



Legislation Details (With Text)

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On agenda: 5/9/2017 **Final action:** 5/9/2017

Title: Health and Human Services Agency (HHS), recommending the Board:
 1) Accept the Medi-Cal Targeted Case Management Provider Participation Agreement 09-17EVRGRN (County 477-F1711) offered by the California Department of Health Care Services (DHCS) for claiming Federal financial participation and reimbursement for Targeted Case Management Services, for a term beginning on an effective date to be decided by the DHCS and continuing until terminated by one of the parties thereto, with an estimated annual reimbursement amount of \$125,000;
 2) Accept the Medi-Cal Provider Agreement (Form 6208, County 479-M1710) that governs Agreement 09-17EVRGRN and is issued by DHCS for a term beginning on an effective date to be decided by the DHCS and continuing until terminated by one of the parties thereto (no cost to either party);
 3) Delegate signature authority to the HHS Director to sign Agreement 09-17EVRGRN and Form 6208 and to execute further related documents, if any, contingent upon approval by County Counsel and Risk Management, if applicable; and
 4) Approve and authorize the HHS Director, Assistant Director of Administration and Finance, or Chief Fiscal Officer to execute any fiscal and programmatic reports required for said Agreements.

FUNDING: Federal Medicaid managed by DHCS.

Sponsors:

Indexes:

Code sections:

Attachments: 1. 2A - Approved Contract Routing Sheet, 5-9-17, 2. 2B - 477-F1711, El Dorado Evergreen PPA, 5-9-17, 3. 2C - 479-M1710, DHCS Form 6208, 5-9-17, 4. A - CRS TCM Agmt 09-1318 8-27-13.pdf, 5. B - Resolution TCM 09-1318 8-27-13, 6. C - TCM Agmt 09-1318 8-27-13, 7. D - Contractor Certification Clauses CCC-307 8-27-13, 8. Executed Resolution 129-2013, 9. Executed Agreement 09-1318

Date	Ver.	Action By	Action	Result
5/9/2017	2	Board of Supervisors	Approved	Pass
8/27/2013	1	Board of Supervisors	Approved	Pass

Health and Human Services Agency (HHS), recommending the Board:
 1) Accept the Medi-Cal Targeted Case Management Provider Participation Agreement 09-17EVRGRN (County 477-F1711) offered by the California Department of Health Care Services (DHCS) for claiming Federal financial participation and reimbursement for Targeted Case Management Services, for a term beginning on an effective date to be decided by the DHCS and continuing until terminated by one of the parties thereto, with an estimated annual reimbursement amount of \$125,000;
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 3) Delegate signature authority to the HHS Director to sign Agreement 09-17EVRGRN and Form 6208 and to execute further related documents, if any, contingent upon approval by County Counsel and Risk Management, if applicable; and

4) Approve and authorize the HHSA Director, Assistant Director of Administration and Finance, or Chief Fiscal Officer to execute any fiscal and programmatic reports required for said Agreements.

FUNDING: Federal Medicaid managed by DHCS.

DEPARTMENT RECOMMENDATION:

Health and Human Services Agency (HHS) recommending that the Board accept the funding offered by the California Department of Health Care Services (DHCS) to offset some of the costs incurred for the Public Guardian Program for Targeted Case Management (TCM) services to eligible Medi-Cal beneficiaries.

Acceptance of the Medi-Cal Targeted Case Management Provider Participation Agreement 09-17EVRGRN (Agreement) and of the Medi-Cal Provider Agreement (Form 6208) are each necessary for HHS to continue to participate and receive TCM reimbursement from DHCS.

DISCUSSION / BACKGROUND:

The County has participated in the Targeted Case Management (TCM) program since 1998. Currently, only the Public Guardian Office provides TCM services to Medi-Cal beneficiaries, although other County departments and certain community agencies have participated in the past. The TCM reimbursement program is federally funded and regulated with the objective to assist eligible Medi-Cal beneficiaries gain access to needed medical, social, educational, and other services. The County is reimbursed by DHCS based upon an annually determined rate for reported Medi-Cal "encounters" documented by HHS, who acts as the County liaison for receipt of TCM reimbursement.

ALTERNATIVES:

The Board could choose to not accept the Medi-Cal Targeted Case Management Provider Participation Agreement or the Medi-Cal Provider Agreement (Form 6208).

OTHER DEPARTMENT / AGENCY INVOLVEMENT:

County Counsel and Risk Management

CAO RECOMMENDATION:

It is recommended that the Board approve this item.

FINANCIAL IMPACT:

There is no Net County Cost associated with this Agenda item. Funding offered by the California Department of Health Care Services (DHCS) offsets some of the costs incurred for the Public Guardian Program for Targeted Case Management (TCM) services to eligible Medi-Cal beneficiaries. The Public Guardian function is funded primarily by the general fund partially offset by fees for services, with TCM revenue funding equal to approximately 11% of the total revenue (based on FY 14/15 actuals). Sufficient appropriations will be included in the FY 2017 - 2018 Budget and future budgets for the term of the Agreement.

CLERK OF THE BOARD FOLLOW UP ACTIONS

Clerk of the Board to provide one (1) certified Minute Order to the HHS Contracts Unit at 3057 Briw Road.

STRATEGIC PLAN COMPONENT:

Health and Human Services Agency Strategic Plan Project "Efficiency in Funding;" Objective 2.3.4.

“Expand Medi-Cal Administrative Activities/Targeted Case Management Revenue opportunities.”

CONTACT

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