

**Santa Cruz County**

Name of LGA

**FY 21/22 Q2**

Fiscal Year & Quarter

**Substance Use Disorder Services**

Name of Claiming Unit

**17**

Number of Staff

**1400 Emeline Avenue, Santa Cruz, CA 95060**

Address

**Nikki Yates**

Contact Person

**831-515-2873**

Phone Number

Description of Claiming Unit Functions

**Substance Use Disorder Services (SUDS) coordinates countywide alcohol and drug program services, including Drug Medi-Cal. The claiming unit is involved in collaborating with advisory groups to enhance and expand program services, overseeing the provision of services and contracts for program services to meet the identified health needs of County residents. This unit will also claim the cost of MAA claims preparation and administration in support of Santa Cruz LGA.**

STAFF JOB CLASSIFICATIONS & SUBCONTRACTORS	NUMBER OF STAFF			MEDI-CAL ADMINISTRATIVE ACTIVITY CODE (ENTER NUMBER OF STAFF UNDER EACH ACTIVITY)											
	SPMP	NON-SPMP	DIRECT CHARGE	4	6	8	10	12	13	15	16	17	18	19	20
Accounting Technician		1		1				1	1	1		1			1
Behavioral Health Program Manager		1		1	1			1	1	1		1			1
Departmental Administrative Analyst		2						2	2	2		2		1	1
Mental Health Client Specialist	5	2		7	7	7				7	5	7	5		7
Mental Health Supervising Client Specialist	1			1	1	1		1	1	1	1	1	1		1
Senior Behavioral Health Program Manager	1	1		2	2			2	2	2	1	2	1		2
Senior Departmental Administrative Analyst		1						1	1	1		1			1
Senior Mental Health Client Specialist	1	1		2	2	2				2	1	2	1		2
<b>Note: Uses Actual Client Count (ACC)</b>	8	9													

**Discount Method:**

	ACC		ACC		ACC		ACC		ACC		ACC		ACC		ACC
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- CODE 4 = Medi-Cal Outreach
- CODE 6 = Referral, Coordination, and Monitoring of Medi-Cal Services
- CODE 8 = Facilitating Medi-Cal Application
- CODE 10 = Arranging and/or providing Non-Emergency, Non-Medical Transportation to a Medi-Cal covered service
- CODE 12 = Contract Administration (A) for Medi-Cal services specific for Medi-Cal populations
- CODE 13 = Contract Administration (B) for Medi-Cal services specific for Medi-Cal and Non Medi-Cal populations
- CODE 15 = Program Planning and Policy Development (A) (Non-Enhanced) for Medi-Cal services for Medi-Cal clients
- CODE 16 = Program Planning and Policy Development Skilled Professional Medical Personnel (SPMP) (A) (Enhanced) for Medi-Cal services for Medi-Cal clients
- CODE 17 = Program Planning and Policy Development (B) (Non-Enhanced) for Medi-Cal services for Medi-Cal and Non Medi-Cal clients
- CODE 18 = Program Planning and Policy Development Skilled Professional Medical Personnel (SPMP) (B) (Enhanced) for Medi-Cal services for Medi-Cal and Non Medi-Cal clients
- CODE 19 = MAA/TCM Coordination and Claims Administration
- CODE 20 = MAA/TCM Implementation Training

In signing this certification, I certify the information provided herein is true and correct and accurately reflects the performance of the County-Based Medi-Cal Administrative Activities (CMAA) described in this CUFG and on the Comprehensive Claiming Unit Grid (CCUG). I also certify that invoices submitted to the state Department of Health Care Services for reimbursement shall be based on the information included in the CUFG and the CCUG. I confirm that all necessary and appropriate documentation to support the CUFG for all of the staff job classifications included herein is accurate and maintained on file. I understand the claiming unit documents shall be subject to the review and approval of the state Department of Health Care Services and the Centers for Medicare & Medicaid Services. Any knowing misrepresentation of the activities described herein may constitute violation of the Federal False Claims Act.

**Nikki Yates**

Signature (CMAA LGA Coordinator)

Date

Approval Signature (CMAA Analyst)

Date