

Quarterly Staff Certification of Direct Charge Time Mental Health Medi-Cal Administrative Activities

All County Mental Health Plan staff and subcontractors who spend 100 percent of their time performing Mental Health Medi-Cal Administrative Activities (MH MAA) in compliance with OMB Circular No. A-87 may complete this certification every quarter. The certification must be signed by the staff/contractor or supervisory official who has first-hand knowledge of the work performed. A duty statement that identifies the job functions of the individual expected to work solely on MH MAA activities must also be attached.

I, _____, hereby certify that 100 percent of my time was spent working on an MH MAA activity during the time period identified below.

Please check the relevant quarter and fiscal year claimed below:

<u>Quarter (Check Only One)</u>	<u>Fiscal Year</u>
<input type="checkbox"/> Jul. 1 to Sep. 30	
<input type="checkbox"/> Oct. 1 to Dec. 31	
<input type="checkbox"/> Jan. 1 to Mar. 31	
<input type="checkbox"/> Apr. 1 to Jun. 30	

Please check the appropriate MH MAA activity or activities claimed below:

Not Discounted Activities

- Activity 4
-
-
- Activity 17

Discounted Activities

- Activity 8
-
-

Name/Classification:	
Signature:	
Date:	
Supervisor Name:	
Signature:	
Date:	