



Exhibit X: Medi-Cal Administrative Activities (MAA) Requirements

GRANTEE agrees to work collaboratively with FIRST 5 and pursuant to FIRST 5’s directions and instructions to maximize, report, and claim Medi-Cal Administrative Activities (MAA) funding to maximize the financial viability of funded programs and the provision of health, outreach, information, and referral activities for the benefit of the 0-5 population, their families, and their communities. In this Exhibit X, the term “Contractor” shall have the same meaning as the term “GRANTEE.”

Claim Plan Requirements:

GRANTEE shall have a MAA Coordinator (the “Agency MAA Coordinator”) who is responsible for claim plan requirements, submission of forms/documents, and collaboration and communication with FIRST 5’s MAA Coordinator.

Claim Plan Update Form	Claim Plan Update Form(s) are submitted to communicate a change to a current claim plan. Email: MAAsupport@FIRST5kids.org
Job Descriptions <i>(due with Claim Plan Update Form)</i>	An agency job description is submitted for all positions included in the claim plan.
Duty Statements	Original signed and dated duty statements for each MAA participant are submitted to FIRST 5 MAA Coordinator.
Training Certification Form	Agency MAA Coordinator shall train new staff within first week of employment and submit a signed and dated training certification form.
	All MAA participants attend a yearly mandatory training provided by FIRST 5. Agency MAA Coordinators may also be required to attend additional trainings.

Tracking Requirements

Retention	Participating claim plans shall retain hard copy MAA documentation for a minimum of 3 years from submission of invoice.
Time Survey and supporting timesheet.	Participating staff will enter hours into time survey according to FIRST 5 funded time and associated timesheet.
MAA Coordination and Claims Administration	Agency MAA Coordinator will review and approve MAA data on a monthly basis to ensure 100% completion of MAA time surveys, accuracy in coding MAA activities, and alignment with agency timesheets.

MAA Activity Requirements:

MAA participants provide the following activities in alignment with MAA codes.

Outreach (Code 4)	Bring potentially eligible children into Medi-Cal system for the purposes of determining Medi-Cal eligibility via Application Assistor. Provide telephone and/or walk-in services for informing/referring families to Medi-Cal covered services.
Referral, Coordination, and Monitoring (Code 6)	Referral, coordination, monitoring/follow-up for the delivery of Medi-Cal covered services: medical/dental/mental health services.
Facilitating Application (Code 8)	Assist with Medi-Cal application process including but not limited to: explaining eligibility, rules, and process; preparation of forms for eligibility determination.
Program Planning and Policy Development (Code 15 or 17)	Developing strategies to increase Medi-Cal system capacity: Conducting needs assessments, preparing Medi-Cal data reports, preparing proposals for the expansion of Medi-Cal services, or developing resource directory of available Medi-Cal covered services.
MAA Training (Code 20)	Attending or providing training related to MAA.
Events (Code 4)	Host and participate in community events and activities directed towards bringing high-risk families into Medi-Cal covered health services.
Collaboration (Code 4)	Collaborate with partner agencies in outreach, referral, and enrollment events.
General Administration (Code 21)	General Administration shall not be less than 6% of hours or more than 25% of hours.

Relevant and applicable forms for MAA-related requirements are available on FIRST 5's website at <https://www.first5kids.org/forms>.

**Additional Medi-Cal Administrative Activities (MAA)
Provision Regarding Certification of Personnel Providing Services**

- a. Contractor certifies that none of its employees or agents (“Service Providers”) or subcontractors providing services under this Agreement have been convicted of a criminal offense related to health care, nor are any listed by any federal or state agency as debarred (including on the National Practitioner Database and the MLMIC), excluded or otherwise ineligible for participation in Medicare, Medi-Cal, or any other federal or state funded health care program. Contractor certifies that it has performed an appropriate screening of Service Providers and any subcontractors prior to making this certification (and shall so screen and certify on a monthly annual basis), that it will screen all new Service Providers and subcontractors, and that it will monitor the status of existing Service Providers and any existing subcontractors. Contractor certifies that its Service Providers, and any subcontractors possess all required licenses that such licenses are in good standing and that in providing these contract services, it and its Service Providers and any subcontractors are operating within any and all limitations or restrictions of these licenses. Contractor further certifies that all directors, managing employees, and owners of five percent interest, or more, in Contractor’s or any subcontractor’s business have not been convicted of any health care related offenses nor excluded from Medicare, Medi-Cal, or any other federal or state funded health care program.
- b. Contractor agrees to notify FIRST 5 immediately should Contractor, or its Service Provider or subcontractor be audited, investigated, administratively or criminally charged, or convicted of a health care related offense. During the pendency of any such proceedings, Contractor, or a Service Provider or subcontractor, may, at the request of FIRST 5, be removed from any responsibility for or involvement in the provision of services under this Agreement. It is the Contractor’s obligation to keep FIRST 5 fully informed about the status of such proceedings and to consult with the FIRST 5 prior to taking any action which will directly impact FIRST 5. This Agreement may be terminated immediately by FIRST 5 upon the actual exclusion, debarment, loss of licensure, or conviction of Contractor, Service Provider, or subcontractor of a health care offense.
- c. Contractor will indemnify, defend, and hold harmless FIRST 5 for any loss or damage resulting from the conviction, debarment, or exclusion of Contractor, or Service Providers, or subcontractors. This paragraph is in addition to, and not in lieu of, any other indemnification, defense, or hold-harmless provision in this Agreement, and no other such provision shall operate to limit or supersede this paragraph.
- d. If Contractor utilizes FIRST 5 facilities when performing under this Agreement, Contractor, Service Providers, and/or subcontractors will read and abide by the requirements of the County of Santa Clara Health System (“CSCHS”) Compliance Program, Code of Conduct, and Compliance Program Manual. Contractor, Service Providers, and/or subcontractors will, at the request of FIRST 5, attend compliance workshops provided by CSCHS. Contractors who do not utilize FIRST 5 facilities will implement a compliance program and will provide FIRST 5 with a copy of their compliance programs, if requested.