

## SMAA LEA Call Minutes 4/13/16

1. Discussion of EPSDT (Early and Periodic Screening, Diagnostic and Treatment) and Schools- Dianna Niebuhr, Partnership for Children

EPSDT is a controlled funding stream for children's mental health through counties. School districts can partner with counties in deciding how the funding is expressed. Districts are encouraged to give feedback to Partnership for Children about this program and information provided in the paper (attached). How can funding support students? EPSDT covers all health services, but it can refer to only mental health services. It is an entitlement under the federal law. In the past the cost sharing was 50% being paid by states and 50% being paid by the federal govt. Counties paid \$.05 of each dollar. This worked as a cap on spending. In 2011 the realignment provided counties with increased flexibility to prioritize the amount to realigned programs and provide revenue growth. Counties have accountability between the two sub-accounts (Protective Services/ Behavioral Health).

Historically the responsibility was on the counties to provide support and services, but there was limited funding. Recently counties have been in a state of recovery. Counties can use the flexibility for funding on programs that work best. School districts can now partner with counties at the planning table. Counties were slow to see that the cap is no longer an issue since 2011. There can now be different types of spending. This is an opportunity for LEAs to plan with counties to help get mental health services to young people. The funding comes from the Dept. of Behavioral Health. For further questions or information on EPSDT contact Deanna Niebuhr [deanna@partnerforchildren.org](mailto:deanna@partnerforchildren.org)

2. EOB Letter

DHCS sent out an Explanation of Benefits update on March 25<sup>th</sup>. The Third Party Liability unit has contracted with a vendor and is billing student's other health insurance if they have an OHC on their eligibility record. Because Medi-Cal is the payor of last resort, the TPL Unit is trying to recoup what was paid for services. Recoupments are being submitted to DHCS at this time. Parents are getting EOBs (Explanation of Benefits) regarding these school services that shouldn't be applied to their individual health insurance. Some Parents believe it is a balance due and some have begun revoking their parental consent to bill. The burden is on the LEAs to explain the EOB to families. Moving forward LEAs may need to reconstruct permissions and release documents based on new TPL decisions.

The recent Ad Hoc Workgroup meeting reviewed this issue as well. There will be an email blast sent out to add further clarification and request information from LEAs.

DHCS will use these experiences as examples for how they will work on policy with TPL. If your LEA has been impacted by this please send the information to [lea@dhcs.ca.gov](mailto:lea@dhcs.ca.gov)

3. SB 75 and AB 1296

Undocumented children will be eligible for Medi-Cal beginning May 16. Please see attached documents from DHCS that detail their enrollment process for these children. If your LEA is interested in SB 75/ Medi-Cal outreach please contact Teacher for Healthy Kids for tools and resources [ngarcia@teachersforhealthykids.org](mailto:ngarcia@teachersforhealthykids.org) or 916-440-8811.

4. Update from the LEAs - [\(PPL\) 16-007 Claiming Reimbursement for Participation Fees](#)

PPL- 16-007 claiming reimbursement – This item will be on the agenda for the next DHCS MAA call. The wording needs to be clarified on participation fees related to SMAA. The PPL states that LEAs cannot claim the cost of participation fees. DHCS is claiming the cost. There was a state audit in region 11 LEC last August and duplicate claiming was an issue. THE LEC had advised LEAs that they could claim participation fees.

LEAs are required to have a HOST County Contract on hand in their files Many LEAs did not know this was required and have not seen one. LEAs are encouraged to review their files and attain this file for their records in case of an audit.