



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

SFY 2018-19 CRCS Check-In

January 12, 2023



Training will begin at 1:00 p.m.

Introductions

» **California Department of Health Care Services (DHCS)**

» Administers the Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) and School-Based Medi-Cal Administrative Activities Program (SMAA Program)

» **Guidehouse**

» DHCS contractor that assists as a subject-matter expert

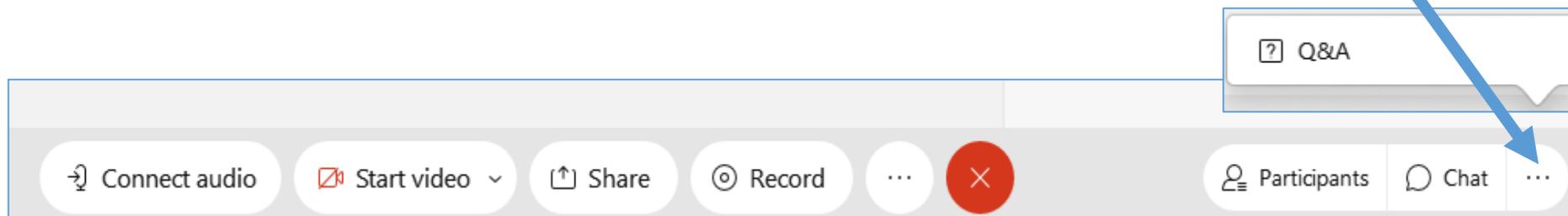
Session Goals

1. Review the CRCS deadline and submission requirements
2. Understand how SFY 2018-19 form differs from other backcasting periods
3. Explain the **NEW electronic certification requirement**
4. Review the SFY 2018-19 Medicaid Eligibility Rate (MER) calculation components
5. Inform LEAs of **NEW electronic audit report availability**

Housekeeping Items

- » Training scheduled from 1:00pm to 1:30pm
- » Time allocated for questions until 2:00pm, if needed
- » Additional questions on the SFY 2018-19 CRCS can be sent to LEA.CRCS.Questions@dhcs.ca.gov throughout the month
- » Submit questions via the **Q&A function** (*not* chat)

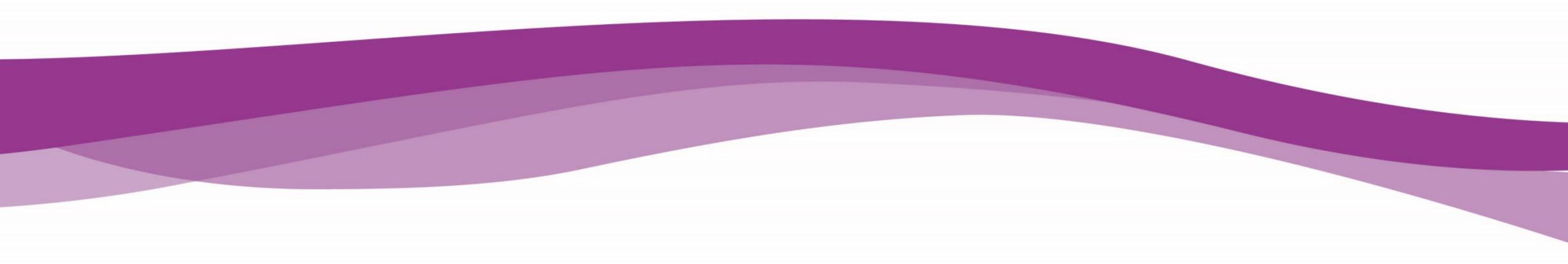
The Q&A window is accessed by clicking the button with three dots then select the Q&A pop up.



Agenda

- 1 SFY 2018-19 CRCS Reminders
- 2 Electronic Certification Process
- 3 SFY 2018-19 CRCS MER Overview
- 4 Electronic Audit Reports

Section 1: SFY 2018-19 CRCS Reminders



Overview of CRCS Resources

Primary LEA resource is the LEA CRCS Page:

https://www.dhcs.ca.gov/provgovpart/Pages/CRCS_Forms.aspx

The screenshot displays the DHCS website interface. At the top, there is a navigation bar with the DHCS logo and icons for Services, Individuals, Providers & Partners, Laws & Regulations, Data & Statistics, Forms & Publications, and Search. Below this, the main content area is titled "Cost and Reimbursement Comparison Schedule (CRCS) Resources". It contains a list of links: "Includes CRCS reports for Fiscal Years 2009-10 and 2010-11 (note not all audited CRCS reports are included) and includes a [Summary of Audited Impact on Program Expenditures](#).", "[CRCS Documentation Training](#)", "[CRCS FAQs](#)", "[CRCS Flow Chart](#)", "[CRCS Submission Checklist](#)", "[California School Accounting Manual](#)", "[LEA Indirect Cost Rate Data](#)", "[Standardized Accounting Code Sheet](#)", "CRCS Questions: [LEA.CRCS.Questions](#)", and "CRCS Submissions: [LEA.CRCS.Submissions](#)".

Below the list is a section titled "CRCS Due Dates" with a table:

State Fiscal Year
2020-21
2019-20
2015-16
2016-17
2017-18
2018-19

To the right of the table is a smaller version of the DHCS website header and a section titled "CRCS Forms". The "CRCS Forms" section contains the text: "Below are CRCS forms for State Fiscal Years (SFY) 2009-10 through 2019-20. Note that the link to the CRCS and Certification of Zero Reimbursements for SFY 2013-14 is currently unavailable. Please contact the LEA BOP directly at lea@dhcs.ca.gov to request those documents." Below this text is a list of links for CRCS forms for various fiscal years: "CRCS for Fiscal Year 2020-21", "CRCS for Fiscal Year 2019-20", "CRCS for Fiscal Year 2018-19" (highlighted in yellow), "CRCS for Fiscal Year 2017-18", "CRCS for Fiscal Year 2016-17", "CRCS for Fiscal Year 2015-16", and "CRCS for Fiscal Year 2014-15".

CRCS – Due Dates

CRCS Due Date	SFY	Submission Window*	36-Month Audit Statute Deadline
3/01/2022	2020-21	2/01/22 - 3/01/22	3/1/2025
4/30/2022	2019-20	4/01/22 – 4/30/22	4/30/2025
6/30/2022	2015-16	6/01/22 – 6/30/22	6/30/2025
8/31/2022	2016-17	8/01/22 – 8/31/22	8/31/2025
10/31/2022	2017-18	10/01/22 – 10/31/22	10/31/2025
1/31/2023	2018-19	1/01/23 – 1/31/23	1/31/2026
3/01/2023	2021-22	2/01/23 – 3/01/23	3/01/2026
3/01/2024	2022-23	2/01/24 – 3/01/24	03/01/2027

* **Submission Window** represents the defined period that the CRCS will be accepted for processing when submitted to LEA.CRCS.Submission@dhcs.ca.gov.

Differences: SFY 2017-18 vs. 2018-19

- » SFY 2018-19 CRCS will include an **electronic CRCS Certification and Signature Document**
- » SFY 2017-18 CRCS was due October 31, 2022, and used audited costs as the basis for the amended report
- » SFY 2018-19 CRCS **will not include any audited data**
 - » **All LEAs will need to complete an amended report** using the newly published template
 - » LEAs may transfer costs from their initial SFY 2018-19 CRCS submission when no changes are identified by the LEA
 - » Costs may be added to the amended report under the new payment methodology

Who Can be Included on the SFY 2018-19 CRCS?

» Under the new payment methodology, LEAs may include:

- 1. Practitioners eligible and included on the initial SFY 2018-19 CRCS**
(submitted to DHCS in November 2020)
- 2. New practitioners** that were approved under State Plan Amendment (SPA) 15-021 that met requirements listed in [PPL 21-042](#)
- 3. Original practitioners with no interim payments** that met the requirements in PPL 21-042

» In all cases, LEAs must have documentation to support costs

Documentation – Practitioners without Interim Payments

- » If the LEA reports practitioners without interim billings on the CRCS, the LEA must be able to support costs with **documented covered services**
 - ✓ Did the practitioner meet the qualifications to bill for the covered service per LEA BOP requirements found in the Provider Manual [*\(loc ed rend\)*](#)?
 - ✓ Was the practitioner supervised, if necessary? Is this documented?
 - ✓ Did the practitioner record services (in a portal or hard copy)?
 - ✓ Did the practitioner document to the extent required for billing purposes?
 - ✓ In an audit, could the LEA support that the practitioner provided covered LEA BOP services? Could they readily locate supporting documentation?
- » **If NO to any of the above, do not include these practitioner costs on the CRCS!**

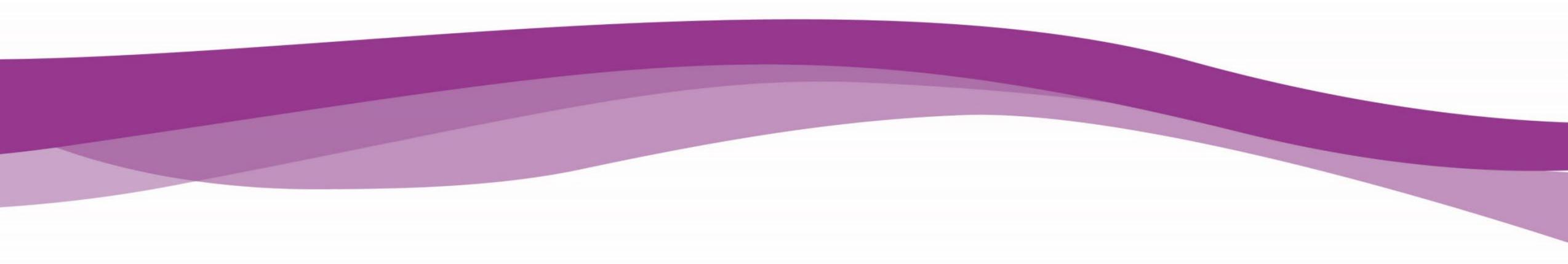
SFY 2018-19 Submission Requirements

» A complete submission package for SFY 2018-19 includes:

1. Completed **Excel file**
2. PDF of the **completed electronic Certification and Signature Document** (total underpayment/ overpayment must reconcile to the Certification Worksheet on the Excel file)
3. **Grouping Schedules or Bridging Documents** used to prepare the CRCS (Excel files)
4. **Production Log** identifying LEA BOP units/encounters billed during the cost reporting year (Excel file)

**Submit complete submission package in one email to:
LEA.CRCS.Submission@dhcs.ca.gov by January 31, 2023**

Section 2: Electronic Certification Process

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Electronic Certification Process - Overview

- » For the SFY 2018-19 amended CRCS and forward, LEAs must complete and digitally sign the electronic CRCS Certification and Signature Document
- » LEAs will complete the CRCS Excel template, then transfer the following information to the electronic Certification and Signature Document:
 - » **LEA's contact information**
 - » **"Total Overpayment/(Underpayment) for LEA BOP Services"** – this amount is found on the Certification Worksheet in the SFY 2018-19 template
 - » **Signatory information**

Certifying Total Underpayment/ Overpayment

- » The electronic CRCS Certification and Signature Document is on the [LEA BOP SFY 2018-19 CRCS webpage](#)
- » Input LEA Provider information and SFY
- » Input the amount being certified **exactly as it appears in Excel**
- » Complete signatory information and date
- » Save as a PDF and include with submission package

State of California – Health and Human Services Agency		Department of Health Care Services	
Local Educational Agency Medi-Cal Billing Option Program (LEA BOP)			
Cost and Reimbursement Comparison Schedule (CRCS)			
LEA Provider Name:			
Contact Name:			State Fiscal Year (SFY):
National Provider Identifier:		E-mail Address:	
Certification of State Matching Funds for LEA BOP Services:			
I, the undersigned, under penalty of perjury state the following:			
A. LEA warrants and represents that the information on the accompanying claim form is true and correct.			
B. LEA represents that its expenditures under the LEA BOP represent allowable expenditures eligible for Federal Financial Participation (FFP) pursuant to the requirements of Section 1903(w) of the Social Security Act and Subpart B of Part 433 of Title 42 of the Code of Federal Regulations.			
C. LEA will maintain documentation supporting the expenditures claimed on the accompanying claim form. This documentation must include all fiscal records required for Medi-Cal audits.			
D. LEA certifies that all expenditures reported within the Medi-Cal Cost and Reimbursement Comparison Schedule are in compliance with the Office of Management and Budget (OMB) Super-Circular (2 CFR 200). To the extent that reporting is not governed by OMB Super-Circular, LEA certifies that Generally Accepted Accounting Principles have been applied.			
E. LEA's expenditures claimed have not previously been, nor will they be, claimed at any other time as claims to receive FFP funds under Medi-Cal or any other program.			
F. LEA acknowledges that the information is to be used by the Department of Health Care Services (DHCS) for filing of a claim with the federal government for federal funds and understands that misrepresentation of information constitutes violation of federal and state law.			
G. LEA acknowledges that all records of funds expended are subject to review and audit by DHCS and the Federal Centers for Medicare and Medicaid Services.			
H. LEA understands that DHCS must deny payment of any claim if it is determined that the certification and/or claim form is not adequately supported for purposes of FFP.			
As a public administrator, a public officer or other public individual duly authorized as having authority to sign on behalf of the LEA, I am authorized or designated to make this Certification and declare that this Certification and claim form documents attached hereto are true and correct. I understand that the filing of a false or fraudulent claim or making of false statements in support of a claim may violate the Federal False Claims Act or other applicable statute and federal law and may be punishable thereunder.			
Summary of Overpayments/(Underpayments):			Enter amount below:
Total Overpayment/(Underpayment) For LEA BOP Services (From Excel Certification Worksheet, enter Underpayment as a negative number)			
Name:		Title:	
Signature:		Date:	

Electronic Certification Process - Contact Information

Certification Worksheet

Local Educational Agency Medi-Cal Billing Option Program (LEA BOP)			
Cost and Reimbursement Comparison Schedule (CRCS)			
SFY 2018-19			
1. LEA Identification:			
LEA BOP Provider Name	California School District	National Provider Identifier	1234567891
Contact: Name	Jane Smith	Provider No. / CDS Code	1234567
Phone	(567) 895-4326	Title	LEA Contact
Fax	(345) 678-2437	E-mail Address	example@caschool.edu



State of California – Health and Human Services Agency		Department of Health Care Services	
Local Educational Agency Medi-Cal Billing Option Program (LEA BOP)			
Cost and Reimbursement Comparison Schedule (CRCS)			
LEA Provider Name:		<i>Input the SFY Information:</i>	
California School District		State Fiscal Year (SFY): 2018-2019	
Contact Name:	Jane Smith		
National Provider Identifier:	1234567891	E-mail Address:	example@ca.school.edu

Electronic Certification Process- Summary of Overpayments/(Underpayments) & Signature

Certification Worksheet

Summary of Overpayments/(Underpayments):			
Total Overpayment/(Underpayment) For LEA BOP Services (From Worksheet A)			\$ 84,127
Jane Smith	LEA Contact		
Name	Title		
SEE LEA BOP WEBSITE FOR ELECTRONIC CERTIFICATION FORM			
Signature		Date	

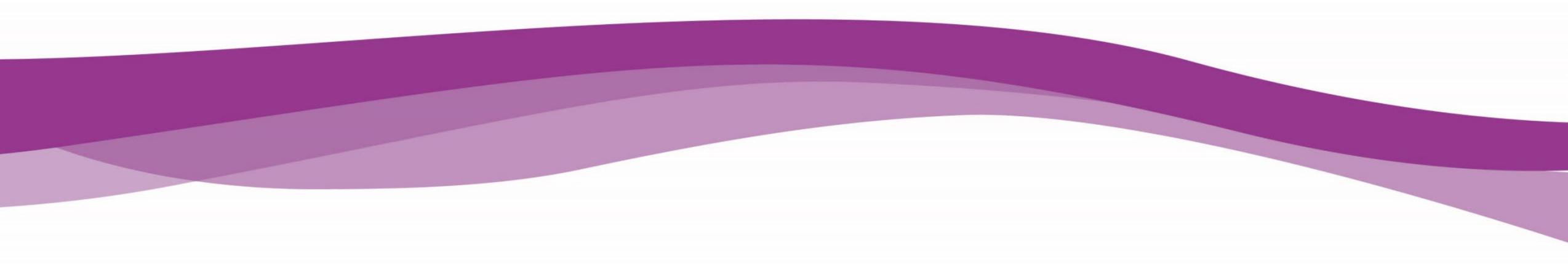
Summary of Overpayments/(Underpayments):	Enter amount below:
Total Overpayment/(Underpayment) For LEA BOP Services (From Excel Certification Worksheet, enter Underpayment as a negative number)	\$ 84,127
Name: Jane Smith	Title: LEA Contact
Signature: Jane Smith	Date: 1/10/2023

Electronic Certification Process - Submission

- » Once completed, the LEA will save the electronically signed CRCS Certification and Signature Document as a PDF and submit with the submission package
- » Remember to double-check that reported overpayment or underpayment amount **is exactly the same** as the amount on the Excel Certification Worksheet
- » A copy of the electronic CRCS Certification and Signature Document is available on the LEA BOP [SFY 2018-19 CRCS webpage](#)

**Submit complete submission package in one email to:
LEA.CRCS.Submission@dhcs.ca.gov by January 31, 2023**

Section 3: SFY 2018-19 CRCS Medi-Cal Eligibility Rate (MER) Overview



SFY 2018-19 CRCS MER Overview

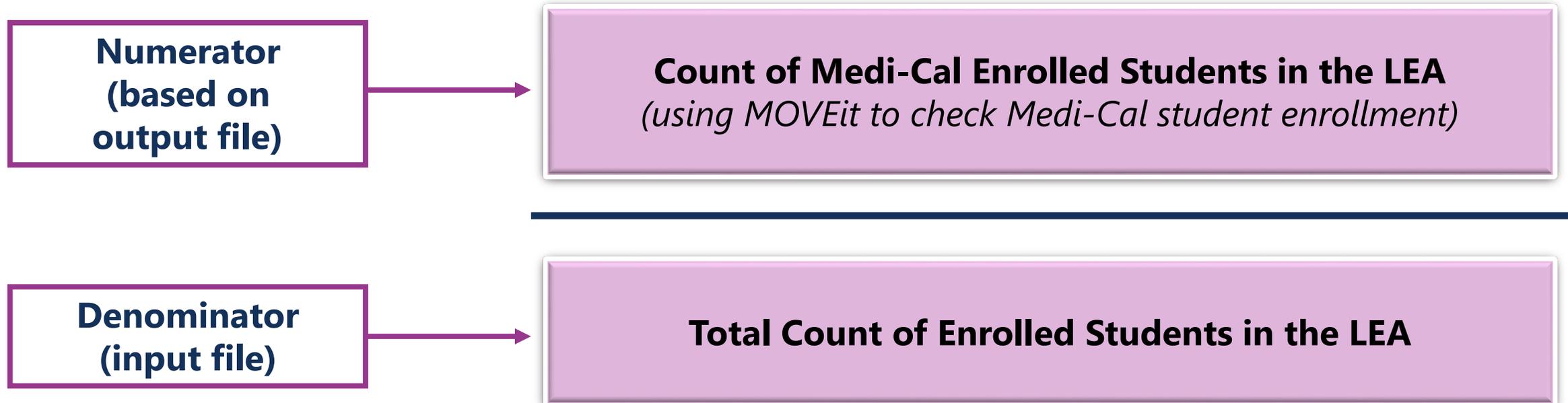
- » The direct service MER is **calculated annually** and used to apportion cost to the Medi-Cal Program
- » The MER is obtained for **a snapshot in time**
- » MER calculation **methodology is outlined in [PPL 22-001](#)**
- » The SFY 2018-19 MER is calculated using **three components**:
 1. Numerator: Number of Medi-Cal Enrolled Students in the LEA
 2. Denominator: Total Number of Students Enrolled in the LEA
 3. Statewide Unsatisfactory Immigration Status (UIS) Adjustment Factor (automatically applied on the CRCS)

Priority Order for Determining MER

Available options (in priority order) to determine the SFY 2018-19 MER:

1. Option 1 *(LEA BOP-specific MER data must be used, if available):*

Use SFY 2018-19 MOVEit output file (specific to LEA BOP) to obtain the numerator.



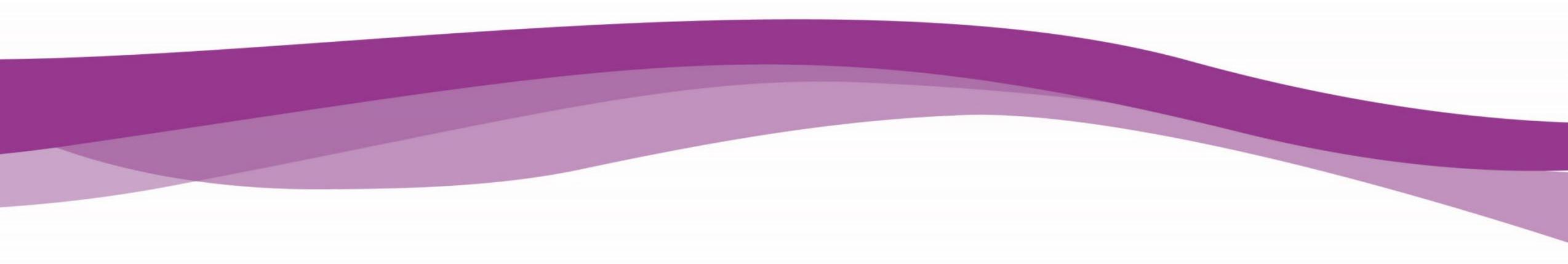
Priority Order for Determining MER *(continued)*

- 2. Option 2** *(applicable only for LEAs that participate in SMAA):*
Use MER data from your LEA's SFY 2018-19 SMAA invoices.
The average SMAA MER for SFY 2018-19 will be your LEA's proxy MER for the SFY 2018-19 CRCS.
- 3. Option 3** *(applicable when option 1 or 2 is not available):*
Reach out to LEA@dhcs.ca.gov for assistance by January 23.
DHCS will provide further instruction based on your LEA's specific situation.

MER Documentation Reminders

- » If using Option 1, both data files (total student enrollment input file and the MOVEit output file) must be maintained for audit and/or review
 - Files will contain highly sensitive Protected Health Information (PHI) and must be **securely stored**.
- » If using Option 2, SMAA invoices must be maintained for audit/review
- » All documentation must be maintained for a minimum of 3 years from date that the amended CRCS is accepted by DHCS
 - LEAs involved in an audit at the end of the 3-year required retention period must maintain records until the audit is complete

Section 4: Electronic Audit Reports

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Electronic Audit Reports Now Available

- » Electronic Audit Reports - **now available to LEAs that opt-in** to this service
- » To opt-in and receive electronic reports via DocuSign, complete:
 - Form titled “**Consent for Electronic Service of DHCS Audit Reports**”
AND
 - **Attachment A** (place your LEA Provider Name and NPI next to each SFY listed)
- » **Send both forms to DHCS:** LEAAuditQuestions@dhcs.ca.gov
- » Forms were sent via e-blast to the LEA BOP listserv on January 4 (to request copies, email LEA@dhcs.ca.gov)

Electronic Audit Reports - Deadlines

- » LEAs choosing electronic delivery must submit the forms by **Wednesday, January 18, 2023**, to receive their audit reports for the SFY 2020-21 CRCS electronically
- » Once signed up for electronic delivery, LEAs must notify DHCS at FAB-FATS@dhcs.ca.gov of a new service e-mail **at least 30 days** before ceasing to use the existing service e-mail

Open Q&A

LEA@dhcs.ca.gov