



DAVID MAXWELL-JOLLY  
*Director*

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



ARNOLD SCHWARZENEGGER  
*Governor*

Dear LEA,

Enclosed are two reports that are necessary to complete your mandatory Cost and Reimbursement Comparison Schedules (CRCS) for Fiscal Years (FY) 2006/07 and 2007/08. Your LEA should have already prepared practitioner costs and hours for each of these two CRCS fiscal years. The attached Interim Reimbursement and Units of Service Report (Reimbursement Report) will assist your LEA in completing CRCS Worksheets A-4 and B-4 by providing paid interim reimbursement and units of service data that is specific to your LEA. Included are two reports generated by the paid claims processing system, containing the following information:

- Interim reimbursement and units of service data for each procedure code and modifier combination by practitioner type, based on dates of service within FY 2006/07 (July 1, 2006 to June 30, 2007) and FY 2007/08 (July 1, 2007 to June 30, 2008).
- Reimbursement and units of service data includes all FY 2006/07 and FY 2007/08 claims that were reprocessed in Erroneous Payment Corrections (EPCs) due to claims processing issues.
- Reimbursement data includes the recent FY 2006/07 and FY 2007/08 inflation rate adjustment EPCs.
- Reimbursement and units of service data for Targeted Case Management (TCM) and transportation are not included on the report, as LEAs should not reconcile costs and reimbursement for TCM and transportation on the CRCS.

LEAs are required to submit their completed FY 2006/07 and FY 2007/08 CRCS forms to DHCS no later than October 30, 2009. The following steps should be completed by your LEA to finalize the FY 2006/07 and 2007/08 CRCS reports:

- 1) Ensure that your LEA has entered complete practitioner costs and hours information for FY 2006/07 and FY 2007/08, after verifying the reasonableness of the Reimbursement Report information with data from your internal accounting system.
  - Accurately transfer reimbursement and units of service information for each procedure code and modifier combination from the Reimbursement Report onto Worksheet A-4 for IEP/IFSP services and Worksheet B-4 for non-IEP/IFSP services.

- If the Reimbursement Report does not contain data for a specific procedure code and modifier combination, your LEA should leave this information blank on Worksheet A-4 or B-4.
- 2) Certify to the accuracy of total overpayments/ (underpayments) and sign the certification statement in blue ink.
  - 3) Submit two hard copies of each fiscal year CRCS form with the certification signed in blue ink by October 30, 2009. 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

- 4) Submit an electronic version of each fiscal year CRCS to [dhsailea@dhcs.ca.gov](mailto:dhsailea@dhcs.ca.gov) by October 30, 2009.

Additional information regarding the CRCS is available on the LEA Program website at <http://www.dhcs.ca.gov/provgovpart/Pages/LEACRCSTraining.aspx>. The website also contains tips for completing CRCS Worksheets A-4 and B-4. If you have questions regarding the CRCS or the DHCS Interim Reimbursement and Units of Service Report, please e-mail questions to [lea@dhcs.ca.gov](mailto:lea@dhcs.ca.gov).

Sincerely,

Elizabeth Touhey, Chief  
Administrative Claiming, Local and Schools Services Branch