

SFY 2022-2023 Cost and Reimbursement Comparison Schedule (CRCS) Check-In Meeting #2

Department of Health Care Services
January 31, 2024

Agenda

- 1 Check-In Meeting Logistics
- 2 CRCS Resources
- 3 Submitted Questions and Answers
- 4 Next Steps

Check-In Meeting Logistics

- » Today is the last of two scheduled SFY 2022-23 CRCS Check-In Meetings.
- » Submit questions in the Q&A or raise your hand to ask a question.
- » SFY 2022-23 CRCS is **due March 1, 2024** (submission window opens tomorrow, February 1st).
- » Questions can be submitted via the Q&A area or to LEA@dhcs.ca.gov.

CRCS Resources for SFY 2022-23

- » The CRCS file was sent via e-blast on January 18th.
- » All information is **now posted** on the SFY 2022-23 CRCS Landing Page:
 1. Direct Medical Services Percentages.
 2. SFY 2022-23 Forms and Instructions.
 3. Signature and Certification Document.
 4. DHCS-provided data reports, including the Annual Reimbursement Report and the FMAP Grouping Reimbursement Percentages Report.
 5. A report of billed one-way trips for specialized medical transportation (if applicable to your LEA).

CRCS Training Resources

- » SFY 2022-23 CRCS Training - December 14, 2023.
- » SFY 2022-23 Check-In Meeting #1 - January 11, 2024.

Materials will be available on the LEA BOP website under the “LEA BOP Training” link (see “FY 2023-24 LEA Training Materials”).

Questions to Address in Today's Check-In

CRCS Preparation, Submission and Acceptance Process:

1. My LEA does not currently have a coordinator and I am trying to learn about the CRCS. Where do you suggest that I start?
2. What documents do LEAs need to submit with the CRCS by March 1?
3. What are the most common reasons that the CRCS is rejected after it is submitted to DHCS?
4. How do I request an extension to the March 1 due date and what is needed?

Questions to Address in Today's Check-In

Specialized Medical Transportation:

5. Can you tell us what will be required for transportation and go over Worksheet E? This is the first time my LEA will be reporting transportation costs.
6. Is there a way to determine the numerator of the one-way trip ratio if we don't collect this information?
7. Where do we report costs for transportation that we outsource to a third party?
8. If we submitted interim claims but are having trouble getting the transportation information for the CRCS, do we have to complete Worksheet E?

Questions 1 – 4: CRCS Preparation, Submission and Acceptance Process

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Questions to Address in Today's Check-In

Contractors:

9. If there are \$50,000 of contractor cost for the same type of practitioner, should we put \$25,000 or \$50,000 in object code 5800?
10. Do contractors need to be on the Pool 1 TSP list? If not, what is required?
11. Does an LEA have to submit interim billings for contractors in order to claim their costs on Worksheet D?
12. Our LEA has a contract with our COE to provide services to students, can we include the costs on our CRCS?
13. We have a scenario where a student attends a Non-Public School (NPS). Can we include these costs?


Question 1: My LEA does not currently have a coordinator and I am trying to learn about the CRCS. Where do you suggest that I start?

1. Review the CRCS training materials.

- [LEA BOP Website](#) under "LEA BOP Training".

2. Download/collect supporting files and information:

- DMSP (*input on Allocation Statistics Worksheet*).
- Annual Reimbursement Report (*input on W/S A, line ab*).
- FMAP Grouping Reimbursement Percentages Report (*input on Allocation Statistics Worksheet, cells C11 through C16*).
- Transportation Report (if applicable).
- CRCS Forms/Instructions.
- Electronic Signature and Certification Document.
- Indirect Cost Rate (from [CA Dept of Education](#), *input on the Allocation Statistics Worksheet*).



The screenshot shows the DHCS website interface. At the top, there is a navigation bar with links: Home, About DHCS, Translate, Services, Individuals, Providers & Partners, Laws & Regulations, Data & Statistics, Forms & Publications, and Search. Below the navigation bar is a table titled "Consortium Reimbursement Percentages". The table has two columns: the first column lists various consortia and regions, and the second column shows their respective reimbursement percentages. Below the table, there is a section titled "Mandatory CRCS Requirement:" followed by a paragraph explaining the requirement for LEA BOP participants. This is followed by a section titled "CRCS Supporting Reimbursement Reports:" which lists three reports: "SFY 2022-23 Annual Reimbursement Report", "SFY 2022-23 FMAP Grouping Reimbursement Percentages Report", and "SFY 2022-23 Specialized Medical Transportation Report". Each report has a "Note" section providing additional context. At the bottom, there is a section titled "SFY 2022-23 CRCS Form 6299:" which states that the following forms are required for LEAs that received interim payments in SFY 2022-23: "SFY 2022-23 CRCS Form 6299", "SFY 2022-23 CRCS Form 6299 Instructions", and "CRCS Signature and Certification Document".

Consortia	Percentage
Consortia 1, 2, 7: Sonoma - Glenn - Madera	52.86%
Consortia 3, 4, 5, 6: Sutter - Contra Costa - Santa Cruz - Stanislaus	54.54%
Consortia 8, 9: Kern - Orange	52.20%
Region 10: San Bernadino	46.70%
Region 11: Los Angeles	54.65%
LGA Consortia	53.98%
Los Angeles Unified School District (LAUSD)	66.06%

Mandatory CRCS Requirement:

Participants in the Local Educational Agency Medi-Cal Billing Option (LEA BOP) are required to annually certify, through the CRCS process, that the public funds expended to provide LEA BOP services are eligible for federal financial participation. Therefore, continued enrollment in the LEA BOP is contingent upon timely submission of the CRCS each SFY. Failure to meet this requirement may result in suspension from the LEA BOP.

CRCS Supporting Reimbursement Reports:

- [SFY 2022-23 Annual Reimbursement Report](#)

Note: The LEA Annual Reimbursement Report will assist LEAs to complete the CRCS. Total interim reimbursement will be entered on the CRCS Worksheet A, line ab. LEAs should verify the reasonableness between your internal accounting system and the Annual Reimbursement Report and accurately input total interim reimbursement information on your CRCS form. Potential discrepancies between the Annual Reimbursement Report and your internal system numbers should be documented to support the numbers you input on the CRCS forms and to provide an accounting documentation trail for review and audit. Note that the interim reimbursement figures published on the Annual Reimbursement Report reflect total interim payments made as of December 12, 2023, prior to the one-year claiming limitation for LEA BOP claims. The Annual Reimbursement Report information posted above is not final and will be adjusted by DHCS Audits and Investigations during the review of the CRCS.

- [SFY 2022-23 FMAP Grouping Reimbursement Percentages Report](#)

Note: The FMAP Grouping Reimbursement Percentages Report will assist LEAs to complete the allocation statistics CRCS worksheet. The data provided by DHCS will include a percentage breakdown of each LEA's total interim reimbursement by aid code groupings that are assigned to each FMAP category. The data represents how much of the LEA's total reimbursement is attributable to aid codes in each FMAP grouping and the total of all data entered will sum to 100%.

- [SFY 2022-23 Specialized Medical Transportation Report](#)

Note: The LEA Specialized Medical Transportation Report may assist LEAs in identifying their billable one-way trips in SFY 2022-23, which is the numerator in the Specialized Medical Transportation One-Way Trip Ratio (calculated on the Allocation Statistics worksheet on the CRCS). LEAs should verify the reasonableness between this report and your internal accounting system and accurately input total one-way trips on the Allocation Statistics worksheet. Note that the count of one-way trips published on this report reflects payments made as of December 12, 2023, prior to the one-year claiming limitation for LEA BOP claims. **If your LEA does not claim for specialized medical transportation, you will not use the SFY 2022-23 Specialized Medical Transportation Report.**

SFY 2022-23 CRCS Form 6299:

The following form are required for LEAs that received interim payments in SFY 2022-23:

- [SFY 2022-23 CRCS Form 6299](#)
- [SFY 2022-23 CRCS Form 6299 Instructions](#)
- [CRCS Signature and Certification Document](#)

Question 1 - Where do I start? *(continued)*

- 3. Complete the Certification Worksheet - Contact / Consortium Information.**
- 4. Work with payroll to gather salary/benefit costs for W/S B.**
 - Pool 1 TSP List (by quarter).
 - Identify federal funds to net out on Worksheet B.
- 5. Determine what other non-personnel costs are eligible for W/S C.**
 - Materials/supplies, non-capitalized equipment, professional dues, etc.
 - Eligible object codes identified on Worksheet C.
 - Identify federal funds to net out on Worksheet C.
- 6. Identify eligible health service contractor invoices for W/S D.**
 - Costs must be limited to providing covered services (e.g., no educational costs, services by non-covered practitioners, etc.).
 - Identify federal funds to net out on Worksheet D.
 - Services provided in SFY 22-23 (July 1, 2022 - June 30, 2023).

Question 1 – Where do I start? *(continued)*

7. Determine if transportation costs will be reported on Worksheet E.

- In-house vs. contracted transportation costs (or both).
- Gathering one-way trip ratio information.

8. Migrate quarterly TSP Lists to Worksheet F (F.2, F.3, F.4)

- Pool 1 Time Survey Participants are the only employed staff with costs on W/S B.

9. Complete the Annual Contracted Compensation and Hours (W/S G).

- Not part of the cost settlement process, for rate rebasing purposes only.
- Based on employed practitioner contracted annual compensation and hours.
- Populate annual data when an employee is listed on one or more of the quarterly RMTS TSP lists (W/S F.2, F.3 and F.4).

10. Review required input areas and complete the Electronic Signature and Certification Form.

- Complete the one-page PDF (downloaded as part of step 2).
- Transfer overpayment/underpayment amount from W/S A, line ae) to PDF.

11. Submit all documents by March 1 to LEA.CRCS.Submission@dhcs.ca.gov.

Question 2: What documents to LEAs need to submit with the CRCS by March 1?

- » A complete submission package for SFY 2022-23 includes:
1. Completed Excel file.
 2. PDF of the signed Certification Form (total underpayment/overpayment must reconcile to the Certification Worksheet on the Excel file).
 3. Grouping Schedules or Bridging Documents used to prepare the CRCS.
 4. Production Log identifying LEA BOP units/encounters billed during the cost reporting year.

**Submit complete submission package in one email to:
LEA.CRCS.Submission@dhcs.ca.gov by March 1, 2024.**

Question 3: What are the most common reasons that the CRCS is rejected after it is submitted to DHCS?

- » When the CRCS is submitted to LEA.CRCS.Submission@dhcs.ca.gov, basic edit checks are conducted prior to CRCS acceptance. Basic edit checks include:
 - All four required files have been submitted.
 - The form reflects the correct SFY (e.g., not using last year's Excel template).
 - Overpayment/underpayment amount reconcile between the Certification Form and Excel file.
 - Certification Form PDF is signed/dated.
 - Bridging documents or production log are missing information/incomplete.
 - CRCS Excel file is incomplete (e.g., allocation statistics are left blank in the Excel file).
 - TSPs have been reported in Excel file.
- » When basic edit checks are met, the LEA will receive an e-mail notification of CRCS acceptance.
- » If problems are identified, the CRCS will be rejected. The LEA will be notified of the problem(s) and must correct and resubmit.

Top CRCS Rejection Reasons (SFY 2021-22 Reports)

1. Missing or Incomplete Bridging Document / Production Log.
2. Incomplete Excel File.
 - No TSP lists were populated.
 - Required fields did not have data.
 - Excel file was blank.
3. Missing or Incomplete Certification Form (PDF).
4. Discrepancy in Total Over/Underpayment between PDF and Excel.
5. Submission of Incorrect Form (older SFY template used).
6. Excel File Missing or Password Protected and Unable to Open.

Question 4: How do I request an extension to the CRCS due date and what is needed?

- » Extension requests submitted to LEA.CRCS.Submission@dhcs.ca.gov.
- » Submit extension requests **before the March 1 due date**.
- » Identify your LEA Name and NPI, the reason for your extension request and your requested timeframe to submit.
- » Extensions are granted by Audits and Investigations (A&I) on a case-by-case basis; you will receive an email response from A&I.
- » LEAs that do not receive an extension and fail to submit by March 1 may be placed on 100% withhold until compliant with the CRCS requirement.

Questions 5 – 8: Specialized Medical Transportation

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Question 5: Can you tell us what will be required for transportation and go over Worksheet E?

- » Specialized transportation costs are summarized on Worksheet E, collected based on three sub-worksheets:
 - **Worksheet E.1** – Employed practitioner salaries and benefits for bus drivers, substitute drivers and mechanics (report total salaries and benefits, net out federal resources).
 - **Worksheet E.2** – Other non-personnel costs (limited to those identified on W/S E.2); Includes contracted services and contracted equipment costs.
 - **Worksheet E.3** – Equipment depreciation based on straight-line depreciation.
- » Costs are allocated on the CRCS using a **Medi-Cal One-Way Trip Ratio**:

Medi-Cal Eligible IEP/IFSP One-Way Trips
Total number of IEP/IFSP One-Way Trips

Medi-Cal One-Way Trip Ratio

$$\frac{\text{Medi-Cal Eligible IEP/IFSP One-Way Trips}}{\text{Total number of IEP/IFSP One-Way Trips}}$$

- » Medicaid eligible IEP/IFSP one-way trips (numerator) must meet all three requirements:
 1. Specialized medical transportation is specifically listed in the IEP/IFSP as a required service.
 2. A Medicaid IEP/IFSP medical service (other than transportation) is provided on the day that specialized medical transportation is billed.
 3. Transportation is provided in a specially adapted vehicle.
- » The denominator will represent the total number of trips for all students with transportation in their IEP/IFSP.

Question 6: Is there a way to determine the numerator of the one-way trip ratio if we don't collect this information?

- » The numerator must reflect total one-way trips that are eligible to be billed.
 - T2003, one unit = a one-way trip.
- » Many LEAs can get this count from internal systems.
- » If LEAs do not track this information, DHCS has developed a report that includes total one-way trips billed during SFY 2022-23.
 - To be billed to LEA BOP, all three requirements on prior slide were met.
 - Report available on the CRCS landing page.
 - Does not include billable trip counts of less than 11 for data privacy purposes (reach out to DHCS if your NPI indicates "*email LEA@dhcs.ca.gov for data*").
- » LEAs are responsible for determining the denominator (total one-way trips for all students with transportation in the IEP/IFSP).

Question 7: Where do we report costs for transportation that we outsource to a third party?

Worksheet E.2: Other Specialized Medical Transportation Costs

Specialized Medical Transportation Costs

Description	Gross Costs (A)	Expenditures from Federal Resources or Grants (B)	Total Other Specialized Medical Transportation Costs Net of Federal Resources or Grants (C) = (A)-(B)
Lease/Rental			\$ -
Insurance			\$ -
Maintenance and Repairs			\$ -
Fuel and Oil			\$ -
Contract - Transportation Services (Object Code 5800)			-
Contract - Transportation Equipment (Object Code 5800)			-
Contract - Transportation Services (Object Code 5100)			-
Contract - Transportation Equipment (Object Code 5100)			-
Total	\$ -	\$ -	\$ -

5800 - Contractor costs up to \$25,000 for each individual subagreement.

5100 - Remainder of contractor costs for individual subagreements that exceed \$25,000.

Question 8: If we submitted interim claims but are having trouble getting the transportation information for the CRCS, do we have to complete Worksheet E?

- » All data reported on the CRCS must have supporting documentation.
- » If your LEA cannot establish a one-way trip ratio (or does not have adequate documentation to support costs), you are **not required** to report transportation costs on Worksheet E.
 - Under this scenario:
 - ✓ Leave the Medi-Cal one-way trip ratio and Worksheet E series blank.
 - ✓ Report total interim reimbursement (including transportation) on Worksheet A.
 - Interim reimbursement for specialized transportation will be included in the cost settlement calculation, without supporting costs.

Questions #9 - 13: Contractors

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Question 9: If there are \$50,000 of contractor cost for the same type of practitioner, should we put \$25,000 or \$50,000 in object code 5800?

- » Object Code 5800 vs. 5100:
 - Object Code 5800 is used to report the **first \$25,000 of each individual subagreement.**
 - Remaining costs for each individual subagreement will be reported in Object Code 5100.
- » Example A – \$60,000 contract with one agency for speech therapists:
 - Report \$25,000 in Object Code 5800.
 - Report \$35,000 in Object Code 5100.
- » Example B – Contract with two agencies for speech therapists. Agency 1 for \$40,000 and Agency 2 for \$20,000:
 - Report \$45,000 in Object Code 5800 (\$25,000 Agency 1 + \$20,000 Agency 2).
 - Report \$15,000 in Object Code 5100 (\$15,000 Agency 1).

Question 10: Do contractors need to be on the Pool 1 TSP list? If not, what is required?

- » No - for LEA BOP, health service contractors do not participate in RMTS and do not need to be on the Pool 1 TSP List.
- » Contractors must deliver covered services to students for dates of service in SFY 2022-23 (July 1, 2022 - June 30, 2023).
- » Contractor invoices must identify covered services, practitioner types, period in which services were rendered, total amount paid, etc.
- » Invoices must separate costs for educational services or non-covered services/practitioners, if applicable.
- » Contractor must document services to the same extent that employed practitioners are required to document services for billing.

Question 11: Does an LEA have to submit interim billings for contractors to claim their costs on Worksheet D?

- » Billing for LEA BOP covered services is a **best practice that is strongly encouraged by DHCS**, but it is not currently an explicit requirement to include costs on the CRCS.
- » Contracted practitioners without interim billings may be included on the CRCS if:
 - They met rendering practitioner qualifications (provider manual section [*loc ed rend*](#)).
 - They were supervised, if necessary, and any supervision was documented.
 - The invoice documents the provision of LEA BOP covered services and dates of service.
 - Services met LEA BOP billing requirements, including authorization requirements.
 - The services were documented to the extent required for Medi-Cal billing purposes.
 - The LEA has documentation and can readily support the contractor's LEA BOP services.

Question 12: Our LEA has a contract with our COE to provide services to students, can we include the costs on our CRCS?

- » In general, when a local district contracts with a COE for services rendered to their enrolled students, the local district will:
 - Have an MOU/agreement with the COE;
 - Pay the COE a contracted rate;
 - Bill Medi-Cal when a covered service is provided to the district's enrolled student;
 - Receive the interim payment for service; and
 - Include the contractor costs on CRCS Worksheet D.
- » Under this scenario, the COE will not bill LEA BOP for services rendered because they are receiving payment from the local district.
- » Other scenarios exist which may require additional consideration.
 - Surveying COEs to gather more information on models used throughout the State.
 - DHCS will provide additional guidance once the survey results are analyzed.
 - LEAs can provide feedback via LEA@dhcs.ca.gov.

Question 13: We have a scenario where a student attends a Non-Public School (NPS). Can we include these costs?

- » When districts contract with a NPS/Non-Public Agency (NPA) to provide services to students, costs reported on the CRCS must reflect LEA BOP services.
 - Requires the NPS/NPA invoice to **isolate health service costs** related to the provision of LEA BOP covered services.
 - Contracted costs cannot be based on “bundled” rates that include tuition costs.
 - Work will be necessary to ensure that the invoiced amount is limited to what is eligible for reimbursement by Medi-Cal.
 - A **tuition rate per diem x number of days** is not acceptable for invoicing, since the cost would not be limited to LEA BOP covered services.
- » Documentation of all instances of IEP health-related covered services must be maintained and available for review.

Next Steps

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Submitting the SFY 2022-23 CRCS

- » Download all documents from the LEA BOP CRCS webpage (all documents are now posted).
- » Complete the Excel template.
- » Certify the costs on the Electronic Certification Form (CRCS Signature and Certification Document).
- » Gather your documentation to support the CRCS.
- » Submit all four required documents by March 1 to LEA.CRCS.Submission@dhcs.ca.gov.

QUESTIONS

**Please submit additional questions
to the LEA BOP inbox:
LEA@DHCS.CA.GOV**

Thank You

