annual	T1001	TL	52			-	-	0
4c	IFSP Health Assessment: Amended	T1001	TL	TS			-	-	0
4d	IEP Health Assessment: Initial/Triennial	T1001	TM	-	3		3	5	5
4e	IEP Health Assessment: Annual	T1001	TM	52			-	-	0
4f	IEP Health Assessment: Amended	T1001	TM	TS			-	-	0
4g	IFSP Nursing Services	T1002	TL	-			-	-	0
4h	IEP Nursing Services	T1002	TM	-	6		6	2	2
School Nurses - Totals								<u>7</u>	<u>7</u>
5a	IFSP LVN Services	T1003	TL	-			-	-	0
5b	IEP LVN Services	T1003	TM	-			-	-	0
Licensed Vocational Nurses - Totals								<u>-</u>	<u>-</u>
6a	IFSP Trained Health Care Aide Services	T1004	TL	-	744		744	186	186
6b	IEP Trained Health Care Aide Services	T1004	TM	-	35,094		35,094	8,774	8,774
Trained Health Care Aides - Totals								<u>8,960</u>	<u>8,960</u>
7a	IFSP Speech/Language Assessment: Initial	92506	TL	GN			-	-	0
7b	IFSP Speech/Language Assessment: Annual	92506	TL	GN, 52	2		2	3	3
7c	IFSP Speech/Language Assessment: Amended	92506	TL	GN, TS			-	-	0
7d	IEP Speech/Language Assessment: Initial/Triennial	92506	TM	GN	4		4	11	11
7e	IEP Speech/Language Assessment: Annual	92506	TM	GN, 52	8		8	12	12
7f	IEP Speech/Language Assessment: Amended	92506	TM	GN, TS			-	-	0
7g	IFSP Speech Therapy, Individual Treatment - Initial	92507	TL	GN	6	(3)	3	5	3
7h	IFSP Speech Therapy, Individual Treatment - Additional	92507	TL	GN, 22			-	-	0
7i	IEP Speech Therapy, Individual Treatment - Initial	92507	TM	GN	105	(43)	62	88	52
7j	IEP Speech Therapy, Individual Treatment - Additional	92507	TM	GN, 22			-	-	0
7k	IFSP Speech Therapy, Group Treatment - Initial	92508	TL	GN	183	(101)	82	56	25
7l	IFSP Speech Therapy, Group Treatment - Additional	92508	TL	GN, 22			-	-	0
7m	IEP Speech Therapy, Group Treatment - Initial	92508	TM	GN	1,342	(664)	678	410	207
7n	IEP Speech Therapy, Group Treatment - Additional	92508	TM	GN, 22			-	-	0
Speech-Language Pathologists - Totals								<u>584</u>	<u>312</u>
8a	IFSP Audiological Assessment: Initial	92506	TL	-			-	-	0
8b	IFSP Audiological Assessment: Annual	92506	TL	52			-	-	0
8c	IFSP Audiological Assessment: Amended	92506	TL	TS			-	-	0
8d	IEP Audiological Assessment: Initial/Triennial	92506	TM	-	1		1	2	2
8e	IEP Audiological Assessment: Annual	92506	TM	52			-	-	0
8f	IEP Audiological Assessment: Amended	92506	TM	TS			-	-	0
8g	IFSP Audiology, Individual Treatment - Initial	92507	TL	-			-	-	0
8h	IFSP Audiology, Individual Treatment - Additional	92507	TL	22			-	-	0
8i	IEP Audiology, Individual Treatment - Initial	92507	TM	-			-	-	0
8j	IEP Audiology, Individual Treatment - Additional	92507	TM	22			-	-	0
8k	IFSP Hearing Check	V5011	TL	-			-	-	0
8l	IEP Hearing Check	V5011	TM	-			-	-	0
Audiologists - Totals								<u>2</u>	<u>2</u>
9a	IFSP Physical Therapy Assessment: Initial	97001	TL	-			-	-	0
9b	IFSP Physical Therapy Assessment: Annual	97001	TL	52			-	-	0
9c	IFSP Physical Therapy Assessment: Amended	97002	TL	-			-	-	0
9d	IEP Physical Therapy Assessment: Initial/Triennial	97001	TM	-	3		3	9	9
9e	IEP Physical Therapy Assessment: Annual	97001	TM	52			-	-	0
9f	IEP Physical Therapy Assessment: Amended	97002	TM	-			-	-	0
9g	IFSP Physical Therapy Individual Treatment - Initial	97110	TL	GP			-	-	0
9h	IFSP Physical Therapy Individual Treatment - Additional	97110	TL	GP, 22			-	-	0
9i	IEP Physical Therapy Individual Treatment - Initial	97110	TM	GP			-	-	0
9j	IEP Physical Therapy Individual Treatment - Additional	97110	TM	GP, 22			-	-	0
Physical Therapists - Totals								<u>9</u>	<u>9</u>

**Schedule 10: Units and Reimbursement of Providing LEA Services Documented in an IEP or IFSP
Dates of Service 7/1/08-9/30/08**

Row	Service Description	Procedure Code	IFSP (TL) or IEP (TM) Modifier	Other Required Modifier(s)	Reported Total Units <i>B</i>	Audit Adj (- 1)	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP
10a	IFSP Occupational Therapy Assessment: Initial	97003	TL	-			-	-	0
10b	IFSP Occupational Therapy Assessment: Annual	97003	TL	52			-	-	0
10c	IFSP Occupational Therapy Assessment: Amended	97004	TL	-			-	-	0
10d	IEP Occupational Therapy Assessment: Initial/Triennial	97003	TM	-	3		3	9	9
10e	IEP Occupational Therapy Assessment: Annual	97003	TM	52	2		2	4	4
10f	IEP Occupational Therapy Assessment: Amended	97004	TM	-			-	-	0
10g	IFSP Occupational Therapy Individual Treatment - Initial	97110	TL	GO			-	-	0
10h	IFSP Occupational Therapy Individual Treatment - Additional	97110	TL	GO, 22			-	-	0
10i	IEP Occupational Therapy Individual Treatment - Initial	97110	TM	GO			-	-	0
10j	IEP Occupational Therapy Individual Treatment - Additional	97110	TM	GO, 22			-	-	0
Occupational Therapists - Totals								13	13
11a	IFSP Health/Nutrition Assessment: Initial	96150	TL	AG			-	-	0
11b	IFSP Health/Nutrition Assessment: Annual	96150	TL	AG, 52			-	-	0
11c	IFSP Health/Nutrition Assessment: Amended	96151	TL	AG			-	-	0
11d	IEP Health/Nutrition Assessment: Initial/Triennial	96150	TM	AG			-	-	0
11e	IEP Health/Nutrition Assessment: Annual	96150	TM	AG, 52			-	-	0
11f	IEP Health/Nutrition Assessment: Amended	96151	TM	AG			-	-	0
11g	IFSP Psychology Counseling, Individual Treatment - Initial	96152	TL	AG			-	-	0
11h	IFSP Psychology Counseling, Individual Treatment - Additional	96152	TL	AG, 22			-	-	0
11i	IEP Psychology Counseling, Individual Treatment - Initial	96152	TM	AG			-	-	0
11j	IEP Psychology Counseling, Individual Treatment - Additional	96152	TM	AG, 22			-	-	0
11k	IFSP Psychology Counseling, Group Treatment - Initial	96153	TL	AG			-	-	0
11l	IFSP Psychology Counseling, Group Treatment - Additional	96153	TL	AG, 22			-	-	0
11m	IEP Psychology Counseling, Group Treatment - Initial	96153	TM	AG			-	-	0
11n	IEP Psychology Counseling, Group Treatment - Additional	96153	TM	AG, 22			-	-	0
Physicians/Psychiatrists - Totals								-	-

(To Schedule 8)

Reported Interim Medi-Cal Reimbursement (7/1/08-9/30/08) - Services Documented in an IEP or IFSP
Adjustments to Interim Medi-Cal Reimbursement
Audited Interim Medi-Cal Reimbursement (7/1/08-9/30/08) - Services Documented in an IEP or IFSP

	\$	148,272
Adj ()		
	\$	148,272
		(To Schedule 2)

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

**Schedule 10.1: Units and Reimbursement of Providing LEA Services Documented in an IEP or IFSP
Dates of Service 10/1/08-6/30/09**

Row	Service Description	Procedure Code	IFSP (TL) or IEP (TM) Modifier	Other Required Modifier(s)	Reported Total Units	Audit Adj	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP
					B	(2)			
1a	IFSP Psychological Assessment: Initial	96101	TL	-			-	-	0
1b	IFSP Psychological Assessment: Annual	96101	TL	52			-	-	0
1c	IFSP Psychological Assessment: Amended	96101	TL	TS			-	-	0
1d	IEP Psychological Assessment: Initial/Triennial	96101	TM	-	66		66	396	396
1e	IEP Psychological Assessment: Annual	96101	TM	52	8		8	16	16
1f	IEP Psychological Assessment: Amended	96101	TM	TS	10		10	20	20
1g	IFSP Psychology Counseling, Individual Treatment - Initial	96152	TL	AH			-	-	0
1h	IFSP Psychology Counseling, Individual Treatment - Additional	96152	TL	AH, 22			-	-	0
1i	IEP Psychology Counseling, Individual Treatment - Initial	96152	TM	AH	169	(74)	95	155	87
1j	IEP Psychology Counseling, Individual Treatment - Additional	96152	TM	AH, 22	24		24	6	6
1k	IFSP Psychology Counseling, Group Treatment - Initial	96153	TL	AH			-	-	0
1l	IFSP Psychology Counseling, Group Treatment - Additional	96153	TL	AH, 22			-	-	0
1m	IEP Psychology Counseling, Group Treatment - Initial	96153	TM	AH	366	(69)	297	74	60
1n	IEP Psychology Counseling, Group Treatment - Additional	96153	TM	AH, 22	3		3	0	0
Psychologists - Totals								667	585
2a	IFSP Psychosocial Status Assessment: Initial	96150	TL	AJ			-	-	0
2b	IFSP Psychosocial Status Assessment: Annual	96150	TL	AJ, 52			-	-	0
2c	IFSP Psychosocial Status Assessment: Amended	96151	TL	AJ			-	-	0
2d	IEP Psychosocial Status Assessment: Initial/Triennial	96150	TM	AJ			-	-	0
2e	IEP Psychosocial Status Assessment: Annual	96150	TM	AJ, 52			-	-	0
2f	IEP Psychosocial Status Assessment: Amended	96151	TM	AJ			-	-	0
2g	IFSP Psychology Counseling, Individual Treatment - Initial	96152	TL	AJ			-	-	0
2h	IFSP Psychology Counseling, Individual Treatment - Additional	96152	TL	AJ, 22			-	-	0
2i	IEP Psychology Counseling, Individual Treatment - Initial	96152	TM	AJ			-	-	0
2j	IEP Psychology Counseling, Individual Treatment - Additional	96152	TM	AJ, 22			-	-	0
2k	IFSP Psychology Counseling, Group Treatment - Initial	96153	TL	AJ			-	-	0
2l	IFSP Psychology Counseling, Group Treatment - Additional	96153	TL	AJ, 22			-	-	0
2m	IEP Psychology Counseling, Group Treatment - Initial	96153	TM	AJ			-	-	0
2n	IEP Psychology Counseling, Group Treatment - Additional	96153	TM	AJ, 22			-	-	0
Social Workers - Totals								-	-
3a	IFSP Psychosocial status Assessment: Initial	96150	TL	-			-	-	0
3b	IFSP Psychosocial status Assessment: Annual	96150	TL	52			-	-	0
3c	IFSP Psychosocial status Assessment: Amended	96151	TL	-			-	-	0
3d	IEP Psychosocial status Assessment: Initial/Triennial	96150	TM	-			-	-	0
3e	IEP Psychosocial status Assessment: Annual	96150	TM	52			-	-	0
3f	IEP Psychosocial status Assessment: Amended	96151	TM	-			-	-	0
3g	IFSP Psychology Counseling, Individual Treatment - Initial	96152	TL	-			-	-	0
3h	IFSP Psychology Counseling, Individual Treatment - Additional	96152	TL	22			-	-	0
3i	IEP Psychology Counseling, Individual Treatment - Initial	96152	TM	-	1		1	1	1
3j	IEP Psychology Counseling, Individual Treatment - Additional	96152	TM	22			-	-	0
3k	IFSP Psychology Counseling, Group Treatment - Initial	96153	TL	-			-	-	0
3l	IFSP Psychology Counseling, Group Treatment - Additional	96153	TL	22			-	-	0
3m	IEP Psychology Counseling, Group Treatment - Initial	96153	TM	-	4		4	1	1
3n	IEP Psychology Counseling, Group Treatment - Additional	96153	TM	22			-	-	0
Counselors - Totals								2	2

**Schedule 10.1: Units and Reimbursement of Providing LEA Services Documented in an IEP or IFSP
Dates of Service 10/1/08-6/30/09**

Row	Service Description	Procedure Code	IFSP (TL) or IEP (TM) Modifier	Other Required Modifier(s)	Reported Total Units <i>B</i>	Audit Adj (2)	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP
4a	IFSP Health Assessment: Initial	T1001	TL	-			-	-	0
4b	IFSP Health Assessment: Annual	T1001	TL	52			-	-	0
4c	IFSP Health Assessment: Amended	T1001	TL	TS			-	-	0
4d	IEP Health Assessment: Initial/Triennial	T1001	TM	-	43		43	75	75
4e	IEP Health Assessment: Annual	T1001	TM	52	15		15	15	15
4f	IEP Health Assessment: Amended	T1001	TM	TS	1		1	1	1
4g	IFSP Nursing Services	T1002	TL	-			-	-	0
4h	IEP Nursing Services	T1002	TM	-	22		22	6	6
School Nurses - Totals								97	97
5a	IFSP LVN Services	T1003	TL	-			-	-	0
5b	IEP LVN Services	T1003	TM	-	1,772		1,772	443	443
Licensed Vocational Nurses - Totals								443	443
6a	IFSP Trained Health Care Aide Services	T1004	TL	-	2,754		2,754	689	689
6b	IEP Trained Health Care Aide Services	T1004	TM	-	164,269		164,269	41,067	41,067
Trained Health Care Aides - Totals								41,756	41,756
7a	IFSP Speech/Language Assessment: Initial	92506	TL	GN			-	-	0
7b	IFSP Speech/Language Assessment: Annual	92506	TL	GN, 52			-	-	0
7c	IFSP Speech/Language Assessment: Amended	92506	TL	GN, TS			-	-	0
7d	IEP Speech/Language Assessment: Initial/Triennial	92506	TM	GN	35		35	96	96
7e	IEP Speech/Language Assessment: Annual	92506	TM	GN, 52	29		29	44	44
7f	IEP Speech/Language Assessment: Amended	92506	TM	GN, TS	11		11	17	17
7g	IFSP Speech Therapy, Individual Treatment - Initial	92507	TL	GN	22	(11)	11	18	9
7h	IFSP Speech Therapy, Individual Treatment - Additional	92507	TL	GN, 22			-	-	0
7i	IEP Speech Therapy, Individual Treatment - Initial	92507	TM	GN	583	(284)	299	486	249
7j	IEP Speech Therapy, Individual Treatment - Additional	92507	TM	GN, 22	7		7	2	2
7k	IFSP Speech Therapy, Group Treatment - Initial	92508	TL	GN	393	(211)	182	120	56
7l	IFSP Speech Therapy, Group Treatment - Additional	92508	TL	GN, 22			-	-	0
7m	IEP Speech Therapy, Group Treatment - Initial	92508	TM	GN	8,961	(4,431)	4,530	2,738	1,384
7n	IEP Speech Therapy, Group Treatment - Additional	92508	TM	GN, 22	223		223	19	19
Speech-Language Pathologists - Totals								3,539	1,875
8a	IFSP Audiological Assessment: Initial	92506	TL	-			-	-	0
8b	IFSP Audiological Assessment: Annual	92506	TL	52			-	-	0
8c	IFSP Audiological Assessment: Amended	92506	TL	TS			-	-	0
8d	IEP Audiological Assessment: Initial/Triennial	92506	TM	-	2		2	4	4
8e	IEP Audiological Assessment: Annual	92506	TM	52			-	-	0
8f	IEP Audiological Assessment: Amended	92506	TM	TS			-	-	0
8g	IFSP Audiology, Individual Treatment - Initial	92507	TL	-			-	-	0
8h	IFSP Audiology, Individual Treatment - Additional	92507	TL	22			-	-	0
8i	IEP Audiology, Individual Treatment - Initial	92507	TM	-			-	-	0
8j	IEP Audiology, Individual Treatment - Additional	92507	TM	22			-	-	0
8k	IFSP Hearing Check	V5011	TL	-			-	-	0
8l	IEP Hearing Check	V5011	TM	-			-	-	0
Audiologists - Totals								4	4
9a	IFSP Physical Therapy Assessment: Initial	97001	TL	-			-	-	0
9b	IFSP Physical Therapy Assessment: Annual	97001	TL	52			-	-	0
9c	IFSP Physical Therapy Assessment: Amended	97002	TL	-			-	-	0
9d	IEP Physical Therapy Assessment: Initial/Triennial	97001	TM	-	7		7	20	20
9e	IEP Physical Therapy Assessment: Annual	97001	TM	52			-	-	0
9f	IEP Physical Therapy Assessment: Amended	97002	TM	-			-	-	0
9g	IFSP Physical Therapy Individual Treatment - Initial	97110	TL	GP			-	-	0
9h	IFSP Physical Therapy Individual Treatment - Additional	97110	TL	GP, 22			-	-	0
9i	IEP Physical Therapy Individual Treatment - Initial	97110	TM	GP			-	-	0
9j	IEP Physical Therapy Individual Treatment - Additional	97110	TM	GP, 22			-	-	0
Physical Therapists - Totals								20	20

**Schedule 10.1: Units and Reimbursement of Providing LEA Services Documented in an IEP or IFSP
Dates of Service 10/1/08-6/30/09**

Row	Service Description	Procedure Code	IFSP (TL) or IEP (TM) Modifier	Other Required Modifier(s)	Reported Total Units <i>B</i>	Audit Adj (2)	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Documented in an IEP or IFSP
10a	IFSP Occupational Therapy Assessment: Initial	97003	TL	-	2		2	6	6
10b	IFSP Occupational Therapy Assessment: Annual	97003	TL	52	1		1	2	2
10c	IFSP Occupational Therapy Assessment: Amended	97004	TL	-			-	-	0
10d	IEP Occupational Therapy Assessment: Initial/Triennial	97003	TM	-	14		14	40	40
10e	IEP Occupational Therapy Assessment: Annual	97003	TM	52	12		12	24	24
10f	IEP Occupational Therapy Assessment: Amended	97004	TM	-	1		1	2	2
10g	IFSP Occupational Therapy Individual Treatment - Initial	97110	TL	GO			-	-	0
10h	IFSP Occupational Therapy Individual Treatment - Additional	97110	TL	GO, 22			-	-	0
10i	IEP Occupational Therapy Individual Treatment - Initial	97110	TM	GO	1		1	1	1
10j	IEP Occupational Therapy Individual Treatment - Additional	97110	TM	GO, 22			-	-	0
Occupational Therapists - Totals								<u>75</u>	<u>75</u>
11a	IFSP Health/Nutrition Assessment: Initial	96150	TL	AG			-	-	0
11b	IFSP Health/Nutrition Assessment: Annual	96150	TL	AG, 52			-	-	0
11c	IFSP Health/Nutrition Assessment: Amended	96151	TL	AG			-	-	0
11d	IEP Health/Nutrition Assessment: Initial/Triennial	96150	TM	AG			-	-	0
11e	IEP Health/Nutrition Assessment: Annual	96150	TM	AG, 52			-	-	0
11f	IEP Health/Nutrition Assessment: Amended	96151	TM	AG			-	-	0
11g	IFSP Psychology Counseling, Individual Treatment - Initial	96152	TL	AG			-	-	0
11h	IFSP Psychology Counseling, Individual Treatment - Additional	96152	TL	AG, 22			-	-	0
11i	IEP Psychology Counseling, Individual Treatment - Initial	96152	TM	AG			-	-	0
11j	IEP Psychology Counseling, Individual Treatment - Additional	96152	TM	AG, 22			-	-	0
11k	IFSP Psychology Counseling, Group Treatment - Initial	96153	TL	AG			-	-	0
11l	IFSP Psychology Counseling, Group Treatment - Additional	96153	TL	AG, 22			-	-	0
11m	IEP Psychology Counseling, Group Treatment - Initial	96153	TM	AG			-	-	0
11n	IEP Psychology Counseling, Group Treatment - Additional	96153	TM	AG, 22			-	-	0
Physicians/Psychiatrists - Totals								<u>-</u>	<u>-</u>

(To Schedule 8)

**Reported Interim Medi-Cal Reimbursement (10/1/08-6/30/09) - Services Documented in an IEP or IFSP
Adjustments to Interim Medi-Cal Reimbursement
Audited Interim Medi-Cal Reimbursement (10/1/08-6/30/09) - Services Documented in an IEP or IFSP**

	\$	892,979
Adj (2)		863
	\$	893,842
		(To Schedule 2)

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

Schedule 11: Units and Reimbursement of Providing LEA Services Not Documented in an IEP or IFSP
Dates of Service 7/1/08-9/30/08

Row	Service Description	Procedure Code	Required Modifier(s)	Reported Total Units	Audit Adj ()	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Not Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Not Documented in an IEP or IFSP
1a	Non-IEP/IFSP Psychosocial Status Assessment	96150	AH			-	-	0
1b	Non-IEP/IFSP Psychosocial Status Re-Assessment	96151	AH			-	-	0
1c	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Initial	96152	AH			-	-	0
1d	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Additional	96152	AH, 22			-	-	0
1e	Non-IEP/IFSP Psychology Counseling, Group Treatment - Initial	96153	AH			-	-	0
1f	Non-IEP/IFSP Psychology Counseling, Group Treatment - Additional	96153	AH, 22			-	-	0
1g	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	AH			-	-	0
Psychologists - Totals							-	-
2a	Non-IEP/IFSP Psychosocial Status Assessment	96150	AJ			-	-	0
2b	Non-IEP/IFSP Psychosocial Status Re-Assessment	96151	AJ			-	-	0
2c	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Initial	96152	AJ			-	-	0
2d	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Additional	96152	AJ, 22			-	-	0
2e	Non-IEP/IFSP Psychology Counseling, Group Treatment - Initial	96153	AJ			-	-	0
2f	Non-IEP/IFSP Psychology Counseling, Group Treatment - Additional	96153	AJ, 22			-	-	0
2g	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	AJ			-	-	0
Social Workers - Totals							-	-
3a	Non-IEP/IFSP Psychosocial Status Assessment	96150	-			-	-	0
3b	Non-IEP/IFSP Psychosocial Status Re-Assessment	96151	-			-	-	0
3c	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Initial	96152	-			-	-	0
3d	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Additional	96152	22			-	-	0
3e	Non-IEP/IFSP Psychology Counseling, Group Treatment - Initial	96153	-			-	-	0
3f	Non-IEP/IFSP Psychology Counseling, Group Treatment - Additional	96153	22			-	-	0
3g	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	-			-	-	0
Counselors - Totals							-	-
4a	Non-IEP/IFSP Hearing Assessment (Pure tone, air only)	92551	TD			-	-	0
4b	Non-IEP/IFSP Hearing Assessment (Pure tone-threshold, air only)	92552	TD			-	-	0
4c	Non-IEP/IFSP Health/Nutrition Assessment	96150	TD			-	-	0
4d	Non-IEP/IFSP Health/Nutrition Re-Assessment	96151	TD			-	-	0
4e	Non-IEP/IFSP Vision Assessment	99173	TD			-	-	0
4f	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	TD			-	-	0
4g	Non-IEP/IFSP Nursing and Trained Health Care Aide Services	T1002	-			-	-	0
School Nurses - Totals							-	-
5a	Non-IEP/IFSP LVN Services	T1003	-			-	-	0
Licensed Vocational Nurses - Totals							-	-
6a	Non-IEP/IFSP Trained Health Care Aide Services	T1004	-			-	-	0
Trained Health Care Aides - Totals							-	-
7a	Non-IEP/IFSP Speech Therapy, Individual Treatment - Initial	92507	GN			-	-	0
7b	Non-IEP/IFSP Speech Therapy, Individual Treatment - Additional	92507	GN, 22			-	-	0
7c	Non-IEP/IFSP Speech Therapy, Group Treatment - Initial	92508	GN			-	-	0
7d	Non-IEP/IFSP Speech Therapy, Group Treatment - Additional	92508	GN, 22			-	-	0
7e	Non-IEP/IFSP Hearing Assessment (Pure tone, air only)	92551	GN			-	-	0
7f	Non-IEP/IFSP Hearing Assessment (Pure tone-threshold, air only)	92552	GN			-	-	0
7g	Non-IEP/IFSP Developmental Assessment	96110	GN			-	-	0
Speech-Language Pathologists - Totals							-	-

Schedule 11: Units and Reimbursement of Providing LEA Services Not Documented in an IEP or IFSP
Dates of Service 7/1/08-9/30/08

Row	Service Description	Procedure Code	Required Modifier(s)	Reported Total Units	Audit Adj ()	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Not Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Not Documented in an IEP or IFSP
8a	Non-IEP/IFSP Audiology, Individual Treatment - Initial	92507	-			-	-	0
8b	Non-IEP/IFSP Audiology, Individual Treatment - Additional	92507	22			-	-	0
Audiologists - Totals							-	-
9a	Non-IEP/IFSP Hearing Assessment (Pure tone, air only)	92551	-			-	-	0
9b	Non-IEP/IFSP Hearing Assessment (Pure tone-threshold, air only)	92552	-			-	-	0
Audiologists/Audiometrists - Totals							-	-
10a	Non-IEP/IFSP Developmental Assessment	96110	GP			-	-	0
10b	Non-IEP/IFSP Physical Therapy Individual Treatment - Initial	97110	GP			-	-	0
10c	Non-IEP/IFSP Physical Therapy Individual Treatment - Additional	97110	GP, 22			-	-	0
Physical Therapists - Totals							-	-
11a	Non-IEP/IFSP Developmental Assessment	96110	GO			-	-	0
11b	Non-IEP/IFSP Occupational Therapy Individual Treatment - Initial	97110	GO			-	-	0
11c	Non-IEP/IFSP Occupational Therapy Individual Treatment - Additional	97110	GO, 22			-	-	0
Occupational Therapists - Totals							-	-
12a	Non-IEP/IFSP Hearing Assessment (Pure tone, air only)	92551	AG			-	-	0
12b	Non-IEP/IFSP Hearing Assessment (Pure tone-threshold, air only)	92552	AG			-	-	0
12c	Non-IEP/IFSP Health/Nutrition Assessment	96150	AG			-	-	0
12d	Non-IEP/IFSP Health/Nutrition Re-Assessment	96151	AG			-	-	0
12e	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Initial	96152	AG			-	-	0
12f	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Additional	96152	AG, 22			-	-	0
12g	Non-IEP/IFSP Psychology Counseling, Group Treatment - Initial	96153	AG			-	-	0
12h	Non-IEP/IFSP Psychology Counseling, Group Treatment - Additional	96153	AG, 22			-	-	0
12i	Non-IEP/IFSP Vision Assessment	99173	AG			-	-	0
12j	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	AG			-	-	0
Physicians/Psychiatrists - Totals							-	-
13a	Non-IEP/IFSP Vision Assessment	99173	-			-	-	0
Optometrists - Totals							-	-

(To Schedule 8)

Reported Interim Medi-Cal Reimbursement (7/1/08-9/30/08) - Services Not Documented in an IEP or IFSP
Adjustments to Interim Medi-Cal Reimbursement
Audited Interim Medi-Cal Reimbursement (7/1/08-9/30/08) - Services Not Documented in an IEP or IFSP

Adj () \$ -
(To Schedule 3)

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

Schedule 11.1: Units and Reimbursement of Providing LEA Services Not Documented in an IEP or IFSP
Dates of Service 10/1/08-6/30/09

Row	Service Description	Procedure Code	Required Modifier(s)	Reported	Audit Adj	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Not Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Not Documented in an IEP or IFSP
				Total Units				
					(3)			
1a	Non-IEP/IFSP Psychosocial Status Assessment	96150	AH			-	-	0
1b	Non-IEP/IFSP Psychosocial Status Re-Assessment	96151	AH			-	-	0
1c	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Initial	96152	AH			-	-	0
1d	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Additional	96152	AH, 22			-	-	0
1e	Non-IEP/IFSP Psychology Counseling, Group Treatment - Initial	96153	AH			-	-	0
1f	Non-IEP/IFSP Psychology Counseling, Group Treatment - Additional	96153	AH, 22			-	-	0
1g	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	AH			-	-	0
	Psychologists - Totals						-	-
2a	Non-IEP/IFSP Psychosocial Status Assessment	96150	AJ			-	-	0
2b	Non-IEP/IFSP Psychosocial Status Re-Assessment	96151	AJ			-	-	0
2c	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Initial	96152	AJ			-	-	0
2d	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Additional	96152	AJ, 22			-	-	0
2e	Non-IEP/IFSP Psychology Counseling, Group Treatment - Initial	96153	AJ			-	-	0
2f	Non-IEP/IFSP Psychology Counseling, Group Treatment - Additional	96153	AJ, 22			-	-	0
2g	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	AJ			-	-	0
	Social Workers - Totals						-	-
3a	Non-IEP/IFSP Psychosocial Status Assessment	96150	-			-	-	0
3b	Non-IEP/IFSP Psychosocial Status Re-Assessment	96151	-			-	-	0
3c	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Initial	96152	-			-	-	0
3d	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Additional	96152	22			-	-	0
3e	Non-IEP/IFSP Psychology Counseling, Group Treatment - Initial	96153	-	2	(1)	1	0	0
3f	Non-IEP/IFSP Psychology Counseling, Group Treatment - Additional	96153	22			-	-	0
3g	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	-			-	-	0
	Counselors - Totals						0	0
4a	Non-IEP/IFSP Hearing Assessment (Pure tone, air only)	92551	TD			-	-	0
4b	Non-IEP/IFSP Hearing Assessment (Pure tone-threshold, air only)	92552	TD			-	-	0
4c	Non-IEP/IFSP Health/Nutrition Assessment	96150	TD			-	-	0
4d	Non-IEP/IFSP Health/Nutrition Re-Assessment	96151	TD			-	-	0
4e	Non-IEP/IFSP Vision Assessment	99173	TD			-	-	0
4f	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	TD			-	-	0
4g	Non-IEP/IFSP Nursing and Trained Health Care Aide Services	T1002	-			-	-	0
	School Nurses - Totals						-	-
5a	Non-IEP/IFSP LVN Services	T1003	-			-	-	0
	Licensed Vocational Nurses - Totals						-	-
6a	Non-IEP/IFSP Trained Health Care Aide Services	T1004	-			-	-	0
	Trained Health Care Aides - Totals						-	-
7a	Non-IEP/IFSP Speech Therapy, Individual Treatment - Initial	92507	GN			-	-	0
7b	Non-IEP/IFSP Speech Therapy, Individual Treatment - Additional	92507	GN, 22			-	-	0
7c	Non-IEP/IFSP Speech Therapy, Group Treatment - Initial	92508	GN			-	-	0
7d	Non-IEP/IFSP Speech Therapy, Group Treatment - Additional	92508	GN, 22	39		39	3	3
7e	Non-IEP/IFSP Hearing Assessment (Pure tone, air only)	92551	GN			-	-	0
7f	Non-IEP/IFSP Hearing Assessment (Pure tone-threshold, air only)	92552	GN			-	-	0
7g	Non-IEP/IFSP Developmental Assessment	96110	GN			-	-	0
	Speech-Language Pathologists - Totals						3	3

Schedule 11.1: Units and Reimbursement of Providing LEA Services Not Documented in an IEP or IFSP
Dates of Service 10/1/08-6/30/09

Row	Service Description	Procedure Code	Required Modifier(s)	Reported Total Units	Audit Adj (3)	Audited Total Units	Reported Medi-Cal Hours Reimbursed for Services Not Documented in an IEP or IFSP	Audited Medi-Cal Hours Reimbursed for Services Not Documented in an IEP or IFSP
8a	Non-IEP/IFSP Audiology, Individual Treatment - Initial	92507	-			-	-	0
8b	Non-IEP/IFSP Audiology, Individual Treatment - Additional	92507	22			-	-	0
	Audiologists - Totals						-	-
9a	Non-IEP/IFSP Hearing Assessment (Pure tone, air only)	92551	-			-	-	0
9b	Non-IEP/IFSP Hearing Assessment (Pure tone-threshold, air only)	92552	-			-	-	0
	Audiologists/Audiometrists - Totals						-	-
10a	Non-IEP/IFSP Developmental Assessment	96110	GP			-	-	0
10b	Non-IEP/IFSP Physical Therapy Individual Treatment - Initial	97110	GP			-	-	0
10c	Non-IEP/IFSP Physical Therapy Individual Treatment - Additional	97110	GP, 22			-	-	0
	Physical Therapists - Totals						-	-
11a	Non-IEP/IFSP Developmental Assessment	96110	GO			-	-	0
11b	Non-IEP/IFSP Occupational Therapy Individual Treatment - Initial	97110	GO			-	-	0
11c	Non-IEP/IFSP Occupational Therapy Individual Treatment - Additional	97110	GO, 22			-	-	0
	Occupational Therapists - Totals						-	-
12a	Non-IEP/IFSP Hearing Assessment (Pure tone, air only)	92551	AG			-	-	0
12b	Non-IEP/IFSP Hearing Assessment (Pure tone-threshold, air only)	92552	AG			-	-	0
12c	Non-IEP/IFSP Health/Nutrition Assessment	96150	AG			-	-	0
12d	Non-IEP/IFSP Health/Nutrition Re-Assessment	96151	AG			-	-	0
12e	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Initial	96152	AG			-	-	0
12f	Non-IEP/IFSP Psychology Counseling, Individual Treatment - Additional	96152	AG, 22			-	-	0
12g	Non-IEP/IFSP Psychology Counseling, Group Treatment - Initial	96153	AG			-	-	0
12h	Non-IEP/IFSP Psychology Counseling, Group Treatment - Additional	96153	AG, 22			-	-	0
12i	Non-IEP/IFSP Vision Assessment	99173	AG			-	-	0
12j	Non-IEP/IFSP Health Education/Anticipatory Guidance	99401	AG			-	-	0
	Physicians/Psychiatrists - Totals						-	-
13a	Non-IEP/IFSP Vision Assessment	99173	-			-	-	0
	Optometrists - Totals						-	-

(To Schedule 8)

Reported Interim Medi-Cal Reimbursement (10/1/08-6/30/09) - Services Not Documented in an IEP or IFSP
Adjustments to Interim Medi-Cal Reimbursement
Audited Interim Medi-Cal Reimbursement (10/1/08-6/30/09) - Services Not Documented in an IEP or IFSP

	\$	115
Adj (3)		45
	\$	160
		(To Schedule 3)

LEA Provider Name:
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2008 THROUGH JUNE 30, 2009

LEA NPI Number:
1962698845

Provider Name							Fiscal Period			Provider Number / NPI		Adjustments
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT							JULY 1, 2008 THROUGH JUNE 30, 2009			SS3375200 / 1962698845		3
Report References							Explanation of Audit Adjustments			As Reported	Increase (Decrease)	As Adjusted
Cost Report			Audit Report									
Adj. No.	Page	Line	Col.	Sch.	Line	Col.						
ADJUSTMENTS TO W/S A-4 UNITS AND REIMBURSEMENT OF PROVIDING LEA SERVICES												
1	7-a	1i	B	10	1i	N/A	IEP Psychology Counseling, Individual Treatment - Initial	27	(13)	14		
	7-a	1m	B	10	1m	N/A	IEP Psychology Counseling, Group Treatment - Initial	53	(32)	21		
	7-b	7g	B	10	7g	N/A	IFSP Speech Therapy, Individual Treatment - Initial	6	(3)	3		
	7-b	7i	B	10	7i	N/A	IEP Speech Therapy, Individual Treatment - Initial	105	(43)	62		
	7-b	7k	B	10	7k	N/A	IFSP Speech Therapy, Group Treatment - Initial	183	(101)	82		
	7-b	7m	B	10	7m	N/A	IEP Speech Therapy, Group Treatment - Initial	1,342	(664)	678		
To adjust reported Medi-Cal Settlement Data to agree with the following:												
Fiscal Intermediary Paid Claims Summary:												
Report Date: October 31, 2012												
Payment Period: July 1, 2008 through October 29, 2012												
Service Period: July 1, 2008 through September 30, 2008												
Initial Treatment Services Corrected Claim Counts Report:												
Report Date: October 2010												
Payment Period: July 1, 2008 through October 31, 2010												
Service Period: July 1, 2008 through June 30, 2009												
42 CFR 413.20, 413.24, 413.50, 413.53, 413.60, 413.64 and 433.139												
CMS Pub. 15-1, Sections 2304, 2404 and 2408												
CCR, Title 22, Section 51541												

Provider Name							Fiscal Period			Provider Number / NPI		Adjustments
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT							JULY 1, 2008 THROUGH JUNE 30, 2009			SS3375200 / 1962698845		3
Report References							Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted		
Cost Report			Audit Report									
Adj. No.	Page	Line	Col.	Sch.	Line	Col.						
ADJUSTMENTS TO W/S A-4 UNITS AND REIMBURSEMENT OF PROVIDING LEA SERVICES												
2	8-a	1i	B	10.1	1i	N/A	IEP Psychology Counseling, Individual Treatment - Initial	169	(74)	95		
	8-a	1m	B	10.1	1m	N/A	IEP Psychology Counseling, Group Treatment - Initial	366	(69)	297		
	8-b	7g	B	10.1	7g	N/A	IFSP Speech Therapy, Individual Treatment - Initial	22	(11)	11		
	8-b	7i	B	10.1	7i	N/A	IEP Speech Therapy, Individual Treatment - Initial	583	(284)	299		
	8-b	7k	B	10.1	7k	N/A	IFSP Speech Therapy, Group Treatment - Initial	393	(211)	182		
	8-b	7m	B	10.1	7m	N/A	IEP Speech Therapy, Group Treatment - Initial	8,961	(4,431)	4,530		
	8-c	N/A	F	10.1	N/A	N/A	Total Interim Medi-Cal Reimbursement-Services Documented in an IEP or IFSP To adjust reported Medi-Cal Settlement Data to agree with the following:	\$892,979	\$863	\$893,842		
<p>Fiscal Intermediary Paid Claims Summary: Report Date: October 31, 2012 Payment Period: October 1, 2008 through October 29, 2012 Service Period: October 1, 2008 through June 30, 2009</p> <p>Initial Treatment Services Corrected Claim Counts Report: Report Date: October 2010 Payment Period: July 1, 2008 through October 31, 2010 Service Period: July 1, 2008 through June 30, 2009</p> <p>42 CFR 413.20, 413.24, 413.50, 413.53, 413.60, 413.64 and 433.139 CMS Pub. 15-1, Sections 2304, 2404 and 2408 CCR, Title 22, Section 51541</p>												

Provider Name							Fiscal Period		Provider Number / NPI		Adjustments
MURRIETA VALLEY UNIFIED SCHOOL DISTRICT							JULY 1, 2008 THROUGH JUNE 30, 2009		SS3375200 / 1962698845		3
Report References							Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted	
Cost Report			Audit Report								
Adj. No.	Page	Line	Col.	Sch.	Line	Col.					
ADJUSTMENTS TO W/S B-4 UNITS AND REIMBURSEMENT OF PROVIDING LEA SERVICES											
3	10-a	3e	B	11.1	3e	N/A	Non-IEP/IFSP Psychology Counseling, Group Treatment - Initial	2	(1)	1	
	10-b	N/A	F	11.1	N/A	N/A	Total Interim Medi-Cal Reimbursement-Services Not Documented in an IEP or IFSP To adjust reported Medi-Cal Settlement Data to agree with the following:	\$115	\$45	\$160	
<p>Fiscal Intermediary Paid Claims Summary: Report Date: October 31, 2012 Payment Period: October 1, 2008 through October 29, 2012 Service Period: October 1, 2008 through June 30, 2009</p> <p>Initial Treatment Services Corrected Claim Counts Report: Report Date: October 2010 Payment Period: July 1, 2008 through October 31, 2010 Service Period: July 1, 2008 through June 30, 2009</p> <p>42 CFR 413.20, 413.24, 413.50, 413.53, 413.60, 413.64 and 433.139 CMS Pub. 15-1, Sections 2304, 2404 and 2408 CCR, Title 22, Section 51541</p>											