

LEA Medi-Cal Billing Option Program Cost and Reimbursement Comparison Schedule (CRCS) Submission Deadline Information

LEAs are required to submit their completed CRCS for FYs 2006/2007 and 2007/2008 to DHCS no later than **OCTOBER 30, 2009**. Submit two hard copies of each fiscal year CRCS form with the certification signed in blue ink.

The originals and copies should be mailed to the following address:

Department of Health Care Services
Safety Net Financing Division
MS4603, P.O. Box 997436
Sacramento, CA 95899-7436

In addition, submit an electronic version of each fiscal year CRCS to dhsailea@dhcs.ca.gov, no later than **October 30, 2009**. Please refer to the LEA Medi-Cal Billing Option Program website at: <http://www.dhcs.ca.gov/provgovpart/Pages/LEACRCSTraining.aspx>, to obtain CRCS forms, CRCS training materials, and CRCS FAQs, to assist you in completing the reports.

Please note: By the end of September, LEAs will receive two Interim Reimbursement and Units of Service Reports (Reimbursement Reports) that will detail paid LEA services by practitioner type by fiscal year. One report will contain data for dates of service in FY 2006/07 and the second report will contain data for dates of service in FY 2007/08. The Reimbursement Reports should be used to complete your CRCS Worksheets A-4 and B-4 for each respective fiscal year. If your LEA has not received the Reimbursement Reports by the end of September or has questions, please contact DHCS at: LEA@dhcs.ca.gov. LEAs should regularly check the LEA Billing Option Program website or subscribe to the LEA website email notification system to receive notices of website additions and/or updates related to CRCS and other program information.