

DEPARTMENT OF HEALTH SERVICES

**MEDI-CAL BENEFITS BRANCH
MEDI-CAL POLICY DIVISION
714/744 P Street, Room 1640
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Sacramento, CA 94234-7320
(916) 657-1460**



January 20, 2000

TO: All Local Governmental Agencies (LGAs) **PPL No. 00-001**
Medi-Cal Administrative Activities (MAA) and
Targeted Case Management (TCM) Coordinators

SUBJECT: **CLAIMING REIMBURSEMENT FOR FISCAL YEAR 1999-2000
PARTICIPATION FEE**

The purpose of this letter is to advise Local Governmental Agencies (LGAs) that the Fiscal Year (FY) 1999-2000 percentage of the participation fee, which may be claimed to the Medi-Cal Administrative Activities (MAA) Program, is 28%.

In Policy and Procedure Letter (PPL) No. 97-020, dated October 3, 1997, and PPL No. 98-012, dated April 13, 1998, participating LGAs were advised that beginning FY 1998-99, LGAs who seek reimbursement for the participation fee will be required to amend their MAA Claiming Plan to include specific reference to the participation fee as a cost under the category MAA/TCM Coordination and Claims Administration.

Amendments to the MAA Claiming Plan must be submitted before or during the quarter in which the cost will be claimed and are effective the quarter in which the amendment is submitted to the Department of Health Services. Failure to submit the required amendment to your MAA Claiming Plan shall result in your ineligibility to claim the participation fee for FY 1999-2000, and subsequent fiscal periods.

If you have any questions, please contact Ms. Alice Childress, Chief of the Administrative Claiming Unit, at (916) 657-0627 or by e-mail at achildres@dhs.ca.gov.

Sincerely,

Original signed by D. Mitchell

David Mitchell, Chief

cc: See Next Page.

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Medi-Cal Administrative Activities (MAA) and
Targeted Case Management (TCM) Coordinators
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