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

DAVID MAXWELL-JOLLY
Director

ARNOLD SCHWARZENEGGER
Governor

May 19, 2009

PPL No. 09-012

TO: Local Governmental Agencies (LGA)
Medi-Cal Administrative Activities (MAA) and
Targeted Case Management (TCM) Coordinators

SUBJECT: **LGA CLAIMING REIMBURSEMENT FOR FISCAL YEAR (FY) 2008-09 MAA/TCM PARTICIPATION FEE**

This Policy and Procedure Letter (PPL) is to advise LGA that 26.0 percent of the LGA participation fee for FY 2008-09 may be claimed to the County-Based MAA (CMAA) Program. Specifically, the portion of the participation fee not used to pay Department of Health Care Services (DHCS) expenditures or compensation for the LGA Executive Committee and Host Entity is an allowable expenditure claimable for reimbursement.

LGAs seeking reimbursement for the participation fee for the first time must amend their CMAA Claiming Plan to include specific reference to the participation fee as a cost under the activity: "MAA/TCM Coordination and Claims Administration." This reference is to be included in the LGA response to Question No.1, "Individually list each type of allowable MAA/TCM Coordination and Claims Administration performed…" (reference Section 2 of the provider manual). Submit amendments to the CMAA Claiming Plan before or during the quarter in which the cost will be claimed. These amendments are effective the quarter in which the amendment is submitted to DHCS. Failure to submit the required amendment to the CMAA Claiming Plan shall result in the prohibition to claim the participation fee for FY 2008-09, and subsequent fiscal years.

These costs must be claimed in Section 3 of the Direct Charges Worksheet on the CMAA Invoice and identified as Participation Fees in the description column. The LGA claimable amount should be claimed in the quarter in which the payment was made to the Host Entity. The total amount of the fee paid is entered in the "Other Costs" column. A discount factor of twenty-six (26%) for FY 2008-09 should be entered in the column labeled "Medi-Cal/Certified Time Factor."

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If you have questions, please contact Ms. Linda Hayes, Chief, CMAA Unit, at Linda.Hayes@dhcs.ca.gov or by telephone at (916) 341-3969.

Sincerely,

ORIGINAL SIGNED BY BOB BAXTER FOR ELIZABETH TOUHEY

Elizabeth Touhey, Chief
Administrative Claiming Local and
Schools Services Branch

cc: Ms. Cathleen Gentry
MAA/TCM Consultant
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