SMAA LEA Workgroup Call Minutes
Thursday, March 7th

1. RMTS
   RMTS moments during the last week of school can often cause LEAs issues with compliance. Technical language in the manual does not address the 4th quarter, and LEAs have until August to reply to the moment if it is received on the last day of school. Though compliance is difficult, addressing the issue of excluding the last week of school to allow for better compliance could lead to an audit and more punitive restrictions from CMS like including business days and not just student days. All student days in the quarter need to be claimable or the salary of TSPs will need to be adjusted for only claimable days, limiting reimbursement. This issue may be brought to DHCS to review ways to help with compliance without requesting a full change from CMS.

2. SPA Implementation

   The changes made from implementing the SPA will affect the key areas below. These issues are challenges and concerns that need clarification and solutions from DHCS.
   
   • TSP List – The MAA and LEA BOP lists will not co-mingle, but they will be part of the same system. There are two cost pools: Direct Services and Admin. LEA BOP claims Direct Service Providers in Cost Pool 1. Positions included with the SPA implementation will have multiple challenges with compliance due to their type of position or access to email/computers during the work week. However, if they are not included in the cost pool, a significant portion of claimable services are missed out on.
   
   • Quarter 1 – The TSP list for Quarter 1 has already been submitted. This list will also affect Quarter 2. However, the SPA’s additional claimable positions have not been added. This will cause an issue with Cost Pool 1 TSP list billing moving forward. Will DHCS address this issue?
   
   • Training for LECs/LGAs, New TSP Positions – Training will need to be provided to all staff affected by the SPA. LECs are pushing back on claiming for the newer TSP positions, and the new TSPs, like Health
Aides, will be taking on new responsibilities that are not easily reported as part of their daily tasks.

- Vacancies – Can vacancies be incorporated into the TSP list? Michigan has a system that allows for vacancies to be on the list and be filled and added throughout each quarter with HR verification. Moments that go to the vacant position is forwarded to the supervisor of the position. Can this be a solution for California as well?

3. State Plan Amendment- Update
   - Training: April 22 – Southern California
     
     *If you have LEA policy or program questions, please forward them to the LEA mailbox at: LEA@dhcs.ca.gov.*

**Southern California – Save the Date!**

**Subject:** Local Educational Agency (LEA) Medi-Cal Billing Option Program (BOP) State Plan Amendment (SPA) 15-021 General Overview Training

**Topics Covered:** Overview of Program changes related to SPA 15-021, including the addition of Random Moment Time Survey for LEA BOP practitioners, qualifications required to bill new practitioners, requirements to bill new covered services, documentation requirements and future cost reporting changes. The training will also cover how to bill for qualified services rendered back to the SPA’s 7/1/15 effective date.

**Suggested Attendees:** LEA Medi-Cal Billers and Program Coordinators; LEAs, School Districts or County Offices of Education currently participating or interested in participating in the LEA BOP; LEA BOP Billing Vendors; Local Educational Consortiums (LECs) and Local Governmental Agencies (LGAs); School-Based Associations

**Date:** April 22, 2019

**Time:** tbd

**Location:** 200 Kalmus Drive, Costa Mesa, CA 92626

In preparation for the approval of SPA 15-021 by the Centers for Medicare and Medicaid Services, DHCS will conduct three General Overview SPA 15-021 trainings for stakeholders that participate in the LEA BOP. This announcement is a ‘Save the Date’ for the Southern California in-person training. **Note that there is no action that you need to take at this time, and a training outline and registration information will follow within the next few weeks.**
Please note that there will also be a Northern California in-person training located in Sacramento, and a statewide Webinar Training. The dates for those two trainings will be later this Spring, and stakeholders will be notified once those dates are established.

For information regarding the LEA Medi-Cal Billing Option Program, visit the website at: [http://www.dhcs.ca.gov/provgovpart/Pages/LEA.aspx](http://www.dhcs.ca.gov/provgovpart/Pages/LEA.aspx)

4. Legislation
   - AB 258 (Jones-Sawyer) Set aside from Prop 64 Cannabis Initiative for school nurses and counselors. The bill is based on the program in Colorado and would require that DHCS have an MOU with CDE and Public Health (DPH). Funds would go to CDE for grants available to school districts. There is a hearing on the bill, April 27 and there will be meetings on March 26th with legislators, CDE, DHCS and DPH staff that include presentations by presenters from the University of Washington and Depart of Education of Colorado to share expert information on the best use of these potential cannabis funds.
   - AB 666 (Gabriel, O'Donnell) Protocols for mental health services referrals would be developed by CDE. Was an O'Donnell bill in 2015 that the Governor vetoed.
   - AB 1098 (O'Donnell) Prop 64 Implementation – This is the main bill to implement and disperse 60% of Cannabis Prop 64 funds set aside for youth services.
   - AB 1126 (O'Donnell) Would make it easier for schools to draw down Prop 63 mental health funds
   - AB 1322 (Berman, O'Donnell) Office of School Health funding mechanism. The bill is similar to last year’s bill and is funded through .001 of LEA money that would be capped at $500,000.
   - AB 1377 (Wicks) Healthy Start – Bring back Healthy Start! Main issue is that there is currently no funding mechanism.
   - SB 582 (Beall) Funding for school based mental health services through grants for schools.

5. Expansion of Medi-Cal

Addition of undocumented 19-26 year-olds
Undocumented children currently enrolled will continue to be eligible for Medi-Cal until 26 years old starting in 2020.
Undocumented students who became eligible with the last expansion may now be dropping off due to the issue of Public Charge. Cases within school districts where this is happening should be noted as current numbers are not being shared by counties or DHCS.

6. LEA Update

Monarch Health Care that provides services through CalOptima Health Plan in Orange County sent out letters to its physicians requiring them to request parents to request an IEP for their children which would shift the responsibility for services to the district. This impacted San Juan Capistrano USD, Irvine and Saddleback. Language within the LEA provider manual does require that the school district provide care and ensure that services are not duplicated. However, school districts are not privy to information about private care. They are also the payer of last resort and are obligated to provide the service. Has anyone seen similar letters in other counties?