Medi-Cal LEA Billing Option Program
RMTS Implementation Advisory Group (IAG)
Meeting #4 Summary
April 28, 2015

On Tuesday, April 28, the fourth RMTS Implementation Advisory Group (IAG) meeting took place at DHCS in Sacramento. The following was accomplished during this meeting:

- Discussed TCMS concepts related to the LEA Medi-Cal Billing Option RMTS and recommended that TCMS service delivery be modified under the LEA Program. IAG members generally support TCMS services provided in the LEA Medi-Cal Billing Option Program, but also acknowledge the risks associated with TCMS billing, particularly in regard to CMS' ongoing concern regarding duplication of TCM services between states' school-based direct service and administrative programs.
    - The IAG recommends that LEAs interested in receiving reimbursement for future TCM Services select billing for this service through the SMAA Program **or** the LEA Billing Option Program, but not through both programs, to ensure no duplication of services between the two programs. IAG members believe that this will mitigate duplication and increase compliance with Federal guidance.
    - The IAG would like feedback on this recommendation from the LEA provider community, particularly those few LEAs that currently bill for TCMS in the LEA Billing Option Program. LEAs wishing to comment on this issue may do so by using the stakeholder feedback tool posted on the LEA Program Website at Random Moment Time Study (RMTS). Comments related to TCMS can be noted under the "RMTS Methodology" area of the feedback tool. The IAG requests comments should be submitted by Friday, May 15, 2015.
- Discussed Activity Code 2 and provided feedback to DHCS on some of the necessary definitional changes that could be made during the revision of the SMAA manual.
- Discussed RMTS cost pools and recommended that DHCS initially develop two mutually exclusive cost pools: Direct and Administration. The Direct cost pool will be based on all qualified rendering practitioners in the LEA Medi-Cal Billing Option Program. The Direct cost pool time study participants will be limited to those practitioners that are expected to bill under the LEA Medi-Cal Billing Option Program in the quarter during which the RMTS is administered. The IAG suggests that DHCS review data in future years to determine whether it is appropriate to further split the Direct cost pool into two or more pools, based on practitioner types.
- Discussed "peer grouping" and recommended that DHCS initially maintain the eight LEC/LGA regional groupings for data collection and dissemination of RMTS results. The IAG suggests that DHCS review future data, when available, to re-examine the eight regional "peer groups".
- Reviewed federal Certified Public Expenditure (CPE) requirements and discussed high-level expected changes to the LEA cost report under RMTS. Reviewed example cost reports from other states that operate under a CPE Program and identified similarities between cost reports.
- Discussed suggestions regarding communication, best practices and training to improve the LEC/LGA model under the LEA RMTS.

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The next RMTS IAG Meeting will take place in Sacramento on Wednesday, May 20, 2015.