

The Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) Quarterly Meeting

10:30 a.m. – 12:00 p.m.

1:00 p.m. – 3:00 p.m.

Welcome

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Morning Session
10:30 a.m. – 12:00 p.m.

Introductions



» California Department of Health Care Services (DHCS)

- The Local Educational Agency Medi-Cal Billing Option Program (LEA BOP)



» Guidehouse

- Consultants for DHCS

Purpose, Goals, and Expectations for Fiscal Year (FY) 2025-26



Local Governmental Financing Division (LGFD) Discussion Points

Ad Hoc Workgroup FY 2024-25 Recap

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Ad Hoc Workgroup Recap

- » The Ad Hoc Workgroup is a collaborative group identified in Welfare and Institution Codes 14115.8 (e) and referenced in 14132.06 comprised exclusively of Local Educational Agency (LEA) providers and Local Education Consortium (LEC) representatives that collaborate with DHCS on various School-Based Medicaid subject areas.
- » Members include Local Educational Agencies (LEAs), County Offices of Education (COEs), and Local Education Consortia (LECs).
 - LECs role to be for Random Moment Time Survey (RMTS) sub-committee only.
- » DHCS Staff: LEA BOP and School-Based Medi-Cal Administrative Activities (SMAA)

Ad Hoc Workgroup

FY 2024-25 Sub-Committee Members

Quarterly Meeting	Provider Participation Agreement	Policy – Provider Manual and Policy Procedure Letter (PPL)	CMS May 2023 Guidance
Sherri Crandley (DHCS Analyst)	Mindy Vang (DHCS Analyst)	Mindy Vang (DHCS Analyst)	Tiffany Lai (DHCS Analyst)
Brittany Alvarez	Margie Bobe	Brittany Alvarez	Brittany Alvarez
Margie Bobe	Jordan Dempsey	Margie Bobe	Margie Bobe
Debbi Conner	Jennifer Hill	Ashley Cobb	Ashley Cobb
Maribel Del Muro	Jessica Jacobs	Debbi Conner	Debbi Conner
Ashlie Fiallos	Alma McKenry	Maribel Del Muro	Maribel Del Muro
Brittney Freer	Rebekah Smith	Ashlie Fiallos	Ashlie Fiallos
Jennifer Wood-Slayton	Rhonda Yohman	Brittney Freer	Brittney Freer
		Jennifer Hill	Jennifer Wood-Slayton
		Jennifer Wood-Slayton	Rhonda Yohman

Ad Hoc Workgroup

FY 2024-25 Sub-Committee Members

(continued)

RMTS	
Lacey Allred David Bang Mridini Vijay	DHCS Analysts
Brittany Alvarez	Jennifer Hill
Margie Bobe	Jessica Jacobs
Debbi Conner	Patti McIntyre
Michelle Cowart	Helen Park
Coreen DeLeon	Rebekah Smith
Ashlie Fiallos	Jennifer Wood-Slayton
Brittney Freer	Rhonda Yohman

Sub-Committee Recap



Quarterly Meeting (QM)

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Purpose and Goals

- » Assist the Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) with the development of Quarterly Meeting (QM) agenda topics, training ideas, and breakout room topics when applicable.
- » Provide QM feedback and assist with ideas for improvement.

Summary of Progress

- » One sub-committee meeting conducted in FY 2024-25:
 - **September 2024** – Discussed potential QM agenda and Billing Forum topics, gathered subcommittee feedback, and brainstormed future topics. Discussed previous QMs, including posted and/or distributed meeting materials, and discussed successes as well as potential ideas for improvements.

Next Steps

- » DHCS will reach out to sub-committee members in the next few weeks via e-mail to discuss plans for the Quarterly Meetings in FY 25-26.
 - Feedback on past FY 24-25 Quarterly Meetings
 - Breakout room topics for FY 25-26
 - Suggestions for Guest Speakers
 - Afternoon Training Sessions

Provider Participation Agreement (PPA)



Purpose and Goals

- » To ensure the LEA BOP meets state and federal enrollment and provider requirements.
 - Requirements may be identified in the PPA and/or LEA BOP Provider Manual.
- » PPA sub-committee assists DHCS in becoming compliant by:
 - Providing feedback on language in the Medi-Cal Provider Agreement and analyzing its impact on LEAs.
 - Leveraging knowledge of educational settings to determine solutions for compliance with state and federal requirements.

Summary of Progress

- » One sub-committee meeting conducted in FY 2024-25:
 - **April 2025** - DHCS shared drafted PPA with sub-committee members to review. Sub-committee members provided feedback on provisions being added to the PPA.

Next Steps

- » DHCS is updating the PPA and reviewing the draft internally.
- » DHCS plans to provide a new PPA for LEAs to sign by the end of August.
 - Due: November 30, 2025

Centers for Medicare & Medicaid Services (CMS) Guidance



Purpose and Goals

- » Become familiar with the CMS Guidance relative to LEA BOP.
- » Discuss CMS Guidance requirements and prioritize areas of interest.
- » Gather feedback and/or concerns regarding required and possible changes.
- » Formulate questions for the CMS Technical Assistance Center (TAC), when needed.

Summary of Progress

- » Four sub-committee meetings were conducted in FY 2024-25:
- **October 2024** – DHCS shared drafted Interim Payment Methodologies slides and survey with subcommittee members for feedback. Discussed concerns regarding the methodologies and survey language.
 - **February 2025** – DHCS provided updates on the 2025 State Plan and Interim Payment Methodology survey. Discussed if Community Health Workers are providing LEA BOP covered services and challenges LEAs encounter when enrolling practitioners.
 - **March 2025** – DHCS shared the 2025 State Plan Amendment (SPA) 1 draft with subcommittee members to review for feedback. Discussed how to make practitioner enrollment work and transportation requirement for documenting specific adaptation needed by student in the Individualized Education Plan (IEP), along with reviewing the Interim Payment Methodologies survey responses.
 - **June 2025** – DHCS shared with subcommittee members that the Department is moving forward with meeting CMS' requirement of practitioner enrollment. DHCS shared practitioner types that have eligibility, possible eligibility, and ineligibility for Medi-Cal enrollment, along with discussing a phased in approach.

Next Steps

- » Work with the Provider Enrollment Division (PED) to develop trainings for practitioner enrollment.
- » Distribute Practitioner Enrollment PPL
- » Develop SPA 2
- » Future sub-committee meeting:
 - September 2, 2025, from 9 a.m. – 9:50 a.m.

Random Moment Time Survey (RMTS)



Purpose and Goals

- » Interpret CMS 2023 Guidance requirements acknowledging feedback and insight from members.
- » Collaboratively design a compliant and feasible Time Study Implementation Plan (TSIP) draft to submit to CMS for approval.

Summary of Progress

- » Six sub-committee meetings were conducted in FY 2024-25 including one in September, one in October, two in December, one in March and one in April to discuss new policies required by CMS for the TSIP.
- » Additionally, there were six TSIP working sessions conducted in FY 2024-25 including five in May, and one in June to discuss member feedback from the first TSIP draft.
- » Feedback from the TSIP working sessions were then incorporated into the TSIP draft.
- » The TSIP draft is currently going through DHCS' internal review process.

Next Steps for the TSIP

- » Continue and complete the internal review process.
- » Submit the final TSIP to CMS by September 2025.
- » Submit a copy of the final TSIP to the RMTS Sub-Committee members for reference.

Note: DHCS will provide trainings on the upcoming changes to the RMTS process once CMS approves the TSIP!

Implementing Quarter 1 Time Study

- » CMS Guidance requires RMTS to be conducted **for any quarter in which services are being rendered and costs will be claimed.**
- » DHCS is considering a shortened Q1 with a smaller sample size to reduce the administrative burden for TSPs and LEAs.
 - This has been proposed with questions to CMS – response pending.
- » **If RMTS is not conducted for Q1, LEAs can not submit claims or include costs on their cost report.**

Practitioner Enrollment

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CMS Guide

G. Provider Participation in the Medicaid and CHIP Programs

For services that may be covered by Medicaid and CHIP to be payable (including when furnished in the school setting), the provider furnishing such services must be enrolled in the State Medicaid or CHIP program, as applicable. If the individual practitioner directly providing the service is a provider type not eligible to separately enroll as a Medicaid or CHIP provider, they must be an employee or contractor of an enrolled Medicaid or CHIP provider, and that enrolled provider would be considered the furnishing provider. **If the individual practitioner directly providing the service is a provider type that *is* eligible to separately enroll as a Medicaid or CHIP provider, they would be considered the furnishing provider and must be enrolled, regardless of whether the entity employing or contracting with them is also an enrolled provider. If the furnishing provider is not enrolled with Medicaid or CHIP or chooses not to bill Medicaid or CHIP for the service, then Medicaid or CHIP payment cannot be made for the service and any expenditures related to the service are not allowable.** For medical services to be payable under the Medicaid or CHIP State plan, all of the following requirements must be met:

- The medical services must be furnished to a Medicaid- or CHIP-eligible individual.
- The medical services must be a Medicaid- or CHIP-covered service and must meet any specific coverage requirements applicable to the service. States are reminded that, even if a particular service is not generally covered under the Medicaid State plan for adults, coverage is required under the EPSDT benefit for an EPSDT-eligible beneficiary if the service could be covered under section 1905(a) of the Act.
- The furnishing provider must be enrolled as a participating provider in the Medicaid or CHIP program, with a provider agreement and a Medicaid or CHIP provider identification number.



Example 1. The LEA is an enrolled Medicaid provider. The LEA furnishes and bills for medical services provided in the school by its employees and contractors who are of a provider type(s) not eligible to separately enroll as Medicaid providers. Expenditures for direct medical services furnished to the LEA's Medicaid-enrolled students are allowable where service-specific coverage requirements are met. Such services would be claimed by the LEA, who is considered the furnishing provider and has been screened and enrolled as a Medicaid provider. The LEA could also employ or contract with Medicaid-enrolled providers to provide Medicaid-covered services to Medicaid-enrolled students; these services could be claimed directly by the providers, or, consistent with the requirements of 42 C.F.R. § 447.10(g), the LEA could pay the providers a contractual rate, and the LEA then would claim for the services.

Eligible Practitioner Types

- » Certified Nurse Practitioner
- » Licensed Audiologist
- » Licensed Clinical Social Worker
- » Licensed Educational Psychologist
- » Licensed Marriage and Family Therapist
- » Licensed Occupational Therapist
- » Licensed Optometrist
- » Licensed Physical Therapist
- » Licensed Physician
- » Licensed Physician Assistant
- » Licensed Psychologist
- » Licensed Respiratory Care Practitioner
- » Licensed Speech-Language Pathologist
- » Registered Credentialed School Nurse

Medi-Cal Enrollment Ineligible Practitioner Types

- » Associate Marriage and Family Therapist
- » Credentialed School Counselor
- » Licensed Occupational Therapy Assistant
- » Licensed Physical Therapist Assistant
- » Licensed Vocational Nurse
- » Orientation and Mobility Specialist
- » Program Specialist
- » Registered Associate Clinical Social Worker
- » Registered Dietician
- » Registered School Audiometrist
- » Speech-Language Pathology Assistant
- » Trained Health Care Aide
- » Certified Public Health Nurse
- » Credentialed Audiologist
- » Credentialed School Psychologist
- » Credentialed School Social Worker
- » Credentialed Speech-Language Pathologist
- » Licensed Registered Nurse

Next Steps

- » Distribute Practitioner Enrollment PPL
- » Work with the Provider Enrollment Division (PED) to develop trainings for practitioner enrollment.
- » Develop Phased-In Approach

Using LEA BOP Data Match for SMAA Outreach & Application Assistance



Objectives

1. LEA BOP Data Match
2. Data Use Agreement (DUA) Options
3. Review Re-Enrollment and Renewal Processes

LEA BOP Data Match Output File

- » Part of participating in LEA BOP.
- » LEA primary enrollment student with Medi-Cal health coverage.
- » Used to get:
 - MER (Medi-Cal Enrollment Ratio)
 - BIC numbers for enrolled students for submitting claims

DUA Options

- » Only for LEAs participating in both LEA BOP **and** SMAA.
- » SMAA activities of Outreach and Application Assistance.
- » Identifying students who are no longer enrolled in or are coming due for renewal in Medi-Cal.

DUA Defined

- » A formal, legal document that outlines the terms and conditions under which confidential data is shared between parties and ensures the data is used appropriately and securely while protecting the rights and privacy of individuals or organizations involved.
- » Ensures data sharing complies with legal and regulatory requirements, protects privacy and confidentiality, and clarifies the responsibilities and rights of all parties involved.

Reminder:

Data may only be used in ways that are clearly stated in the DUA. Using the data in other ways may constitute a breach that could have financial and/or legal consequences.

DUA Options – Why do it?

- » Keeps students with access to health care, which may
 - Keep classrooms healthier.
 - Get health coverage for the whole family.
 - Keep families and communities healthier.
 - Increase daily attendance because they can get treatment when needed.
 - Increases the Medi-Cal Enrollment Ratio (MER), which is a key component of the LEA BOP and SMAA payment methodologies.
- » Increases time spent on SMAA Outreach and Application Assistance activities, which may increase the Random Moment Time Student (RMTS) percentage, another key component of the SMAA payment methodology.

DUA Option – Re-enrollment

- » Uses the regular data match output file
- » Look for students previously enrolled in Medi-Cal who currently are not enrolled in Medi-Cal
- » They may have had a 3-month gap in Medi-Cal enrollment using this method.

DUA Option – Renewal

- » Uses the **renewal** data match output file.
- » Identifies students who will need to renew in Medi-Cal in the next month.
- » Keeps their health coverage without any gaps.

Medi-Cal Eligibility Ratio Data Match



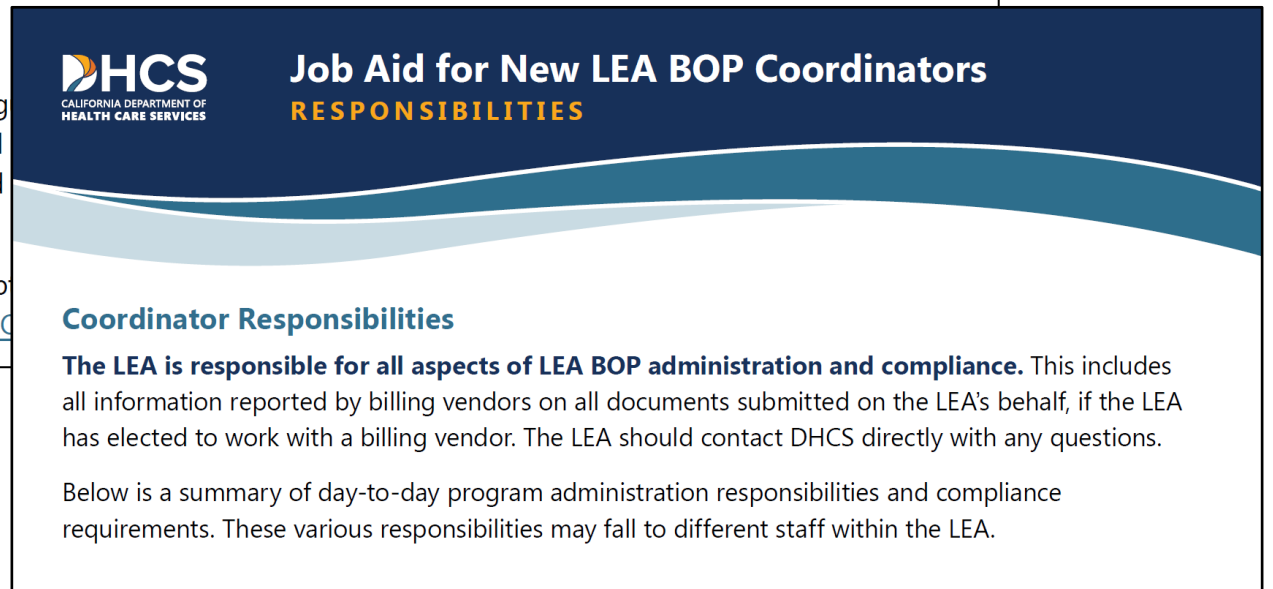
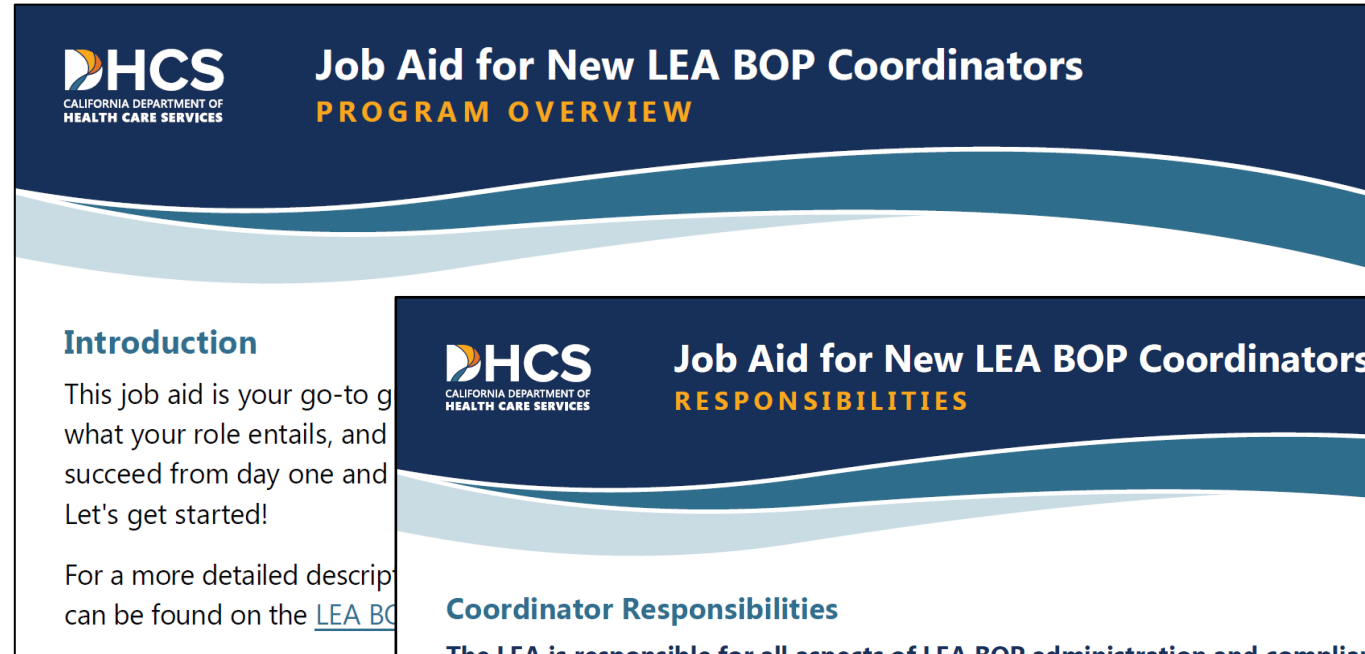
New Tools and Trainings

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New Coordinator Job Aid

» Two Sections:

- Program Overview
- Coordinator Responsibilities



New Coordinator Job Aide (continued)

» Instructional Materials, Resources, and Forms -> Toolbox -> Tip Sheets and New Resources

Instructional Materials, Resources, and Forms

- [LEA BOP Trainings](#)
- [Frequently Asked Questions \(FAQs\)](#)
- [E-mail Notifications](#)
- [Internal Administrative Functions Chart](#)
- [Alternative Format Resources](#)
- [FYI - For Your Information](#)
- [Tool Box](#)
- [Terminology Crosswalk](#)
- [Glossary of Terms](#)
- [Technical Assistance/Site Visit Request](#)
- [Nursing and Health Aide Services Treatment Form](#)
- [Referral and Prescription Requirements](#)

Trainings Available

- » Reinvestment of Funds
- » Documentation Training
- » Common Audit Adjustments

Section 1: Reinvestment of Funds



LEA BOP Documentation Training



Procedures on Common Audit Adjustments

Presented by: Usmaan Saleem
and Vera Zrodnikova



January 2025

Trainings Available (continued)

Instructional Materials, Resources, and Forms

- [LEA BOP Trainings](#)
- [Frequently Asked Questions \(FAQs\)](#)

LEA Program Training

[Back to LEA Home Page](#)

[FY 2024-25 LEA Training Material](#)

[FY 2023-24 LEA Training Materials](#)

[FY 2022-23 LEA Training Materials](#)

[FY 2021-22 LEA Training Materials](#)

1. [August 2024 Provider Billing Forum and Multi-Payer Fee Schedule](#)
2. [September 2024 An Introduction to LEA BOP/\(Re\)Launching Your LEA BOP](#)
3. [October 2024 LEA BOP and the Time Survey Participant \(TSP\) List](#)
4. [October 2024 Provider Billing Forum Part 2: Cost and Reimbursement Comparison Schedule \(CRCS\)](#)
5. [October 2024 Medicaid Eligibility Ratio \(MER\)](#)
6. [December 2024 Cost and Reimbursement Comparison Schedule \(CRCS\) Training](#)
7. [January 2025 Cost and Reimbursement Comparison Schedule \(CRCS\) Check-In Meeting #1](#)
8. [January 2025 LEA BOP Quarterly Meeting](#)
9. [January 2025 LEA BOP Procedures on Common Audit Adjustments](#)
 - [LEA BOP Procedures on Common Audit Adjustments \(video\)](#)
10. [January 2025 LEA BOP General and Code 2A Documentation Training](#)
 - [LEA BOP General and Code 2A Documentation Training \(video\)](#)
11. [February 2025 Cost and Reimbursement Comparison Schedule \(CRCS\) Check-In Meeting #2](#)
12. [April 2025 LEA BOP Quarterly Meeting](#)
13. [April 2025 LEA BOP Reinvestment of Funds and Supporting Student Mental Health](#)
 - [LEA BOP Reinvestment of Funds and Supporting Student Mental Health \(video\)](#)

Program Status Updates

Update to FY 2025-26 LEA BOP Rates

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FY 2025-26 LEA BOP Rates

- » The rates will remain the same from FY 2024-25.
- » The rates will be published on the [LEA BOP Rates](#) webpage.
- » Program Manuals and Compliance Information (Billing Manual) -> LEA BOP Rates -> FY 2025-26 Rates (under Rate Inflation)

Program Manuals and Compliance Information (Billing Manual)

- [Program Enrollment and Compliance Documents Overview](#)
- [Provider Manual](#)
- [Policy and Procedure Letters \(PPLs\)](#)
- [Cost and Reimbursement Comparison Schedule \(CRCS\)](#)
- [Provider Bulletins](#)
- [Ordering, Referring or Prescribing Guide](#)
- [Transportation Billing Guide](#)
- [LEA BOP Rates](#)
- [Random Moment Time Survey \(RMTS\)](#)

Reminders/Announcements

Mental Health Coordination



Meeting Minutes Feedback Reminder



Alternative Format

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California Basic Educational Data System (CBEDS) Census Day

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CBEDS Census Day

» Identify total student enrollment on CBEDS Census Day,
Wednesday, October 1, 2025.

- Student enrollment information submitted to MOVEit (not the LEA inbox).
- Returned data will be used to calculate the Medi-Cal Eligibility Ratio (MER) for the FY 2025-26 Cost and Reimbursement Comparison Schedule (CRCS) that will be due **March 1, 2027.**
- Save documentation (student enrollment information and data match) for audit purposes.

General Reminders

Stay Updated with Listserv

- » Subscribe or unsubscribe to LEA BOP e-blasts for updated program information at:

<http://apps.dhcs.ca.gov/listssubscribe/default.aspx?list=DHCSLEA>



List Subscribe

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DHCSLEA

Please enter your Email address and confirm the Security Code displayed below
Optionally enter your Full Name or leave it blank to subscribe anonymously

Full Name

Email Address

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Enter the security code above

Subscribe

Unsubscribe

LGFD Mailboxes

- » LEA@dhcs.ca.gov - General questions about the LEA BOP, CRCS, and technical assistance requests.
- » LEA.AnnualReport@dhcs.ca.gov - Compliance documents (Provider Participation Agreement, Annual Report, and Data Use Agreement forms)
- » RMTS@dhcs.ca.gov - Random Moment Time Survey, Time Survey Participant, and moment questions.

Resource Links

- Slide 31 (CMS Guidance): <https://www.medicaid.gov/medicaid/financial-management/downloads/sbs-guide-medicaid-services-administrative-claiming.pdf>
- Slide 39 (Tool Box): <https://www.dhcs.ca.gov/provgovpart/Pages/LEAToolBox.aspx>
- Slide 40 (Trainings Available):
 - Reinvestment of Funds: <https://www.dhcs.ca.gov/provgovpart/Documents/April-2025-LEA-BOP-Reinvestment-of-Funds-and-Supporting-Student-Mental-Health.pdf>
 - Documentation Training: <https://www.dhcs.ca.gov/provgovpart/Documents/General-and-Code-2A-Documentation-Training.pdf>
 - Procedures on Common Audit Adjustments:
<https://www.dhcs.ca.gov/provgovpart/Documents/January-2025-LEA-BOP-Procedures-Common-Audit-Adjustments.pdf>

Resource Links Continue

- Slide 41:
 - LEA BOP Trainings: https://www.dhcs.ca.gov/provgovpart/Pages/LEA_Program_Training.aspx
 - FY 2024-25 LEA Training Material: <https://www.dhcs.ca.gov/provgovpart/Pages/2024-25LEABOPTraining.aspx>
- Slide 44 (LEA BOP Rates):
<https://www.dhcs.ca.gov/provgovpart/Pages/LEAClaimsProcessing.aspx>
- Slide 52 (Listserv): <https://apps.dhcs.ca.gov/listsubscribe/default.aspx?list=DHCSLEA>

Thank You!
See you in the Afternoon Session.

1:00 p.m. - 3:00 p.m.

