LOCAL EDUCATIONAL AGENCY MEDI-CAL BILLING OPTION PROGRAM (LEA BOP)

AUGUST QUARTERLY MEETING MINUTES

Meeting Overview

The LEA BOP Quarterly Meeting (QM) was hosted by the Department of Health Care Services (DHCS) on August 6, 2025, via Microsoft Teams webinar. Prior to the meeting, materials (including slides) were distributed to participants via e-mail. These materials are also available on the DHCS website at: LEA BOP Quarterly Meeting Summaries (ca.gov). Approximately 326 attendees were present at the August 2025 meeting.

Quarterly Meeting (QM) Minutes

- April 2025 meeting minutes are available online.
- Comments on the August 2025 QM Minutes should be sent via e-mail to the LEA Inbox at LEA@dhcs.ca.gov.
  - If no feedback is received, these meeting minutes will be considered final.
  - If feedback that substantively changes these meeting minutes is received, the modified minutes will be sent via e-blast and posted online.

Local Governmental Financing Division (LGFD) Discussion Points

Ad Hoc Workgroup Fiscal Year (FY) 2024-25

- The Ad Hoc Workgroup is comprised of five subcommittees, including representatives from DHCS, participating Local Educational Agencies (LEAs), Local Educational Consortiums (LECs). Starting FY 2025-26, the California Department of Education (CDE) is also participating.
- DHCS provided updates on subcommittee progress in FY 2024-25.
  - The **Policy - Provider Manual/Policy and Procedure Letter (PPL) subcommittee** did not convene in FY 2024-25 because most of the items for this subcommittee were addressed in another subcommittee (see CMS, below).

- The **QM subcommittee** held a meeting in September 2024, which focused on discussing materials, identifying possible Billing Forum topics, and incorporating feedback to enhance future meetings.
- The **Provider Participation Agreement (PPA) subcommittee** held a meeting in April 2025, during which DHCS shared the PPA draft with the subcommittee for review. Members provided feedback on the proposed provisions. DHCS will submit a new PPA for LEAs to sign by August or September 2025.
- The **Centers for Medicare and Medicaid Services (CMS) Guidance subcommittee** met four times in FY 2024-25, during which DHCS shared program updates and received member feedback on changes required to comply with the CMS 2023 Guidance by July 2026. Topics included reviewing interim payment methodology flexibilities provided by CMS, discussing new practitioners and services, upcoming State Plan Amendment (SPA) changes, and practitioner enrollment requirements. While the subcommittee initially discussed submitting two separate SPAs to CMS to phase the implementation of changes, DHCS recently decided to submit all changes in one SPA submission, noting that the time to implement changes could be compromised with a phased implementation approach. An initial draft of the SPA was shared with subcommittee members in March 2025.
- The **Random Moment Time Survey (RMTS) subcommittee** held six subcommittee meetings and six Time Study Implementation Plan (TSIP) working sessions in FY 2024-25, as the committee was tasked with providing feedback to DHCS on updates to the RMTS to align with new CMS requirements. The TSIP draft is currently undergoing DHCS's internal review process and is scheduled for submission to CMS by late 2025. DHCS will provide training on the upcoming changes to the RMTS process once CMS approves the TSIP.
    - CMS Guidance requires the RMTS to be conducted for any quarter in which services are being rendered, and costs will be claimed. As such, DHCS will be required to run an RMTS in Quarter 1 (July through September) beginning FY 2025-26. If an RMTS is not conducted for Quarter 1, LEAs may not submit claims to SMAA nor include costs on their LEA BOP Cost and Reimbursement Comparison Schedule (CRCS) for that quarter. DHCS will be working

with LEAs and the LECs that administer the RMTS on the implementation of a Quarter 1 RMTS in the coming months.

Practitioner Enrollment

- DHCS reviewed the CMS 2023 Guidance, which requires all practitioners with a Medi-Cal Provider Application and Validation for Enrollment (PAVE) "enrollment pathway" to separately enroll in Medi-Cal as a provider, regardless of whether their Local Educational Agency (LEA) is also enrolled as a provider. Medi-Cal will not be able to reimburse costs for providers who have an enrollment pathway but have not enrolled in Medi-Cal. Practitioners who do not have an "enrollment pathway" will not be required to enroll as a Medi-Cal provider and will still be reimbursed through LEA BOP. In the coming months, DHCS will share more details on the enrollment process and requirements, as a phased-in approach to implement this change is developed.

Using LEA BOP Data Match for School-Based Medi-Cal Administrative Activities (SMAA) Program Outreach & Application Assistance

- LEAs are required to complete a Data Match annually as part of their participation in the LEA BOP to identify students enrolled in Medi-Cal to calculate the Medi-Cal Enrollment Ratio (MER).
- Data Use Agreement (DUA) options are available to LEAs that participate in both the LEA BOP and the SMAA program. These options help identify students who are no longer enrolled in Medi-Cal or are approaching their renewal date. A DUA may also support SMAA activities of Outreach and Application Assistance efforts, which can lead to increased SMAA program funding for the LEA. The two DUA options are as follows:
    - **DUA Option 1: Re-Enrollment** which uses the standard data match output file to identify students who were previously enrolled in Medi-Cal but are no longer active.
    - **DUA Option 2: Renewal** which uses a renewal-specific data match output file to flag students whose Medi-Cal coverage is due for renewal within the next month.

MER Data Match

- DHCS has identified a data match issue where names exceeding character limits (last names longer than 15 characters and first names longer than 10 characters) fail to match correctly. This mismatch can negatively affect MER calculations and

may also impact the submission of interim claims. DHCS is actively working to resolve the issue and will provide updates as they become available.

- If LEAs notice they are experiencing this issue, DHCS advises LEAs to limit characters according to current coding guidelines (15 characters or less for last names and 10 characters for first names). LEAs are welcome to reach out to LEA@dhcs.ca.gov if there are any questions or concerns. DHCS will inform LEAs when this issue has been resolved.

New Tools and Trainings

- DHCS will soon publish new tools and trainings, including a "**New Coordinator Job Aid**," and three new trainings, including "**Reinvestment of Funds**," "**Documentation Training**," and "**Common Audit Adjustments**".
    - The **New Coordinator Job Aid** was developed to help new coordinators understand the LEA BOP, their roles and responsibilities, important timelines and documentation requirements, and how to access helpful resources.
    - All tools and trainings are posted on the LEA BOP website.

Program Status Updates

- **FY 2025-26 LEA BOP Rates:** There will be no changes to the LEA BOP rates from FY 2024–25 to FY 2025–26. In accordance with the State Plan, adjustments for inflation are not applied when the resulting calculation is less than one percent. Additionally, COVID counseling rates at the enhanced 100 percent Federal Medical Assistance Percentage (FMAP) have been removed, since the enhanced FMAP is now phased out. The updated rates are published on the LEA BOP Rates webpage.

Reminders / Announcements

Mental Health Coordination

- The LEA BOP covers a range of mental health-related services provided by qualified practitioners, including psychological and psychosocial assessments, health education, anticipatory guidance, and psychological treatments. LEAs may coordinate these services with Managed Care Organizations, County Mental Health Plans, or Special Education Local Plan Areas.

Meeting Minutes Feedback Reminder

- Meeting minutes are shared with program partners via e-blast and posted on the LEA BOP website. After distribution, program partners have two weeks to review and provide feedback before the minutes are finalized.

Alternative Format

- DHCS reminded LEAs about the requirement to provide auxiliary aids and services to ensure that all qualified members of the public with disabilities can effectively participate in public programs, services, and/or activities. This includes making program documents available in alternative formats (e.g. braille, large font, audio recording, etc.) and written language preference (if applicable).
- It was noted that the current system that allows LEAs to search for a member's alternative format selection or assist with recording an alternative format request (the Alternative Format Selection Application (AFSA) system), will be phased out in the future. However, the information will be stored in the existing Medi-Cal Eligibility Data System and will be available to review in the Data Match Output File. Additional information will be provided as it becomes available.

California Basic Educational Data System (CBEDS) Census Day

- The upcoming CBEDS Census Day on **Wednesday, October 1, 2025**, will require LEAs to obtain their total student enrollment information. This data will be used to calculate the MER for the FY 2025–26 CRCS, which is due by March 1, 2027. As the October 1 date approaches, DHCS will send detailed e-blasts to keep LEAs informed of the requirement to pull annual LEA enrollment data on the CBEDS Census Day.

Communication Resources

- To receive LEA BOP program information and updates, please subscribe here: http://apps.dhcs.ca.gov/listsubscribe/default.aspx?list=DHCSLEA
- General Questions (LEA BOP, CRCS) & Technical Assistance Requests: LEA@dhcs.ca.gov
- Compliance Forms & Documents (Provider Participation Agreement, Annual Report and Data Use Agreement): LEA.AnnualReport@dhcs.ca.gov
- RMTS-related questions: RMTS@dhcs.ca.gov
- CMS Guidance: https://www.medicaid.gov/medicaid/financial-management/downloads/sbs-guide-medicaid-services-administrative-claiming.pdf

- Tool Box Webpage: https://www.dhcs.ca.gov/provgovpart/Pages/LEAToolBox.aspx
- Trainings provided during FY 2024-25 and now available online:
  - 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
  - LEA BOP Training: https://www.dhcs.ca.gov/provgovpart/Pages/LEA_Program_Training.aspx
  - FY 2024-2025 LEA Training Material: https://www.dhcs.ca.gov/provgovpart/Pages/2024-25LEABOPTraining.aspx
- CRCS Submissions: LEA.CRCS.Submission@dhcs.ca.gov
- Audit Questions: LEAAuditQuestions@dhcs.ca.gov

Afternoon Session

The afternoon session featured a PPA training and the first part of the annual two-part Provider Billing Forum.

PPA Training

- DHCS presented an overview of the new PPA, including details on the updates, timelines, instructions for completing the new form, and DHCS's review process. Recent changes require an updated PPA with 22 new provisions to meet state and federal enrollment requirements. DHCS will distribute a new PPA in the coming weeks. All participating LEAs must sign and submit the new PPA to DHCS by **December 31, 2025**, for an effective date of July 1, 2026.
  - Please note that DHCS extended this deadline following the meeting. The original date presented was November 30, 2025.
- The new PPA includes information on consortia billing, practitioner enrollment, and non-compliance when LEAs do not submit timely compliance documents, as well as clarification on a variety of topics such as licensing, subcontractors and suppliers, changes to provider information, provider suspension, and more.

- DHCS is currently updating the instructions for completing the PPA. A "Final Checklist" will accompany the updated instructions to help ensure all required components are included in the submission.
- Once the PPA is submitted to LEA.AnnualReport@dhcs.ca.gov, DHCS' review process will take approximately 30 to 90 days. If revisions are needed, the processing timeline may be extended. Failure to submit the PPA by the deadline may result in potential disenrollment from the program. DHCS will provide technical assistance to support timely and accurate submissions.

Provider Billing Forum: Medicaid Claiming

- DHCS presented the Provider Billing Forum, overviewing two main topics: Medicaid Claiming and the RMTS.
- **Medicaid Claiming:** The Medicaid Claiming portion of the Billing Forum detailed LEA BOP billing requirements, including a walk-through of the LEA BOP payment cycle on how funds are distributed, where claiming falls in the cycle, claims documentation requirements, direct service practitioner requirements, parental consent, and other health coverage requirements. Overall, LEAs are paid interim reimbursements based on claim submissions that are later reconciled after the end of the FY through a cost reconciliation process. LEAs only receive enhanced FMAP for the provision of services to qualified students. It is important that LEAs keep proper documentation of each claim, including information on the student's Medicaid identification number, provider, and place of service, as well as ensure all rendering practitioners follow licensing/certification requirements and follow appropriate supervision requirements as outlined in the LEA BOP Provider Manual.
- **RMTS:** The RMTS portion of the Billing Forum overviewed the RMTS process, reimbursable activity codes, and best practices related to Direct Service Practitioners (Participant Pool 1). The RMTS is a statistically valid, federally approved method of determining the percentage of time spent on LEA BOP-covered services through a random sampling of minutes (referred to as "moments") of practitioners' time. Participation in the RMTS is mandatory for all LEAs in the LEA BOP. Participant Pool 1 moments that qualify for Medicaid reimbursement are identified as Code 2A. LEAs should maintain supporting documentation, such as (but not limited to) the student's care plan, assessment reports, prior authorizations and school attendance records, for all reimbursable moments in the event of an audit. LEAs should update their Time Survey Participant (TSP) List each quarter to reflect new hires and remove inactive

practitioners from participation in the RMTS, as TSP Lists are critical for determining LEA funding through the LEA BOP.

Next LEA BOP Quarterly Meeting:
Wednesday, October 29, 2025, 10:30 a.m. – 3:00 p.m. Pacific Time
(Webinar via Microsoft Teams)