WISCONSIN DEPARTMENT OF HEALTH SERVICES

Division of Medicaid Services F-00963 (01/2020) CLTS Reconciliation Packet - Appendix A
Pleasant County CY 2020 CLTS Reconciliation

Appendix A

CLTS Reconciliation Fiscal Staff Contact Information and Certification

Please fill out the contact information requested below for the **primary and secondary county waiver agency fiscal contacts** for the Children's Long Term Support (CLTS) reconciliation process.

The **primary** fiscal contact person should be the individual who is best able to address any questions or concerns related to these forms. All Department communications will begin with this person.

The **secondary** fiscal contact person should be the individual who is best able to address any questions or concerns related to these forms if the primary contact is unavailable. The secondary contact will be copied on the final reconciliation communication.

Section I is used to generate the CLTS fiscal contact list for the current calendar year, which is used for sharing county-specific information and contract update letters. If the fiscal contact person is someone other than the two contacts listed, please inform the CLTS Fiscal Team when you submit these forms.

The Statement of Approval and Accuracy must be read and completed by a representative who is able to attest to the accuracy and appropriateness of the information included in their CWA's CLTS Reconciliation Packet. DHS will not accept a CLTS Reconciliation Packet as completed unless the Statement of Approval and Accuracy includes a valid date and the approval of an appropriate county waiver agency (CWA) representative.

SECTION I: CONTACT INFORMATION

Primary Fiscal Contact									
County Waiver Agency:	Pleasant County								
Last Name:	Fiscallead								
First Name:	Sue								
Phone Number:	555-123-4567								
Email Address:	Sfiscallead@pleasantville.gov								
Fax Number:	555-123-4569								
Street Address:	1234 Main St								
City:	Pleasantville								
Zip Code:	999	99							

Secondary Fiscal Contact									
Last Name:	Fiscalperson								
First Name:	Joe								
Phone Number:	555-123-4568								
Email Address:	Jfiscalperson@pleasantville.gov								
Fax Number:	555-123-4569								
Street Address	1234 Main St								
City:	Pleasantville								
Zip Code:	99999								

SECTION II: CERTIFICATION

Statement of Approval and Accuracy

The below County Waiver Agency (CWA) representative certifies that the costs reported in this form are accurate and correct and were incurred solely in connection with Children's Long Term Support (CLTS) activities. All allocations used to derive these costs follow federally mandated cost accounting principles and adhere to all applicable State and Federal regulations specified in the State and County Contract for Social Services, Community Programs, and Income Maintenance. Additionally, the below CWA representative certifies that none of the costs claimed for reimbursement on this form have also been claimed, or allocated, through any other source of reimbursement.

NAME - CWA Representative	CWA Approval Date
Ann Divisionlead	04/02/20
Title / Position	Reconciled Year
Pleasantville DHHS Director	2020

DISTRIBUTION:

Please securely email the completed form to:

DHSCLTSFiscal@dhs.wisconsin.gov

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Appendix B
CLTS Expense Summary
Report the CLTS service claims paid via the CLTS third-party administrator (TPA) for the reconciled year, up to the established CLTS TPA cut-off date, using the lightly-colored TPA payments as of CLTS cutoff date fields in section III.

CLTS TPA payments must be separated by their funding source. The CLTS TPA payments reported in Appendix B should align with the funding information as represented in the CLTS service claims data* as of the established CLTS cutoff date. Any errors in the CLTS service claims data should be corrected using appendixes C, D, and/or E of the CLTS Reconciliation packet and should not be reported directly in

Unidentified Expenditures (row G) is used to report CLTS service claims data that does not include a long-term service (LTS) code or Submitter Org ID. Appendix C should be used to assign a funding source these claims and reduce the Adjusted Service Payments for Unidentified Expenditures to \$0.00. The adjusted CLTS service payment cell for unidenfied expenditures will turn red when adjusted payments do not equal \$0.00

Discrepancies (row J) will turn red when the adjustments in appendix B don't align with the amounts reported in appendix C, D, or E.

SECTION III: SERVICE COSTS AND AD HISTMENTS SHMMARY

	SECTION III: SERVICE COSTS AND ADJUS	TMENTS SUM	MARY					
	CLTS Funding Source	TPA payments cutoff of	late	Coding Error Adjustments Subtracted (From appendix C)	Coding Error Adjustments Added (From appendix C)	Non-Reimbursable CLTS Waiver Expenditures (From appendix D)	CLTS Cost Shares and FICA Refunds (From appendix E)	sted CLTS Service Payments
	CLTS State Match	\$ 1	,938,830.43	\$ (9,500.00)	\$ 11,310.53	\$ -	\$ (350.00)	\$ 1,940,290.96
В	Special Funding (i.e. CLTS High Cost)	s	83,547.90	\$ -	\$ 15,000.00	\$ -	\$ -	\$ 98,547.90
С	Local Match: Basic County Allocation (BCA), Community Aids, and Tax Levy	s	72,020.56	\$ -	\$ -	\$ (259.00)	\$ -	\$ 71,761.56
Е	Local Match: Children's Community Options Program (CCOP)	\$	31,153.14	\$ (20,142.00)	\$ -	\$ -	\$ -	\$ 11,011.14
F	Grandfathered State Match	\$	801,705.25	\$ (4,000.00)	\$ 9,500.00	\$ -	\$ -	\$ 807,205.25
G	Unidentified Expenditures	\$	2,168.53	\$ (2,168.53)	\$ -	\$ -	\$ -	\$ -
Н	Total Reconciled Expenditures	\$ 2,	929,425.81	\$ (35,810.53)	\$ 35,810.53	\$ (259.00)	\$ (350.00)	\$ 2,928,816.81
1	Adjustments in Appendixes C, D, and E	N/A		\$ (35,810.53)	\$ 35,810.53	\$ (259.00)	\$ (350.00)	\$ 2,928,816.81
J	Discrepancies (H - I)	N/A		\$ -	\$ -	-	-	\$

Reconciled CY 2020 Service Expenditure Summary

	Funding Category	TPA	payments as of CLTS cutoff date	Reconciliation adjustments	Adjusted CLTS service payments
	State Match prioritized (CARS 871 / 872)	\$	2,094,398.89	\$ 16,201.53	\$ 2,110,600.42
	CCOP Match (CARS 377 and 822 / 823)	\$	31,153.14	\$ (20,142.00)	\$ 11,011.14
M	Grandfathered State Match (CARS 874 / 875)	\$	801,705.25	\$ 5,500.00	\$ 807,205.25
Ν	Unidentified Expenditures	\$	2,168.53	\$ (2,168.53)	\$ -
0	Total:	\$	2,929,425.81	\$ (609.00)	\$ 2,928,816.81

SECTION IV: ADMINISTRATIVE REQUEST SUMMARY

Administrative request amounts are retrieved from appendix F. The CLTS administrative variance requested total will turn red if the variance request exceeds allowable amounts based on adjusted CLTS service costs and allowable CLTS administrative expenses

	CLTS administrative CARS profile	а	Standard CLTS dministrative request (from appendix F)	 CLTS administrative variance requested (from appendix F)	adm	Total CLTS
Р	Expenses requested for CLTS CARS admin profiles (CARS 877 / 878)	\$	148,512.81	\$ 28,975.68	\$	177,488.49
	Expenses requested for CLTS-Grandfathered admin profiles (CARS 880 / 881)	\$	56,504.37	\$ 11,024.32	\$	67,528.69
R	Total:	\$	205,017.18	\$ 40,000.00	\$	245,017.18
S	Percent of services		7.00%	1.37%		8.37%

CLTS administrative expense category	Incurred, but not requested, CLTS administrative reimbursement
CLTS	\$15,047.49
CLTS-Grandfathered	\$5,725.09
Total	\$ 20,772.58
Percent of services	0.71%

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CLTS Reconciliation Packet - Appendix C

Division of Medicaid Services

Pleasant County CV 2020 CLTS Reconciliation
Facility CV 2020 CLTS Reconciliation
Faci

		ON V: CODING ERROR	RADJUSTMENTS											
Ref							rvice Service Procedure		Revenue				Adjustment	
	ID:	Child Last Name	Child First Name	Child MCI	Claim Number	Begin Date	End Date	Code(s)	Code(s)	Service Description	TPA Funding Source	Intended Funding Source	Amount	Additional Comments
ŀ	Al	S	Tony	0000000001	5555555555	02/01/20	02/01/20	S5165	N/A	Home Modification	CCOP	Special Funding	\$15,000.00	Approved special funding request accidentally coded as CCOP- match
ŀ	A2	S	Tony	0000000001	All	01/01/20	01/31/20	All	All	All services	CCOP	State Match	\$857.00	Accidentally auth'ed services as CCOP instead of state-match
	A3	S	Tony	0000000001	All	02/02/20	06/30/20	All	All	All services	CCOP	State Match	\$4,285.00	Accidentally auth'ed services as CCOP instead of state-match
	ВІ	R	Natasha	1000000000	6666666666	09/24/20	09/24/20	T1016	N/A	Case Management	Unidentified / Missing LTS	State Match	\$722.84	Auth was missing LTS code
	B2	В	Bruce	1000000000	7777777777	10/05/20	10/05/20	T1016	N/A	Case Management	Unidentified / Missing LTS	State Match	\$1,445.69	Auth was missing LTS code
	Cl	R	Steve	0000000002	11111111111	01/01/20	12/31/20	All	All	All services	State Match	Grandfathered State Match	\$9,500.00	CLTS-Grandfathered participant coded as state-match
	DI	M	Wanda	2000000000	2222222222	07/15/20	12/31/20	T1005	N/A	Respite, residential	Grandfathered State Match	State Match		All of a non-grandfathered participant's respite was auth'd using a

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SE	ECTION VI: Non-Reimbursable CLTS Waiver Expenditures																
Re		ld Last Name	Child First Name	Child MCI	Claim Number	Service Begin Date		Procedure Code	Revenue Code	Service Description	Funding Source	Original Units	Revised Units	Original Payment	Non- Reimbursable Amount	Reimbursable Amount	Additional Comments
E1	s	S	Scott	0000000003	2222222222	07/12/20	07/12/20	S5150	N/A	Respite, other	BCA, Community Aids, or Tax Levy	8	0	\$24.00	\$24.00	\$0.00	Participant was in a non-eligible setting on 7/
E2	S	S	Scott	0000000003	3333333333	08/18/20	08/20/20	S9125	N/A	Respite care, home	BCA, Community Aids, or Tax Levy	3	2	\$705.00	\$235.00	\$470.00	Not eligibile on final day of service

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SECTION VII: CLTS COST SHARES AND FICA REFUNDS

F	ef				CLTS Service	CLTS Service	Cost Share or		Cost Share /				
	D:	Child Last Name	Child First Name	Child MCI	Begin Date	End Date	FICA Refund?	CLTS Funding Source	FICA Amount	Additional Comments			
F	1 2	X	Charles	0000000004	01/01/20	12/31/20	FICA Refund	State Match	\$300.00				
(1 (3	Jean	0000000005	01/01/20	05/02/20	Cost Share	State Match	\$50.00				

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Appendix F
CLTS-Administrative Cost Claims Worksheet
CUTS-Administrative Cost Claims Worksheet
CWAs may claim up to 7% of their reconciled adjusted CLTS service claims as CLTS administrative costs; CLTS administrative claims are applied against the CWA's CLTS administrative allocations. Administrative reimbursements may not exceed the actual administrative costs associated with CWA operation of the CLTS Waiver Program and must be allocated to the CLTS Waiver Program following Allowable Cost Policy Manual guidelines. County waiver agencies must report all actual administrative expenses allocated to the CLTS program, whether they are above or below the 7% limit. CWA fiscal staff should be prepared to provide additional written evidence to support administrative costs if requested by DHS.

DHS will automatically apply the standard administrative allowance (row i) as a CLTS administrative claim. If the CWA wishes to opt out of some, or all, of their standard CLTS administrative allowance please include the opt-out amount as an offset in section X.

Variance Requests

CWAs may request a CLTS administrative variance to claim allowable CLTS administrative expenses above the normal 7% administrative reimbursement limit. CLTS administrative variance requests undergo a DHS review and approval process; DHS may choose to approve less than the full variance request amount. Approved CLTS administrative variances are applied against the CWA's CLTS Waiver Program administrative allocations.

CWAs desiring a CLTS administrative variance should enter the amount of their request in green-outlined variance request field (row K). CWAs requesting a variance must provide a narrative describing the reasons for

SECTION VIII: CLTS OPERATIONAL AND ADMINISTRATIVE COSTS

CLTS Operational / Administrative			Administrative Cost	Cost Allocation	
Cost Description		Amount	Category	Methodology	Additional Comments
CLTS social worker payroll	\$	135,958.00	Staff Costs	direct time reporting to CLTS	
Management and support staff	\$	99,615.00	Staff Costs	FTE allocation	Exlcudes social workers
Overhead & indriect costs	\$	156,550.50	Overhead Costs	FTE allocation	Excludes all payroll
Total:	¢	392 123 50			

SECTION IX: CWA SUPPORT AND SERVICE COORDINATION (SSC) REVENUE

		SSC	claims paid as	nding (unpaid) SSC	
	SSC Service Provider Type	of CL	TS cutoff date	cutoff date	Total
В	County Waiver Agency SSC provider	\$	121,833.74	\$ 4,500.00	\$ 126,333.74
С	Other SSC service providers	\$	224,585.93	\$ 71.86	\$ 224,657.79
D	Total:	\$	346,419,67	\$ 4.571.86	\$ 350.991.53

SECTION X: CLTS OPERATIONAL COST OFFSETS

CLTS Operational Cost Offset Description	Amount	Additional Comments
County Waiver Agency SSC Revenue (B)	\$ 126,333.74	
T / 1	400,000 = 4	

SECTION XI: CLTS ADMINISTRATIVE SUMMARY AND VARIANCE REQUEST

	SECTION ALCETS ADMINISTRATIVE SUMMART AND VARIANCE REQUEST									
	CLTS Administrative Expense Breakdown		Total CLTS	CLTS		Grandfathered CLTS				
	Reconciled CLTS Service Expenses (from appendix B)	\$	2,928,816.81	\$	2,121,611.56	\$ 807,205.25				
-	Unreimbursed (over-reimbursed) CLTS operational expenses (A - E)	\$	265,789.76	\$	192,535.98	\$ 73,253.78				
Н	Unreimbursed (over-reimbursed) CLTS operational expense percentage		9.07%		9.07%	9.07%				
	Standard CLTS administrative allowance (lesser of G or F * 7% to a minimum of 0)	\$	205,017.18	\$	148,512.81	\$ 56,504.37				
J	Unreimbursed CLTS operational expenses exceeding standard administrative allowance (G - I to a minimum of 0)	\$	60,772.58	\$	44,023.17	\$ 16,749.41				

K	Administrative Variance Request (requires manual entry; max of J)	\$ 40,000.00

L Please describe the reason for the CLTS administrative variance request:

Had to hire and train 2 new case workers (100% CLTS caseload) who had no costs incoorporated into Pleasantville's SSC rate and caused Pleasantville's unreibursed expenditures to be higher

	Final CLTS Administrative Request	Total CLTS		CLTS	Gra	andfathered CLTS
M	Standard CLTS administrative allowance	\$ 205,017.18	69	148,512.81	\$	56,504.37
N	CLTS variance request	\$ 40,000.00	69	28,975.68	\$	11,024.32
0	Total CLTS administrative request (M + N)	\$ 245,017.18	\$	177,488.49	\$	67,528.69
Р	Admin percent of convices (O / E)	8 37%		8 37%		8 37%