

DEPARTMENT OF HEALTH SERVICES

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November 19, 1996



PPL NO. 96-031

All County Medi-Cal Administrative Activities
Targeted Case Management Coordinators and
Advisory Committee Members

REVIEW OF MEDI-CAL ADMINISTRATIVE ACTIVITIES CLAIMING PLANS

The purpose of this letter is to provide Local Governmental Agencies (LGAs) with the preliminary results of the Department of Health Services' (DHS) review of Medi-Cal Administrative Activities (MAA) claiming plans.

After reviewing several claiming plans submitted by LGAs, we wish to clarify the distinction between Outreach A and Outreach B activities. ***Outreach A is a campaign or program that is directed toward providing information about the Medi-Cal program, for one of two purposes:***

(1) encouraging those individuals who may be eligible for Medi-Cal to apply for Medi-Cal, or

(2) bringing actual Medi-Cal eligibles into specific Medi-Cal covered services.

Examples of a campaign or activity which directs only Medi-Cal eligibles to Medi-Cal services include an, Early and Periodic Screening Diagnostic Treatment (EPSDT) informational campaign or referral of identified Medi-Cal clients to Medi-Cal providers. Outreach A is not discounted.

Outreach B is defined as campaigns directed toward bringing specific high-risk populations into health care services covered by Medi-Cal, targeting both Medi-Cal and non-Medi-Cal eligibles. Outreach B campaigns target persons in the general population with specific diseases, such as persons with acquired immune deficiency syndrome (AIDS), tuberculosis (TB) and diabetes, or persons with potential health problems, such as low-income pregnant women or low-income families. The assumption is that some percentage of the audience will access Medi-Cal services. Therefore, the cost of the Outreach B is discounted by a Medi-Cal percentage.

To further illustrate the distinction between Outreach A and B activities, enclosed is an example of a MAA claiming plan, documenting Outreach A and B. The enclosed example has been approved by the federal Health Care Financing Administration (HCFA).

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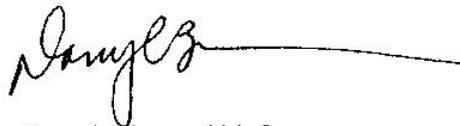
In addition, to facilitate the resubmission of necessary updates to your MAA claiming plans, or the development of amendments to the MAA claiming plans, please note the following:

- When an activity is described, DHS and HCFA require specificity in the MAA claiming plan. LGAs should avoid the terms “ongoing” or “ongoing activity” in lieu of specific information. These terms were used in several MAA claiming plans to describe the “length of time,” “location,” or “number of times the activity is performed.” To facilitate the DHS and HCFA review process it is necessary for LGAs to respond with as much detail as possible.
- Position descriptions and/or duty statements are required as supporting documentation and must be attached to the MAA claiming plan. The basic elements of a position description and/or duty statement were provided in PPL No. 96-025. Supplementals and/or addendums to current position descriptions and/or duty statements should not be submitted as a substitute for the official duty statement. Position descriptions and/or duty statements with job descriptions relating to the previous Medi-Cal Administrative Claiming (MAC) program must be revised.

When an LGA designs a duty statement specifically for the TCM/MAA programs, it should include all of the activities the employee performs, including activities that are not TCM/MAA related. In addition, the MAA claiming plan must correspond with the activities performed by the employees and listed on the position description and/or duty statement.

When the DHS review of each MAA claiming plan is completed, each LGA will be notified of the specific findings relative to the review. If you have any questions please contact the analyst assigned to your LGA.

Sincerely,

A handwritten signature in black ink, appearing to read 'Darryl Nixon', followed by a long horizontal line extending to the right.

Darryl Nixon, Chief
Medi-Cal Benefits Branch

Enclosure

cc: See next page

**(A) MEDI-CAL OUTREACH A
- NOT DISCOUNTED -**

(Attach additional pages if needed. See description and instructions on reverse side.)

Claiming Unit: **Public Health Nursing**
Local Governmental Agency: **ABC County**

Submittal Date: **9-15-96**

1. Identify the type of Outreach A to be performed:

1. Bringing potential eligibles into the Medi-Cal system for the purpose of determining Medi-Cal eligibility.
2. *Bringing actual Medi-Cal eligibles into Medi-Cal services.*

2. Provide a clear description of how Outreach A activities will be performed to achieve the objective:

The county conducts monthly health fair campaigns in five low-income neighborhoods located throughout the county. The campaigns are designed to reach out to individuals who do not or will not seek medical care for themselves and/or their family. During the campaigns, county staff spend the first hour distributing pamphlets that address Medi-Cal program eligibility requirements and services, explaining the content. Pamphlets contain information on how to access medical care through the State's Medi-Cal program and where to access specific Medi-Cal services such as Early and Periodic Screening Diagnostic Treatment (EPSDT), also referred to as Child Health and Disability Prevention (CHDP). Only this segment of the campaign will be claimed as Outreach A. All other activities will be coded to other program activities or direct patient care.

3. Identify the population targeted: The low-income population who are potentially eligible to receive Medi-Cal benefits because of their medical condition and financial situation.

4. Provide the length of time of Outreach A (days and or hours):

The first Saturday of every month. Health fairs operate from 9:00 a.m. to 6:00 p.m.
Only 9:00 a.m. to 10:00 a.m. will be claimed as Outreach A.

5. Provide the Locations where Outreach A will be conducted:

Target Shopping Center, 1600 Broadway, North Highlands.
Mission Baptist Church, 7200 Watt Avenue, Rio Linda.
K-Mart, 6500 Fruitridge Street, South Sacramento.
K-Mart, 5600 Orangevale Blvd, Orangevale.
Community Center, 2100 P Street, Freeport.

6. Provide the number of times Outreach A will be conducted during the fiscal year or indicate if it's ongoing:

This is an ongoing campaign scheduled for the first Saturday of every month, at five locations identified above. (60 times per year)

7. If not using the time survey describe how the costs will be developed and documented:

The 15 staff assigned to this campaign will participate in the time survey per the State's instruction. Only time spent on outreach will be identified as MAA. Direct medical services will be documented on the time survey as direct patient care. The costs of informational materials produced by the county will be direct charged.

8. Provide the names of the subcontractors: None

DHS USE ONLY

CP Reference No. _____ Original Approval Date: _____ Amendment Approval Date: _____

**(B) MEDI-CAL OUTREACH B
- DISCOUNTED -**

(Attach additional pages if needed. See description and instructions on reverse.)

Claiming Unit: **Public Health Nursing**
Local Governmental Agency: **ABC County**

Submittal Date: **9-15-96**

1. **Identify the Type of Outreach performed:** 1 and 3
 1. Campaigns directed toward bringing high-risk populations into health care services.
 3. Conduct specific Medi-Cal health education programs that are included as part of a broader general health education program.
2. **Provide a clear description of how Outreach B activities will be performed to achieve the objective:**
The Public Health Nursing (PHN) Unit conducts the HAVE A HEALTHY BABY campaign twelve (12) times each year. The campaign consists of monthly presentations by public health nurses. Parents/care-givers are provided *information on* how to access necessary health care services such as receiving immunizations for well baby care. The Early and Periodic Screening Diagnosis Treatment (EPSDT) program is discussed.
3. **Identify the population targeted:**
Young adults, low income, high-risk families who need health care services or treatment for pregnancy, newborn and/or young children.
4. **Provide the method for calculating the Medi-Cal discount:** Actual Medi-Cal head count.
5. **Provide the length of time Outreach B will be conducted (days and/or hours):**
Each year from January through December, presentations are given at the stated locations. The presentations are given by PHN staff on the first Monday of the month between the hours of 1:00 p.m. and 3:00 p.m.
6. **Provide the locations where Outreach B will be conducted:**
Riverside Church located at 1100 Main Street in Sacramento and three County owned and operated community centers located at 3300 Parkside Drive in Citrus Heights, 6000 Kenneth Avenue, in Carmichael and 5000 Rosetree Lane in South Sacramento.
7. **Provide number of times the Outreach B campaign will be conducted during the fiscal year or indicate if ongoing:**
This campaign is ongoing involving monthly presentations twelve 12 months of the year.
8. **If using other than time surveys, describe how the costs of Outreach B will be developed:**
Annual time surveys will be conducted as prescribed by the State to allocate the costs of this activity.
9. **Provide the names of subcontractors:** None.

Methodology Approved for Calculating the Medi-Cal Discount: (Place checkmark next to methodology to be used.)

Client Count Countrywide Medi-Cal Average Check here if submitting unapproved methodology. Explain methodology below

DHS USE ONLY

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