



DAVID MAXWELL-JOLLY
Director

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



ARNOLD SCHWARZENEGGER
Governor

April 8, 2009

CCS INFORMATION NOTICE NO: 09-02

TO: ALL COUNTY CALIFORNIA CHILDREN'S SERVICES (CCS)
ADMINISTRATOR AND STATE CHILDREN'S MEDICAL SERVICES
(CMS) BRANCH STAFF

SUBJECT: FY 2008-09 California Children's Services (CCS) Medi-Cal County Match
Budgets

BACKGROUND

The purpose of this Information Notice is to implement CCS Medi-Cal County Match Budgets for FY 2008-09. The CCS Medi-Cal County Match Budget will enable a county to report expenditures of county funds for CCS care coordination, utilization management, maintenance and transportation, and service authorization for CCS eligible children with full scope, no share of cost Medi-Cal that qualify for draw-down of Title XIX federal financial participation (FFP). This FFP will be paid to the county. A participating county must certify that these county expenditures are in addition to and do not duplicate expenditures claimed for 100 percent reimbursement by the Medi-Cal program pursuant to the county's regular CCC Administrative Budget. The county is solely responsible for exceptions resulting from prospective audits of the county's CCS Medi-Cal County Match Budget expenditures.

IMPLEMENTATION

1. CCS Medi-Cal County Match Budgets have been submitted by the counties listed in the attached table in the amounts cited in the table.
2. Quarterly CCS Medi-Cal County Match Expenditure Invoices (attached) must be utilized to report county match expenditures claimed for FFP. These invoices must be completed in accordance with the attached Quarterly Administrative CCS Medi-Cal Expenditures Invoice (County Match) Instructions.
3. Subject to the availability of federal funds, a county's invoice will be reimbursed up to the level specified in the attached table with FFP drawn down by the Department to match the county's reported expenditures on the county's CCS County Match Expenditure Invoice.

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If you have any questions contact your CCS administrative consultant.

Original Signed by Luis R. Rico

Luis R. Rico, Acting Chief
Children's Medical Services Branch

Attachments

CCS County Match Budget Estimates

County	Total	Enhanced County/Federal (25/75)	Nonenhanced County/Federal (50/50)
All County Total	\$ 17,329,895.00	\$ 8,334,573.00	\$ 8,995,326.00
Alameda	County Funds	\$ 216,947.00	\$ 189,777.00
	Federal Funds (Title XIX)	\$ 271,288.00	\$ 189,777.00
	Budget Grand Total	\$ 488,235.00	\$ 379,554.00
Colusa	County Funds	\$ 4,458.00	\$ 4,458.00
	Federal Funds (Title XIX)	\$ 4,457.00	\$ 4,457.00
	Budget Grand Total	\$ 8,915.00	\$ 8,915.00
El Dorado	County Funds	\$ 18,823.00	\$ 18,823.00
	Federal Funds (Title XIX)	\$ 18,823.00	\$ 18,823.00
	Budget Grand Total	\$ 37,646.00	\$ 37,646.00
Kern	County Funds	\$ 492,723.00	\$ 426,443.00
	Federal Funds (Title XIX)	\$ 625,284.00	\$ 426,443.00
	Budget Grand Total	\$ 1,118,007.00	\$ 852,886.00
Lassen	County Funds	\$ 54,440.00	\$ 53,526.00
	Federal Funds (Title XIX)	\$ 56,268.00	\$ 53,527.00
	Budget Grand Total	\$ 110,708.00	\$ 107,053.00
Los Angeles	County Funds	\$ 1,336,855.00	\$ 699,408.00
	Federal Funds (Title XIX)	\$ 2,611,747.00	\$ 699,407.00
	Budget Grand Total	\$ 3,948,602.00	\$ 1,398,815.00
Madera	County Funds	\$ 28,286.00	\$ 21,509.00
	Federal Funds (Title XIX)	\$ 41,840.00	\$ 21,509.00
	Budget Grand Total	\$ 70,126.00	\$ 43,018.00
Mendocino	County Funds	\$ 75,012.00	\$ 74,706.00
	Federal Funds (Title XIX)	\$ 75,623.00	\$ 74,706.00
	Budget Grand Total	\$ 150,635.00	\$ 149,412.00
Mono	County Funds	\$ 30,625.00	\$ 21,250.00
	Federal Funds (Title XIX)	\$ 49,375.00	\$ 21,250.00
	Budget Grand Total	\$ 80,000.00	\$ 42,500.00
Monterey	County Funds	\$ 113,365.00	\$ 30,261.00
	Federal Funds (Title XIX)	\$ 279,572.00	\$ 30,261.00
	Budget Grand Total	\$ 392,937.00	\$ 60,522.00
Napa	County Funds	\$ 131,250.00	\$ 75,000.00
	Federal Funds (Title XIX)	\$ 243,750.00	\$ 75,000.00
	Budget Grand Total	\$ 375,000.00	\$ 150,000.00
Nevada	County Funds	\$ 24,311.00	\$ 24,311.00
	Federal Funds (Title XIX)	\$ 24,311.00	\$ 24,311.00
	Budget Grand Total	\$ 48,622.00	\$ 48,622.00

CCS County Match Budget Estimates

County		Total	Enhanced County/Federal (25/75)	Nonenhanced County/Federal (50/50)
All County Total		\$ 17,329,895.00	\$ 8,334,573.00	\$ 8,995,326.00
Orange	County Funds	\$ 505,478.00	\$ 103,672.00	\$ 401,806.00
	Federal Funds (Title XIX)	\$ 712,823.00	\$ 311,017.00	\$ 401,806.00
	Budget Grand Total	\$ 1,218,301.00	\$ 414,689.00	\$ 803,612.00
Placer	County Funds	\$ 90,499.00	\$ 47,868.00	\$ 42,632.00
	Federal Funds (Title XIX)	\$ 186,235.00	\$ 143,604.00	\$ 42,632.00
	Budget Grand Total	\$ 276,734.00	\$ 191,472.00	\$ 85,264.00
Plumas	County Funds	\$ 3,702.00	\$ 241.00	\$ 3,461.00
	Federal Funds (Title XIX)	\$ 4,183.00	\$ 721.00	\$ 3,462.00
	Budget Grand Total	\$ 7,885.00	\$ 962.00	\$ 6,923.00
Riverside	County Funds	\$ 303,218.00	\$ 99,730.00	\$ 203,488.00
	Federal Funds (Title XIX)	\$ 502,677.00	\$ 299,189.00	\$ 203,488.00
	Budget Grand Total	\$ 805,895.00	\$ 398,919.00	\$ 406,976.00
Sacramento	County Funds	\$ 417,355.00	\$ 139,244.00	\$ 278,111.00
	Federal Funds (Title XIX)	\$ 695,842.00	\$ 417,731.00	\$ 278,111.00
	Budget Grand Total	\$ 1,113,197.00	\$ 556,975.00	\$ 556,222.00
San Bernardino	County Funds	\$ 103,104.00	\$ 58,984.00	\$ 44,120.00
	Federal Funds (Title XIX)	\$ 221,070.00	\$ 176,950.00	\$ 44,120.00
	Budget Grand Total	\$ 324,174.00	\$ 235,934.00	\$ 88,240.00
San Diego	County Funds	\$ 933,582.00	\$ 155,093.00	\$ 778,489.00
	Federal Funds (Title XIX)	\$ 1,243,769.00	\$ 465,280.00	\$ 778,489.00
	Budget Grand Total	\$ 2,177,351.00	\$ 620,373.00	\$ 1,556,978.00
San Luis Obispo	County Funds	\$ 42,679.00	\$ 8,442.00	\$ 34,238.00
	Federal Funds (Title XIX)	\$ 59,562.00	\$ 25,325.00	\$ 34,238.00
	Budget Grand Total	\$ 102,241.00	\$ 33,767.00	\$ 68,476.00
Santa Barbara	County Funds	\$ 202,362.00	\$ 22,678.00	\$ 179,683.00
	Federal Funds (Title XIX)	\$ 247,718.00	\$ 68,035.00	\$ 179,683.00
	Budget Grand Total	\$ 450,080.00	\$ 90,713.00	\$ 359,366.00
Shasta	County Funds	\$ 117,320.00	\$ 22,428.00	\$ 94,892.00
	Federal Funds (Title XIX)	\$ 162,176.00	\$ 67,283.00	\$ 94,893.00
	Budget Grand Total	\$ 279,496.00	\$ 89,711.00	\$ 189,785.00
Sonoma	County Funds	\$ 154,113.00	\$ 51,117.00	\$ 102,996.00
	Federal Funds (Title XIX)	\$ 256,347.00	\$ 153,350.00	\$ 102,997.00
	Budget Grand Total	\$ 410,460.00	\$ 204,467.00	\$ 205,993.00

CCS County Match Budget Estimates				
County		Total	Enhanced County/Federal (25/75)	Nonenhanced County/Federal (50/50)
All County Total		\$ 17,329,895.00	\$ 8,334,573.00	\$ 8,995,326.00
Stanislaus	County Funds	\$ 201,941.00	\$ 106,109.00	\$ 95,832.00
	Federal Funds (Title XIX)	\$ 414,158.00	\$ 318,326.00	\$ 95,832.00
	Budget Grand Total	\$ 616,099.00	\$ 424,435.00	\$ 191,664.00
Sutter	County Funds	\$ 23,794.00	\$ -	\$ 23,794.00
	Federal Funds (Title XIX)	\$ 23,794.00	\$ -	\$ 23,794.00
	Budget Grand Total	\$ 47,588.00	\$ -	\$ 47,588.00
Tehama	County Funds	\$ 14,588.00	\$ 1,201.00	\$ 13,387.00
	Federal Funds (Title XIX)	\$ 16,990.00	\$ 3,603.00	\$ 13,387.00
	Budget Grand Total	\$ 31,578.00	\$ 4,804.00	\$ 26,774.00
Ventura	County Funds	\$ 940,476.00	\$ 379,215.00	\$ 561,261.00
	Federal Funds (Title XIX)	\$ 1,698,907.00	\$ 1,137,646.00	\$ 561,261.00
	Budget Grand Total	\$ 2,639,383.00	\$ 1,516,861.00	\$ 1,122,522.00
Total All Counties				
	County Funds	\$ 6,581,306.00		
	Federal Funds	\$ 10,748,589.00		
	Total Budget	\$ 17,329,895.00		

Quarter ending: _____
month/date/year

**CALIFORNIA CHILDREN’S SERVICES (CCS) PROGRAM
CCS Administrative Medi-Cal Expenditure Invoice
County Match**

Fiscal Year: _____
County Name: _____

Column	1	2	3
Category/Line Item	Total Invoiced (2 + 3)	Enhanced State/Federal (25/75)	Nonenhanced State/Federal (50/50)
I. Total Personnel Expense	\$0		
II. Total Operating Expense	\$0		
III. Total Capital Expense			
IV. Total Indirect Expense	\$0		
V. Total Other Expense	\$0		
Expenditure Grand Total	\$0	\$0	\$0
Maintenance & Transportation	\$ -		\$ -

Column	1	2	3
Source of Funds	Total Funds Invoiced	Enhanced State/Federal (25/75)	Nonenhanced State/Federal (50/50)
County Funds	\$0	\$0	\$0
Federal Funds (Title XIX)	\$0	\$0	\$0
Expenditure Grand Total	\$0	\$0	\$0

CERTIFICATION:

1. I hereby certify under penalty of perjury that I am the duly authorized officer of the claimant herein and this claim is in all respects true, correct, and in accordance with the law; that the materials, supplies, or services claimed have been received or performed and were used or performed exclusively in connection with the program; that I have not violated any of the provisions of Section 1090 to 1096 of the Government Code in incurring the items of expense included in this claim; that prior to the end of the quarter for which the claim is submitted, warrants have been issued in payment of all expenditures included in this claim; that payment has not previously been received for the amount claimed herein; and that the original invoices, payrolls, and other vouchers in support of this claim are on file with the county.

2. The expenditures reported on this invoice are solely associated with costs associated with CCS care coordination, utilization management, maintenance and transportation, and service authorization for CCS children who are full scope, no share of cost Medi-Cal beneficiaries. These expenditures are in addition to and do not duplicate expenditures claimed previously or prospectively for 100 percent Medi-Cal reimbursement pursuant to the county’s regular CCS Administrative Budget.

3. I acknowledge that the county is solely responsible for any exceptions resulting from prespective audits of county expenditures reported on this invoice.

Prepared By	E-Mail Address	Date	Telephone Number
Signature of Authorized Official	Date		Telephone Number

CCS Quarterly Administrative Medi-Cal Expenditures Invoice (County Match)

Instructions for Preparation of the CCS Quarterly Administrative Medi-Cal County Match Expenditure Invoice Form

The county match invoice is used for Counties that want to use their local funds to draw down the appropriate federal Title XIX funds. Therefore, no State General funds are included on this invoice.

A. Category/Line Item

1. (I) Total Personnel Expenses

Enter the total amount of "Personnel Expenses" for the quarter being claimed on this line in Column 1. This amount is the total amount for all employees performing activities for the program as supported by time study, attendance, and payroll records. The total should include all related salaries and wages, staff benefits, overtime, and temporary help.

Enter the total amount of personnel expenses invoiced in Column 2 for enhanced funding and the total amount invoiced in Column 3 for non-enhanced funding. These amounts are calculated using time study percentages and other applicable documentation.

2. (II) Total Operating Expenses

Enter in Column 1, the total of all operating expenses.

Enter the total amount of enhanced operating expenses claimed in Column 2 and enter the non-enhanced operating expenses claimed in Column 3.

NOTE: Only travel and training expenses may qualify as operating expenses for enhanced funding, and only when claimed by an SPMP following specific FFP guidelines (see Section 8).

3. (III) Total Capital Expenses

Capital expenses are not permitted on this budget.

4. (IV) Total Indirect Expenses

Enter the total Indirect Expenses on this line in Column 1 and Column 3.

5. (V) Total Other Expenses

Enter the total other expenses on this line in Column 1 and Column 3.

6. Expenditure Grand Total

Add the totals for Personnel Expenses, Operating Expenses, Capital Expenses, Indirect Expenses, and Other Expenses for each column, and enter the amounts on this line.

B. Source of Funds

1. County Funds

County expenditures must meet the Federal Title XIX funding match requirements to obtain this reimbursement but county matching funds are not reimbursed.

a. Enhanced Funds

Multiply the Enhanced "Expenditure Grand Total" amount (Column 2) by 25 percent. Enter the amount on the "County Funds" line, Enhanced, in the "Source of Funds" section.

b. Non-Enhanced Funds

Multiply the non-enhanced "Expenditure Grand Total" amount (Column 3) by 50 percent. Enter this amount on the "County Funds" line, non-enhanced, in "Source of Funds" section.

c. Total Funds

Add Columns 2 and 3 together for the County Funds and enter the total in Column 1, Total Funds Invoiced.

2. Federal (Title XIX) Funds

a. Enhanced Funds

Multiply the Enhanced "Expenditure Grand Total" amount (Column 2) by 75 percent. Enter the amount on the "Federal (Title XIX) Funds" line, Enhanced, in the "Source of Funds" section.

b. Non-Enhanced Funds

Multiply the non-enhanced "Expenditure Grand Total" amount (Column 3) by 50 percent. Enter this amount on the "Federal (Title XIX) Funds" line, non-enhanced, in "Source of Funds" section.

c. Total Funds

Add Columns 2 and 3 together for the Federal (Title XIX) Funds line and enter the total in Column 1, Total Funds.

C. Certification and Signatures

Provide the contact name, e-mail address and telephone number of the county staff who is responsible for processing the CCS Quarterly Administrative Medi-Cal County Match invoice form.

The fiscal officer or a county official with the authority to certify the invoice on behalf of the county does so by signing and dating the invoice.

Print or type the name and the title of the official who signed the invoice.

Submit all invoices with original signatures. Signature stamps are not acceptable. Additional copies are not necessary.

All invoices and supporting documentation that justify the expenditures should be submitted to:

California Department of Health Care Services
Children's Medical Services Branch
Program Support Section – Administration Unit
P.O. Box 997413 MS 8104
Sacramento, CA 95899-7413

Quarterly invoices shall be submitted **no later than 60 days** after the end of each quarter.

The following schedule shows the exact due dates for each quarterly invoice.

<u>Quarter</u>	<u>Due Date</u>
1 st	November 30, 200x
2 nd	February 28, 200x+1
3 rd	May 31, 200x+1
4 th	August 31, 200x+1

Supplemental invoices shall be submitted no later than December 31st after the end of the fiscal year.

Example: FY 2008-09 ends June 30, 2009. Supplemental Invoices for FY 2008-09 are due no later than December 31, 2009.