

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

**ARVIN UNION SCHOOL DISTRICT
ARVIN, CALIFORNIA
PROVIDER NUMBER: SS1563313
NATIONAL PROVIDER IDENTIFIER (NPI): 1932264082**

**FISCAL PERIOD ENDED
JUNE 30, 2010**

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

**Section Chief: Alan J. Eng
Audit Supervisor: Michael Donohue
Auditor: Sharon Quan**



TOBY DOUGLAS
DIRECTOR

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



EDMUND G. BROWN JR.
GOVERNOR

April 30, 2014

Kathie Kouklis
Assistant Superintendent
Arvin Union School District
737 Bear Mountain Boulevard
Arvin, CA 93203

ARVIN UNION SCHOOL DISTRICT
PROVIDER NUMBER SS1563313
NATIONAL PROVIDER IDENTIFIER 1932264082
FISCAL PERIOD ENDED JUNE 30, 2010

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.

The data presented in the Summary of Findings represents the reported settlement due State in the amount of \$58,960, for the above fiscal period which was accepted as filed.

This determination includes the:

1. Summary of Findings and Supporting Schedules

The accepted 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 determination, overpayments to the provider are subject to recovery pursuant to Section 51458.1, Article 6 of Division 3, Title 22, California Code of Regulations.

Kathie Kouklis
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April 30, 2014

If you have questions regarding this report, you may contact 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:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| | | Reported | Audited |
|---|--|----------------|-------------|
| Total Net Overpayment/(Underpayment) for All LEA Services | | \$ 58,960 | \$ 58,960 |
| 1 | Medi-Cal Maximum Reimbursable for Services Documented in an IEP or IFSP (Schedule 2) | \$ 56,477 | \$ 56,477 |
| 2 | Medi-Cal Maximum Reimbursable for Services Not Documented in an IEP or IFSP (Schedule 3) | \$ - | \$ - |
| 3 | Total Maximum Reimbursement for Services | \$ 56,477 | \$ 56,477 |
| 4 | Interim Payment for Services Documented in an IEP or IFSP (Schedule 2) | \$ 115,437 | \$ 115,437 |
| 5 | Interim Payment for Services Not Documented in an IEP or IFSP (Schedule 3) | \$ - | \$ - |
| 6 | Total Interim Payment for LEA Services | \$ 115,437 | \$ 115,437 |
| 7 | Recovery of LEA payments for Unknown Modifiers | Audit Adj. () | |
| 8 | Other Payment Recovery Adjustments | Audit Adj. () | |
| 9 | Amount Due Provider (State) | \$ (58,960) | \$ (58,960) |

Schedule 2 - Summary of Services Documented in an IEP or IFSP

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| W/S A Practitioner Type | Reported Net 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 Net 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 Providing LEA Services Documented in an IEP or IFSP |
|---------------------------------|--|--|--|---|---|--|---|---|
| | A | B | A*B=C | D (Schedule 4) | E (Schedule 8) | D*E=F | G | F-G=H |
| 1. Psychologists | \$ 214,977 | 8.10% | \$ 17,415 | \$ 214,977 | 8.10% | \$ 17,415 | \$ - | \$ 17,415 |
| 2. Social Workers | - | 0 | - | - | 0 | - | - | - |
| 3. Counselors | - | 0 | - | - | 0 | - | - | - |
| 4. School Nurses | 97,264 | 13.32% | 12,956 | 97,264 | 13.32% | 12,956 | - | 12,956 |
| 5. Licensed Vocational Nurses | - | 0 | - | - | 0 | - | - | - |
| 6. Trained Health Care Aides | 114,987 | 53.33% | 61,327 | 114,987 | 53.33% | 61,327 | - | 61,327 |
| 7. Speech-Language Pathologists | 121,075 | 0 | - | 121,075 | 0 | - | - | - |
| 8. Audiologists | - | 0 | - | - | 0 | - | - | - |
| 9. Physical Therapists | - | 0 | - | - | 0 | - | - | - |
| 10. Occupational Therapists | - | 0 | - | - | 0 | - | - | - |
| 11. Physicians/Psychiatrists | - | 0 | - | - | 0 | - | - | - |
| Total | \$ 548,303 | | \$ 91,699 | \$ 548,303 | | \$ 91,699 | \$ - | \$ 91,699 |

| | Reported | Audited |
|---|------------|------------|
| a. Service Costs | \$ 91,699 | \$ 91,699 |
| b. Service Costs Excluded from Indirect Cost Rate Application | \$ - | \$ - |
| c. Service Costs Included in Indirect Cost Rate Application | \$ 91,699 | \$ 91,699 |
| d. Indirect Cost Rate (Schedule 7) | 0.00% | 0.00% |
| e. Indirect Costs (c * d) | \$ - | \$ - |
| f. Total Service Costs (a + e) | \$ 91,699 | \$ 91,699 |
| g. Federal Medical Assistance Percentage (FMAP) | 61.59% | 61.59% |
| h. Medi-Cal Maximum Reimbursable (f * g) | \$ 56,477 | \$ 56,477 |
| i. Interim Payment for Services Documented in an IEP | \$ 115,437 | \$ 115,437 |
| j. Overpayment/(Underpayment) (i - h) | \$ 58,960 | \$ 58,960 |

Schedule 3 - Summary of Services Not Documented in an IEP or IFSP

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| W/S B Practitioner Type | 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 | B | C=A*B | D (Schedule 4) | E (Schedule 8) | F=D*E | G | H=F-G |
| 1. Psychologists | \$ 214,977 | 0 | \$ - | \$ 214,977 | 0 | \$ - | \$ - | \$ - |
| 2. Social Workers | - | 0 | - | - | 0 | - | - | - |
| 3. Counselors | - | 0 | - | - | 0 | - | - | - |
| 4. School Nurses | 97,264 | 0 | - | 97,264 | 0 | - | - | - |
| 5. Licensed Vocational Nurses | - | 0 | - | - | 0 | - | - | - |
| 6. Trained Health Care Aides | 114,987 | 0 | - | 114,987 | 0 | - | - | - |
| 7. Speech-Language Pathologists | 121,075 | 0 | - | 121,075 | 0 | - | - | - |
| 8. Audiologists | - | 0 | - | - | 0 | - | - | - |
| 9. Physical Therapists | - | 0 | - | - | 0 | - | - | - |
| 10. Occupational Therapists | - | 0 | - | - | 0 | - | - | - |
| 11. Physicians/Psychiatrists | - | 0 | - | - | 0 | - | - | - |
| 12. Optometrists | - | 0 | - | - | 0 | - | - | - |
| 13. Audiometrists | - | 0 | - | - | 0 | - | - | - |
| Total | \$ 548,303 | | \$ - | \$ 548,303 | | \$ - | \$ - | \$ - |

| | Reported | Audited |
|---|----------|---------|
| a. Service Costs | \$ - | \$ - |
| b. Service Costs Excluded from Indirect Cost Rate Application | \$ - | \$ - |
| c. Service Costs Included in Indirect Cost Rate Application | \$ - | \$ - |
| d. Indirect Cost Rate (Schedule 7) | 0.00% | 0.00% |
| e. Indirect Costs (c * d) | \$ - | \$ - |
| f. Total Service Costs (a + e) | \$ - | \$ - |
| g. Federal Medical Assistance Percentage (FMAP) | 61.59% | 61.59% |
| h. Medi-Cal Maximum Reimbursable (f * g) | \$ - | \$ - |
| i. Interim Payment for Services Documented in an IEP | \$ - | \$ - |
| j. Overpayment/(Underpayment) (i - h) | \$ - | \$ - |

Schedule 4 - Summary of Audited Personnel Costs

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| <i>(Object Code)</i> | Audited Salary Expenditures <i>(1000-2999)</i> | Audited Benefit Expenditures <i>(3000-3999)</i> | Total Audited Other Costs | Audited Federal Revenues | Audited Net Total Personnel Costs |
|---------------------------------|--|---|------------------------------|--------------------------------|--------------------------------------|
| <u>Practitioner Type</u> | <u>A</u> | <u>B</u> | <u>C</u> | <u>D</u> | <u>E = A+B+C-D</u> |
| | (Schedule 5) | (Schedule 5) | (Schedule 6) | (Schedule 5) | |
| 1. Psychologists | \$ 168,610 | \$ 41,655 | \$ 4,712 | \$ - | \$ 214,977 |
| 2. Social Workers | - | - | - | - | \$ - |
| 3. Counselors | - | - | - | - | \$ - |
| 4. School Nurses | 69,835 | 19,655 | 7,774 | - | \$ 97,264 |
| 5. Licensed Vocational Nurses | - | - | - | - | \$ - |
| 6. Trained Health Care Aides | 236,126 | 77,424 | 1,264 | 199,827 | \$ 114,987 |
| 7. Speech-Language Pathologists | 195,992 | 48,479 | 68 | 123,464 | \$ 121,075 |
| 8. Audiologists | - | - | - | - | \$ - |
| 9. Physical Therapists | - | - | - | - | \$ - |
| 10. Occupational Therapists | - | - | - | - | \$ - |
| 11. Physicians/Psychiatrists | - | - | - | - | \$ - |
| 12. Optometrists | - | - | - | - | \$ - |
| 13. Audiometrists | - | - | - | - | \$ - |
| Total | \$ 670,563 | \$ 187,214 | \$ 13,817 | \$ 323,291 | \$ 548,303 |
| | | | | | (Schedule 2,3) |

Schedule 5 - Salary Expenditures

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| W/S A.1/B.1 (Object Code) | Reported Salary Expenditures (1000-2999) | Audit Adj. () | Audited Salary Expenditures | Reported Benefit Expenditures (3000-3999) | Audit Adj. () | Audited Benefit Expenditures | Reported Federal Revenues | Audit Adj. () | Audited Federal Revenues |
|---------------------------------|--|-------------------|--------------------------------|---|-------------------|---------------------------------|---------------------------------|-------------------|--------------------------------|
| Practitioner Type | A | | | B | | | B | | |
| 1. Psychologists | \$ 168,610 | | \$ 168,610 | \$ 41,655 | | \$ 41,655 | | | \$ - |
| 2. Social Workers | | | - | | | - | | | - |
| 3. Counselors | | | - | | | - | | | - |
| 4. School Nurses | 69,835 | | 69,835 | 19,655 | | 19,655 | | | - |
| 5. Licensed Vocational Nurses | | | - | | | - | | | - |
| 6. Trained Health Care Aides | 236,126 | | 236,126 | 77,424 | | 77,424 | 199,827 | | 199,827 |
| 7. Speech-Language Pathologists | 195,992 | | 195,992 | 48,479 | | 48,479 | 123,464 | | 123,464 |
| 8. Audiologists | | | - | | | - | | | - |
| 9. Physical Therapists | | | - | | | - | | | - |
| 10. Occupational Therapists | | | - | | | - | | | - |
| 11. Physicians/Psychiatrists | | | - | | | - | | | - |
| 12. Optometrists | | | - | | | - | | | - |
| 13. Audiometrists | | | - | | | - | | | - |
| Total | \$ 670,563 | \$ - | \$ 670,563 | \$ 187,214 | \$ - | \$ 187,214 | \$ 323,291 | \$ - | \$ 323,291 |
| | | | (Schedule 4) | | | (Schedule 4) | | | (Schedule 4) |

Schedule 6 - Other Costs

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| W/S A-1/B-1 (Object Code) 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 | \$ 3,812 | | 900 | | | | | 4,712 |
| 2. Social Workers | | | | | | | | - |
| 3. Counselors | | | | | | | | - |
| 4. School Nurses | 7,774 | | | | | | | 7,774 |
| 5. Licensed Vocational Nurses | | | | | | | | - |
| 6. Trained Health Care Aides | | 804 | | | 460 | | | 1,264 |
| 7. Speech-Language Pathologists | 68 | | | | | | | 68 |
| 8. Audiologists | | | | | | | | - |
| 9. Physical Therapists | | | | | | | | - |
| 10. Occupational Therapists | | | | | | | | - |
| 11. Physicians/Psychiatrists | | | | | | | | - |
| 12. Optometrists | | | | | | | | - |
| 13. Audiometrists | | | | | | | | - |
| Total | \$ 11,653 | \$ 804 | \$ 900 | \$ - | \$ 460 | \$ - | \$ - | \$ 13,817 |

| Audited (Object Code) 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 | 3,812 | - | 900 | - | - | - | - | 4,712 |
| 2. Social Workers | - | - | - | - | - | - | - | - |
| 3. Counselors | - | - | - | - | - | - | - | - |
| 4. School Nurses | 7,774 | - | - | - | - | - | - | 7,774 |
| 5. Licensed Vocational Nurses | - | - | - | - | - | - | - | - |
| 6. Trained Health Care Aides | - | 804 | - | - | 460 | - | - | 1,264 |
| 7. Speech-Language Pathologists | 68 | - | - | - | - | - | - | 68 |
| 8. Audiologists | - | - | - | - | - | - | - | - |
| 9. Physical Therapists | - | - | - | - | - | - | - | - |
| 10. Occupational Therapists | - | - | - | - | - | - | - | - |
| 11. Physicians/Psychiatrists | - | - | - | - | - | - | - | - |
| 12. Optometrists | - | - | - | - | - | - | - | - |
| 13. Audiometrists | - | - | - | - | - | - | - | - |
| Total | \$ 11,653 | \$ 804 | \$ 900 | \$ - | \$ 460 | \$ - | \$ - | \$ 13,817 |

(Schedule 4)

Schedule 7 - Adjustments to Other Costs

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| (Object Code) | 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 Audit Adj. () | B Audit Adj. () | C Audit Adj. () | D Audit Adj. () | E Audit Adj. () | F Audit Adj. () | G Audit Adj. () | H = Sum A-G |
| Practitioner Type | () | () | () | () | () | () | () | |
| 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 | | | | | | | | - |
| Total | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |

(Schedule 6)

Reported Indirect Cost Rate
Audit Adj. ()
Audited Indirect Cost Rate
0.00%
(Schedule 2,3)

Schedule 8 - Percent of Time Providing LEA Services

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| 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 Not Documented in an IEP or IFSP | Percent of Time Providing LEA Services Not Documented in an IEP of IFSP |
|---------------------------------|---|---|--|--|---|---|---|
| | A (Schedule 9) | B (Schedule 9) | C=A+B | D (Schedule 10) | E = D/C | F (Schedule 11) | G = F/C |
| 1. Psychologists | 3,012 | - | 3,012 | 244 | 8.10% | - | 0 |
| 2. Social Workers | - | - | - | - | 0 | - | 0 |
| 3. Counselors | - | - | - | - | 0 | - | 0 |
| 4. School Nurses | 1,432 | - | 1,432 | 191 | 13.32% | - | 0 |
| 5. Licensed Vocational Nurses | - | - | - | - | 0 | - | 0 |
| 6. Trained Health Care Aides | 9,882 | - | 9,882 | 5,271 | 53.33% | - | 0 |
| 7. Speech-Language Pathologists | 4,119 | - | 4,119 | - | 0 | - | 0 |
| 8. Audiologists | - | - | - | - | 0 | - | 0 |
| 9. Physical Therapists | - | - | - | - | 0 | - | 0 |
| 10. Occupational Therapists | - | - | - | - | 0 | - | 0 |
| 11. Physicians/Psychiatrists | - | - | - | - | 0 | - | 0 |
| 12. Optometrists | - | - | - | N/A | 0 | - | 0 |
| 13. Audiometrists | - | - | - | N/A | 0 | - | 0 |
| Total | 18,445 | - | 18,445 | 5,705 | | - | |
| | | | | | (Schedule 2) | | (Schedule 3) |

Schedule 9 - Adjustments to Reported Time

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| W/S A-3/B-3 Col C Practitioner Type | Reported Total Hours Required to Work (Employees) | Audit Adj. () | Audited Total Hours Required to Work (Employees) |
|--|---|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|--|
| | C | | | | | | | | |
| 1. Psychologists | 3,012 | | | | | | | | 3,012 |
| 2. Social Workers | | | | | | | | | - |
| 3. Counselors | | | | | | | | | - |
| 4. School Nurses | 1,432 | | | | | | | | 1,432 |
| 5. Licensed Vocational Nurses | | | | | | | | | - |
| 6. Trained Health Care Aides | 9,882 | | | | | | | | 9,882 |
| 7. Speech-Language Pathologists | 4,119 | | | | | | | | 4,119 |
| 8. Audiologists | | | | | | | | | - |
| 9. Physical Therapists | | | | | | | | | - |
| 10. Occupational Therapists | | | | | | | | | - |
| 11. Physicians/Psychiatrists | | | | | | | | | - |
| 12. Optometrists | | | | | | | | | - |
| 13. Audiometrists | | | | | | | | | - |
| Total | 18,445 | - | 18,445 |

(Schedule 8)

| W/S A-3/B-3 Col D Practitioner Type | Reported Total Contractor Hours Paid | Audit Adj. () | Audited Total Contractor Hours Paid |
|--|--|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|---|
| | D | | | | | | | | |
| 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 | | | | | | | | | - |
| Total | - | - | - | - | - | - | - | - | - |

(Schedule 8)

Schedule 10: Units and Reimbursement of Providing LEA Services Documented in an IEP or IFSP

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| Row | Service Description | Procedure Code | IFSP (TL) or IEP (TM) Modifier | Other Required Modifier(s) | Time Spent Per Unit | Reported Total Units W/S A-4 Col. B | Audit Adj. | Reported 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 |
|-----|---|----------------|--------------------------------|----------------------------|---------------------|-------------------------------------|------------|----------------------|--|---|
| | | | | | A | | () | | | |
| 1a | IFSP Psychological Assessment: Initial | 96101 | TL | - | 360 | | | - | - | 0 |
| 1b | IFSP Psychological Assessment: Annual | 96101 | TL | 52 | 120 | | | - | - | 0 |
| 1c | IFSP Psychological Assessment: Amended | 96101 | TL | TS | 120 | | | - | - | 0 |
| 1d | IEP Psychological Assessment: Initial/Triennial | 96101 | TM | - | 360 | 37 | | 37 | 222 | 222 |
| 1e | IEP Psychological Assessment: Annual | 96101 | TM | 52 | 120 | 3 | | 3 | 6 | 6 |
| 1f | IEP Psychological Assessment: Amended | 96101 | TM | TS | 120 | 8 | | 8 | 16 | 16 |
| 1g | IFSP Psychology Counseling, Individual Treatment - Initial | 96152 | TL | AH | 55 | | | - | - | 0 |
| 1h | IFSP Psychology Counseling, Individual Treatment - Additional | 96152 | TL | AH, 22 | 15 | | | - | - | 0 |
| 1i | IEP Psychology Counseling, Individual Treatment - Initial | 96152 | TM | AH | 55 | | | - | - | 0 |
| 1j | IEP Psychology Counseling, Individual Treatment - Additional | 96152 | TM | AH, 22 | 15 | | | - | - | 0 |
| 1k | IFSP Psychology Counseling, Group Treatment - Initial | 96153 | TL | AH | 73 | | | - | - | 0 |
| 1l | IFSP Psychology Counseling, Group Treatment - Additional | 96153 | TL | AH, 22 | 15 | | | - | - | 0 |
| 1m | IEP Psychology Counseling, Group Treatment - Initial | 96153 | TM | AH | 73 | | | - | - | 0 |
| 1n | IEP Psychology Counseling, Group Treatment - Additional | 96153 | TM | AH, 22 | 15 | | | - | - | 0 |
| | Psychologists - Totals | | | | | | | | 244 | 244 |
| 2a | IFSP Psychosocial Status Assessment: Initial | 96150 | TL | AJ | 15 | | | - | - | 0 |
| 2b | IFSP Psychosocial Status Assessment: Annual | 96150 | TL | AJ, 52 | 15 | | | - | - | 0 |
| 2c | IFSP Psychosocial Status Assessment: Amended | 96151 | TL | AJ | 15 | | | - | - | 0 |
| 2d | IEP Psychosocial Status Assessment: Initial/Triennial | 96150 | TM | AJ | 15 | | | - | - | 0 |
| 2e | IEP Psychosocial Status Assessment: Annual | 96150 | TM | AJ, 52 | 15 | | | - | - | 0 |
| 2f | IEP Psychosocial Status Assessment: Amended | 96151 | TM | AJ | 15 | | | - | - | 0 |
| 2g | IFSP Psychology Counseling, Individual Treatment - Initial | 96152 | TL | AJ | 55 | | | - | - | 0 |
| 2h | IFSP Psychology Counseling, Individual Treatment - Additional | 96152 | TL | AJ, 22 | 15 | | | - | - | 0 |
| 2i | IEP Psychology Counseling, Individual Treatment - Initial | 96152 | TM | AJ | 55 | | | - | - | 0 |
| 2j | IEP Psychology Counseling, Individual Treatment - Additional | 96152 | TM | AJ, 22 | 15 | | | - | - | 0 |
| 2k | IFSP Psychology Counseling, Group Treatment - Initial | 96153 | TL | AJ | 73 | | | - | - | 0 |
| 2l | IFSP Psychology Counseling, Group Treatment - Additional | 96153 | TL | AJ, 22 | 15 | | | - | - | 0 |
| 2m | IEP Psychology Counseling, Group Treatment - Initial | 96153 | TM | AJ | 73 | | | - | - | 0 |
| 2n | IEP Psychology Counseling, Group Treatment - Additional | 96153 | TM | AJ, 22 | 15 | | | - | - | 0 |
| | Social Workers - Totals | | | | | | | | - | - |
| 3a | IFSP Psychosocial status Assessment: Initial | 96150 | TL | - | 15 | | | - | - | 0 |
| 3b | IFSP Psychosocial status Assessment: Annual | 96150 | TL | 52 | 15 | | | - | - | 0 |
| 3c | IFSP Psychosocial status Assessment: Amended | 96151 | TL | - | 15 | | | - | - | 0 |
| 3d | IEP Psychosocial status Assessment: Initial/Triennial | 96150 | TM | - | 15 | | | - | - | 0 |
| 3e | IEP Psychosocial status Assessment: Annual | 96150 | TM | 52 | 15 | | | - | - | 0 |
| 3f | IEP Psychosocial status Assessment: Amended | 96151 | TM | - | 15 | | | - | - | 0 |
| 3g | IFSP Psychology Counseling, Individual Treatment - Initial | 96152 | TL | - | 55 | | | - | - | 0 |
| 3h | IFSP Psychology Counseling, Individual Treatment - Additional | 96152 | TL | 22 | 15 | | | - | - | 0 |
| 3i | IEP Psychology Counseling, Individual Treatment - Initial | 96152 | TM | - | 55 | | | - | - | 0 |
| 3j | IEP Psychology Counseling, Individual Treatment - Additional | 96152 | TM | 22 | 15 | | | - | - | 0 |
| 3k | IFSP Psychology Counseling, Group Treatment - Initial | 96153 | TL | - | 73 | | | - | - | 0 |
| 3l | IFSP Psychology Counseling, Group Treatment - Additional | 96153 | TL | 22 | 15 | | | - | - | 0 |
| 3m | IEP Psychology Counseling, Group Treatment - Initial | 96153 | TM | - | 73 | | | - | - | 0 |
| 3n | IEP Psychology Counseling, Group Treatment - Additional | 96153 | TM | 22 | 15 | | | - | - | 0 |
| | Counselors - Totals | | | | | | | | - | - |

Schedule 10: Units and Reimbursement of Providing LEA Services Documented in an IEP or IFSP

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| Row | Service Description | Procedure Code | IFSP (TL) or IEP (TM) Modifier | Other Required Modifier(s) | Time Spent Per Unit | Reported Total Units W/S A-4 Col. B | Audit Adj. | Reported 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 |
|-----|---|----------------|--------------------------------|----------------------------|---------------------|-------------------------------------|------------|----------------------|--|---|
| | | | | | A | | () | | | |
| 4a | IFSP Health Assessment: Initial | T1001 | TL | - | 105 | | | - | - | 0 |
| 4b | IFSP Health Assessment: Annual | T1001 | TL | 52 | 60 | | | - | - | 0 |
| 4c | IFSP Health Assessment: Amended | T1001 | TL | TS | 60 | | | - | - | 0 |
| 4d | IEP Health Assessment: Initial/Triennial | T1001 | TM | - | 105 | 32 | | 32 | 56 | 56 |
| 4e | IEP Health Assessment: Annual | T1001 | TM | 52 | 60 | 4 | | 4 | 4 | 4 |
| 4f | IEP Health Assessment: Amended | T1001 | TM | TS | 60 | 4 | | 4 | 4 | 4 |
| 4g | IFSP Nursing Services | T1002 | TL | - | 15 | | | - | - | 0 |
| 4h | IEP Nursing Services | T1002 | TM | - | 15 | 507 | | 507 | 127 | 127 |
| | School Nurses - Totals | | | | | | | | 191 | 191 |
| 5a | IFSP LVN Services | T1003 | TL | - | 15 | | | - | - | 0 |
| 5b | IEP LVN Services | T1003 | TM | - | 15 | | | - | - | 0 |
| | Licensed Vocational Nurses - Totals | | | | | | | | - | - |
| 6a | IFSP Trained Health Care Aide Services | T1004 | TL | - | 15 | | | - | - | 0 |
| 6b | IEP Trained Health Care Aide Services | T1004 | TM | - | 15 | 21,082 | | 21,082 | 5,271 | 5,271 |
| | Trained Health Care Aides - Totals | | | | | | | | 5,271 | 5,271 |
| 7a | IFSP Speech/Language Assessment: Initial | 92506 | TL | GN | 165 | | | - | - | 0 |
| 7b | IFSP Speech/Language Assessment: Annual | 92506 | TL | GN, 52 | 90 | | | - | - | 0 |
| 7c | IFSP Speech/Language Assessment: Amended | 92506 | TL | GN, TS | 90 | | | - | - | 0 |
| 7d | IEP Speech/Language Assessment: Initial/Triennial | 92506 | TM | GN | 165 | | | - | - | 0 |
| 7e | IEP Speech/Language Assessment: Annual | 92506 | TM | GN, 52 | 90 | | | - | - | 0 |
| 7f | IEP Speech/Language Assessment: Amended | 92506 | TM | GN, TS | 90 | | | - | - | 0 |
| 7g | IFSP Speech Therapy, Individual Treatment - Initial | 92507 | TL | GN | 50 | | | - | - | 0 |
| 7h | IFSP Speech Therapy, Individual Treatment - Additional | 92507 | TL | GN, 22 | 15 | | | - | - | 0 |
| 7i | IEP Speech Therapy, Individual Treatment - Initial | 92507 | TM | GN | 50 | | | - | - | 0 |
| 7j | IEP Speech Therapy, Individual Treatment - Additional | 92507 | TM | GN, 22 | 15 | | | - | - | 0 |
| 7k | IFSP Speech Therapy, Group Treatment - Initial | 92508 | TL | GN | 55 | | | - | - | 0 |
| 7l | IFSP Speech Therapy, Group Treatment - Additional | 92508 | TL | GN, 22 | 15 | | | - | - | 0 |
| 7m | IEP Speech Therapy, Group Treatment - Initial | 92508 | TM | GN | 55 | | | - | - | 0 |
| 7n | IEP Speech Therapy, Group Treatment - Additional | 92508 | TM | GN, 22 | 15 | | | - | - | 0 |
| | Speech-Language Pathologists - Totals | | | | | | | | - | - |
| 8a | IFSP Audiological Assessment: Initial | 92506 | TL | - | 120 | | | - | - | 0 |
| 8b | IFSP Audiological Assessment: Annual | 92506 | TL | 52 | 90 | | | - | - | 0 |
| 8c | IFSP Audiological Assessment: Amended | 92506 | TL | TS | 90 | | | - | - | 0 |
| 8d | IEP Audiological Assessment: Initial/Triennial | 92506 | TM | - | 120 | | | - | - | 0 |
| 8e | IEP Audiological Assessment: Annual | 92506 | TM | 52 | 90 | | | - | - | 0 |
| 8f | IEP Audiological Assessment: Amended | 92506 | TM | TS | 90 | | | - | - | 0 |
| 8g | IFSP Audiology, Individual Treatment - Initial | 92507 | TL | - | 55 | | | - | - | 0 |
| 8h | IFSP Audiology, Individual Treatment - Additional | 92507 | TL | 22 | 15 | | | - | - | 0 |
| 8i | IEP Audiology, Individual Treatment - Initial | 92507 | TM | - | 55 | | | - | - | 0 |
| 8j | IEP Audiology, Individual Treatment - Additional | 92507 | TM | 22 | 15 | | | - | - | 0 |
| 8k | IFSP Hearing Check | V5011 | TL | - | 35 | | | - | - | 0 |
| 8l | IEP Hearing Check | V5011 | TM | - | 35 | | | - | - | 0 |
| | Audiologists - Totals | | | | | | | | - | - |
| 9a | IFSP Physical Therapy Assessment: Initial | 97001 | TL | - | 172.8 | | | - | - | 0 |
| 9b | IFSP Physical Therapy Assessment: Annual | 97001 | TL | 52 | 120 | | | - | - | 0 |
| 9c | IFSP Physical Therapy Assessment: Amended | 97002 | TL | - | 120 | | | - | - | 0 |
| 9d | IEP Physical Therapy Assessment: Initial/Triennial | 97001 | TM | - | 172.8 | | | - | - | 0 |
| 9e | IEP Physical Therapy Assessment: Annual | 97001 | TM | 52 | 120 | | | - | - | 0 |
| 9f | IEP Physical Therapy Assessment: Amended | 97002 | TM | - | 120 | | | - | - | 0 |
| 9g | IFSP Physical Therapy Individual Treatment - Initial | 97110 | TL | GP | 48 | | | - | - | 0 |
| 9h | IFSP Physical Therapy Individual Treatment - Additional | 97110 | TL | GP, 22 | 15 | | | - | - | 0 |
| 9i | IEP Physical Therapy Individual Treatment - Initial | 97110 | TM | GP | 48 | | | - | - | 0 |
| 9j | IEP Physical Therapy Individual Treatment - Additional | 97110 | TM | GP, 22 | 15 | | | - | - | 0 |
| | Physical Therapists - Totals | | | | | | | | - | - |

Schedule 10: Units and Reimbursement of Providing LEA Services Documented in an IEP or IFSP

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| Row | Service Description | Procedure Code | IFSP (TL) or IEP (TM) Modifier | Other Required Modifier(s) | Time Spent Per Unit | Reported Total Units W/S A-4 Col. B | Audit Adj. | Reported 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 | |
|--|---|----------------|--------------------------------|----------------------------|---------------------|-------------------------------------|------------|----------------------|--|---|---|
| | | | | | A | | () | | | | |
| 10a | IFSP Occupational Therapy Assessment: Initial | 97003 | TL | - | 172.8 | | | - | - | 0 | |
| 10b | IFSP Occupational Therapy Assessment: Annual | 97003 | TL | 52 | 120 | | | - | - | 0 | |
| 10c | IFSP Occupational Therapy Assessment: Amended | 97004 | TL | - | 120 | | | - | - | 0 | |
| 10d | IEP Occupational Therapy Assessment: Initial/Triennial | 97003 | TM | - | 172.8 | | | - | - | 0 | |
| 10e | IEP Occupational Therapy Assessment: Annual | 97003 | TM | 52 | 120 | | | - | - | 0 | |
| 10f | IEP Occupational Therapy Assessment: Amended | 97004 | TM | - | 120 | | | - | - | 0 | |
| 10g | IFSP Occupational Therapy Individual Treatment - Initial | 97110 | TL | GO | 57 | | | - | - | 0 | |
| 10h | IFSP Occupational Therapy Individual Treatment - Additional | 97110 | TL | GO, 22 | 15 | | | - | - | 0 | |
| 10i | IEP Occupational Therapy Individual Treatment - Initial | 97110 | TM | GO | 57 | | | - | - | 0 | |
| 10j | IEP Occupational Therapy Individual Treatment - Additional | 97110 | TM | GO, 22 | 15 | | | - | - | 0 | |
| Occupational Therapists - Totals | | | | | | | | | - | - | 0 |
| 11a | IFSP Health/Nutrition Assessment: Initial | 96150 | TL | AG | 15 | | | - | - | 0 | |
| 11b | IFSP Health/Nutrition Assessment: Annual | 96150 | TL | AG, 52 | 15 | | | - | - | 0 | |
| 11c | IFSP Health/Nutrition Assessment: Amended | 96151 | TL | AG | 15 | | | - | - | 0 | |
| 11d | IEP Health/Nutrition Assessment: Initial/Triennial | 96150 | TM | AG | 15 | | | - | - | 0 | |
| 11e | IEP Health/Nutrition Assessment: Annual | 96150 | TM | AG, 52 | 15 | | | - | - | 0 | |
| 11f | IEP Health/Nutrition Assessment: Amended | 96151 | TM | AG | 15 | | | - | - | 0 | |
| 11g | IFSP Psychology Counseling, Individual Treatment - Initial | 96152 | TL | AG | 55 | | | - | - | 0 | |
| 11h | IFSP Psychology Counseling, Individual Treatment - Additional | 96152 | TL | AG, 22 | 15 | | | - | - | 0 | |
| 11i | IEP Psychology Counseling, Individual Treatment - Initial | 96152 | TM | AG | 55 | | | - | - | 0 | |
| 11j | IEP Psychology Counseling, Individual Treatment - Additional | 96152 | TM | AG, 22 | 15 | | | - | - | 0 | |
| 11k | IFSP Psychology Counseling, Group Treatment - Initial | 96153 | TL | AG | 73 | | | - | - | 0 | |
| 11l | IFSP Psychology Counseling, Group Treatment - Additional | 96153 | TL | AG, 22 | 15 | | | - | - | 0 | |
| 11m | IEP Psychology Counseling, Group Treatment - Initial | 96153 | TM | AG | 73 | | | - | - | 0 | |
| 11n | IEP Psychology Counseling, Group Treatment - Additional | 96153 | TM | AG, 22 | 15 | | | - | - | 0 | |
| Physicians/Psychiatrists - Totals | | | | | | | | | - | - | 0 |

(Schedule 8)

Reported Interim Medi-Cal Reimbursement - Services Documented in an IEP or IFSP
Adjustments to Interim Medi-Cal Reimbursement - Services Documented in an IEP or IFSP
Audited Interim Medi-Cal Reimbursement - Services Documented in an IEP or IFSP

| | | |
|----------------|----|---------|
| | \$ | 115,437 |
| Audit Adj. () | | |
| | \$ | 115,437 |

(Schedule 2)

Schedule 11: Units and Reimbursement of Providing LEA Services Not Documented in an IEP or IFSP

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| Row | Service Description | Procedure Code | Required Modifier(s) | Reported Total Units W/S B-4, Col. B | 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

LEA Provider Name:
ARVIN UNION SCHOOL DISTRICT

Fiscal Year:
JULY 1, 2009 THROUGH JUNE 30, 2010

NPI Number:
1932264082

| Row | Service Description | Procedure Code | Required Modifier(s) | Reported Total Units W/S B-4, Col. B | 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 | | | | | | - | - |
| | | | | | | | | (Schedule 8) |
| | Reported Interim Medi-Cal Reimbursement - Services Not Documented in an IEP or IFSP | | | | | | | |
| | Adjustments to Interim Medi-Cal Reimbursement - Services Not Documented in an IEP or IFSP | | | | | | Audit Adj. () | |
| | Audited Interim Medi-Cal Reimbursement - Services Not Documented in an IEP or IFSP | | | | | | | \$ - |
| | | | | | | | | (Schedule 3) |