

Santa Cruz County

Name of LGA

FY 23/24 Q2

Fiscal Year & Quarter

Senior Network Services

Name of Claiming Unit

33

Number of Staff

1777-A Capitola Road, Santa Cruz, CA 95062

Address

Nikki Yates

Contact Person

831-515-2873/831-454-4686

Phone Number

Description of Claiming Unit Functions

Senior Network Services SNS provides a variety of services to local seniors, their caregivers and family members. Services include information and referral, outreach, case management, housing assistance, Medicare counseling, respite care and in-home assistance matches. Outreach and Information and Referral services include those related to health services and Medi-Cal coverage and services. Many SNS clients are Medi-Cal beneficiaries, including case management clients. SNS staff provide Medi-Cal related outreach, information, referral, access assistance, eligibility assistance, and care management coordination.

STAFF JOB CLASSIFICATIONS & SUBCONTRACTORS	NUMBER OF STAFF				MEDI-CAL ADMINISTRATIVE ACTIVITY CODE (ENTER NUMBER OF STAFF UNDER EACH ACTIVITY)											
	SPMP	NON-SPMP	DIRECT CHARGE SPMP	DIRECT CHARGE Non-SPMP	4	6	8	10	12	13	15	16	17	18	19	20
Bilingual HICAP Counselor		3			1	1					1		1			1
Case Management Specialist		6			1	1	1				1		1			1
Director of Operations/ Assistant Director of Operations		2			2	2					2		2		1	1
Director of Programs/ Assistant Director of Programs		2			2	2					2		2			2
Executive Director/ Assistant Executive Director		2			2	2					2		2		1	1
HICAP Program Assistant		2			2	2					2		2			2
HICAP Program Manager		1			1	1					1		1		1	
HICAP Resource Specialist & Volunteer Coordinator		4			1	1					1		1			1
Housing Specialist		4			2	2					2		2			2
Manager of Care Services		2			2	2	2				2		2			2
Part-Time Controller		1									1		1			1
Resource Counselor		3			3	3	3				3		3			3
Resource Program Manager		1			1	1					1		1			1
Unit is a CBO.																
Note: Uses Actual Client Count (ACC)	0	33														
Discount Method:						ACC					ACC			ACC	ACC	

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)

6/15/2023

Date

Approval Signature (CMAA Analyst)

Date