

**Commonwealth of Pennsylvania  
Department of Human Services**

**School-Based  
ACCESS Program (SBAP)**

**Cost Reporting and Settlement Process  
Using e-SivicMACS System**

**Statewide Training**

**October 2016**

## **Agenda**

1. SSG Profile
2. SSG Project Team
3. Cost Settlement Overview
4. Training Objectives
5. e-SivicMACS System Overview
6. Cost Report
7. Cost Reconciliation
8. Reports
9. Monitoring
10. Contact Information

## SSG Profile

### SSG Profile

- 17-year old firm specializing in:
  - ✓ Random Moment Time Studies, Cost Settlement, Admin Claiming,
  - ✓ Web-based Systems Development and Implementation
  - ✓ SPA Development and CMS Negotiations
- Provide Services in 13 States
- Service Hundreds of Schools, including large Districts
  - ✓ KY Department of Education
  - ✓ Chicago Public Schools (3<sup>rd</sup> largest in the Nation)
  - ✓ Albuquerque Public Schools (largest in New Mexico)
  - ✓ Over 90% of Schools in New Mexico
  - ✓ Orange County Public Schools (10<sup>th</sup> largest in the Nation)
  - ✓ Major Medicaid Biller for Schools in Florida
  - ✓ District of Columbia Public Schools (public and public charter schools)

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## SSG Profile

### SSG Profile

- Service State Agencies and Counties with Large Projects
  - ✓ Ohio – 350 Time Studies and Administrative Claiming
  - ✓ Ohio – Statewide County Finance Information System
  - ✓ DC – RMTS and Cost Allocation Plans for 6 Health & Human Service Agencies
  - ✓ Revenue Recovery Projects for Child Welfare, TANF, Title IV-E, SSI

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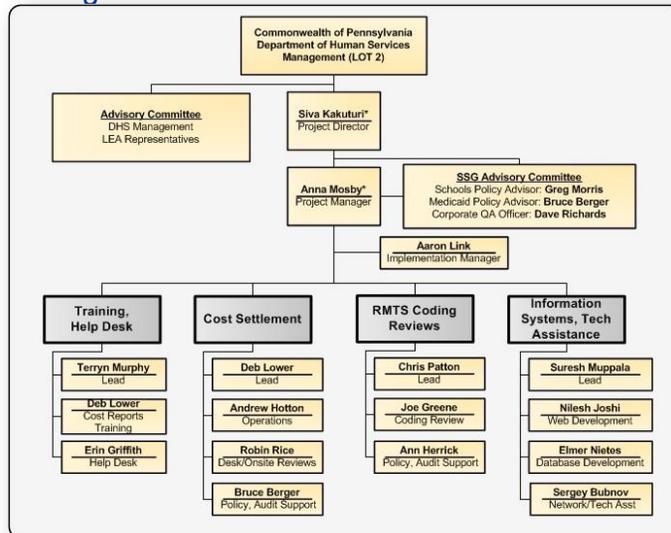
# SBAP Project Team

- Siva Kakuturi, Project Director
- Anna Mosby, Project Manager
- Aaron Link, Implementation Manager/Corporate Officer
- Terryn Murphy, Training Lead
- Deb Lower, Cost Settlement Lead
- Chris Patton, RMTS Coding Reviews Lead
- Suresh Muppala, Systems Lead

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# SBAP Project Team

## Project Organization



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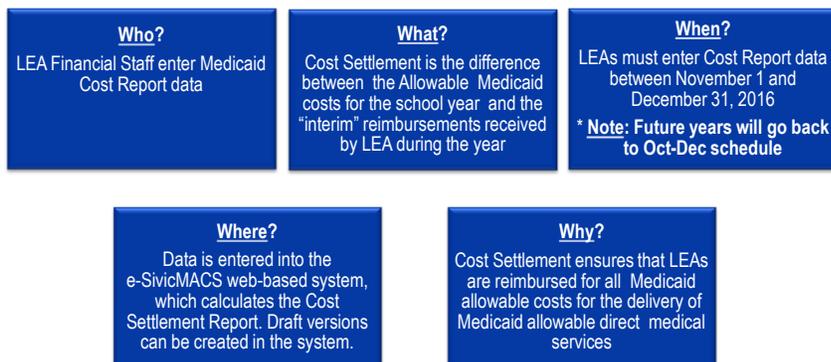
## Training Objectives

- LEA Coordinators/Contacts will be able to:
  1. **Understand Cost Reporting & Settlement**
    - PA SBAP Cost Reporting Process
    - Financial Reporting Roles and Responsibilities
    - How to enter Cost Report, calculate Cost Settlement amount and submit CPE Certification form using e-SivicMACS
    - Cost approval and submission process
  2. **Understand Monitoring Review**
    - Understand SSG Monitoring Review Process
    - Understand how to submit Monitoring supporting data using e-SivicMACS
  3. **Identify Help Desk contact information**

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## Cost Settlement Overview



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# Cost Settlement Overview

## Cost Settlement Components

- All Costs Reported on Accrual Basis
  - ✓ This means the expenses are counted when LEA received the goods or services, NOT when the LEA paid for those goods or services
  - ✓ For example, Salaries for last pay period of the fiscal year should be included in that year, even though the payments are made in the following fiscal year
- Supporting Documentation
  - ✓ Maintenance of all supporting documentation related to reported costs is the responsibility of the LEA
  - ✓ This is critical to protect the revenues received from Medicaid

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# Cost Settlement Overview

## Cost Settlement Components

- There are No Changes from Last Year

<p><b>Allowable Costs – Direct Health-related Services</b></p> <ul style="list-style-type: none"> <li>✓ Salaries for eligible direct service providers in the Staff Pool</li> <li>✓ Benefits for eligible direct service providers in the Staff Pool</li> <li>✓ Health related contracted service cost for providers in the Staff Pool</li> <li>✓ CMS approved health-related supplies &amp; materials</li> <li>✓ Depreciation cost for approved Direct Medical Service Equipment</li> <li>✓ Tuition Costs</li> </ul>	<p><b>Allowable Costs – Transportation Services</b></p> <ul style="list-style-type: none"> <li>✓ Transportation costs for eligible transportation staff</li> <li>✓ Benefit costs for eligible transportation staff</li> <li>✓ Contracted costs for eligible transportation staff</li> <li>✓ Other allowable transportation costs, such as fuel, insurance, repairs and maintenance</li> <li>✓ Allowable Depreciation costs for approved transportation equipment</li> </ul>
<p><b>Other Required Data</b></p> <ul style="list-style-type: none"> <li>✓ IEP Ratio</li> <li>✓ Transportation Ratios</li> <li>✓ Unrestricted Indirect Cost Rate (UICR)</li> <li>✓ Direct Medical Service Percentage based on RMTS</li> <li>✓ Interim Medicaid payments</li> </ul>	

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## e-SivicMACS System Overview

### System Access and Navigation

- How does a LEA get to the e-SivicMACS web-site

### System Functionality

- Review Cost Report, Cost Reconciliation and Monitoring functionality in the System

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## e-SivicMACS System Overview

### Access

- Web-based System
  - Access the system from any location with Internet access
- Website available November 1, 2016
- URL: <https://PASBAP.ssghosting.com>
- User ID: Unique ID will be provided
- Password: Will be provided; user must change

e-SivicMACS - Cost Settlement Test  
Sign into Your Account

User Id:

Password:

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# e-SivicMACS System Overview

## Homepage

- Access User Information (change password)



**Medicaid Admin and Cost Settlement System (e-SivicMACS)**  
Registration

Cost Settlement   Reports

User Id	<input type="text"/>	State	Pennsylvania
Last Name	<input type="text"/>	Zip	<input type="text"/>
First Name	<input type="text"/>	Work Phone	<input type="text"/>
Middle Name	<input type="text"/>	Home Phone	<input type="text"/>
Address	<input type="text"/>	Mobile	<input type="text"/>
City	<input type="text"/>	Fax	<input type="text"/>
		Email	<input type="text"/>

  
    
    
 [Change Password](#)

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# e-SivicMACS System Overview

## Homepage

- Access Menus based on Security Role

**Medicaid Admin and Cost Settlement System (e-SivicMACS)**  
Home

Cost Settlement   Reports

Home | Logout SIVIC SOLUTIONS GROUP

**Help Desk**

Toll-Free #: (877) 916-3222

Email: support@sivicsolutionsgroup.com

**Resources**

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# Cost Report

## Cost Settlement – Cost Report

- Select Applicable Fiscal Year
- LEA defaults based on Security Role

Cost Settlement Reports  
 Cost Report  
 Cost Reconciliation  
 Monitoring

Fiscal Year\* --Select--  
 LEA\* --Select--

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# Cost Report

## LEA Dashboard

- Dashboard provides a visual, real-time, graphical snapshot of the LEA's current status in the Cost Settlement process

Cost Settlement Reports  
 Cost Report  
 Cost Reconciliation  
 Monitoring

1	Salaried/Contracted Staff Costs	Approved
2	Direct Medical Other Costs	Not Approved
3	Transportation Staff Costs	Not Approved
4	Transportation Other Costs	Approved
5	Tuition	Approved
6	Depreciation	Not Loaded
7	General Statistical Info	Not Approved
8	Medicaid Payments	Not Loaded
9	Cost Reconciliation	Not Generated
10	Cost Settlement Certification	Not Generated

Approved  
 All data has been entered and verified

Not Approved  
 Data has been entered, but still needs verification

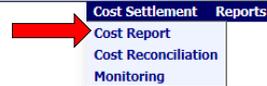
Not Generated  
 Not been Calculated

Not Loaded  
 No data has been saved

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# Cost Report

## Cost Report Entry Options



- Two Options
  - ✓ Direct Entry using Screen
  - ✓ Excel Upload
- Option 1: Direct Entry
  - ✓ Click on Edit
  - ✓ Enter Data
  - ✓ Save
- Option 2: Excel Upload
  - ✓ Click on Export
  - ✓ Change Data in Excel
  - ✓ Import from Upload Tab

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# Cost Report – Staff Costs

## Salaried/Contracted Staff



### Salaries

- Pre-tax earnings for the period. Include wages, overtime, bonuses, PTO, etc. for employees included in the cost pool

### Benefits

- LEA paid benefits such as health, dental, life, retirement, etc. for employees included in the cost pool

### Contracted Costs

- Payments made to contracted staff members included in the cost pool

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## Cost Report – Staff Costs

Cost Settlement
Reports

### Salaries/Contracted Staff (Direct Entry)

➔

- Cost Report
- Cost Reconciliation
- Monitoring

Quarter	Salary Amt	Benefit Amt	Total	Contracted Cost	Federally Funded	Claimsable Amt
JAS 2014	25000.00	4000.00	29000.00	0.00	0.00	29000.00
	\$5,000.00	\$4,000.00	\$29,000.00	\$0.00	\$0.00	\$29,000.00
	\$25,000.00	\$4,000.00	\$29,000.00	\$0.00	\$0.00	\$29,000.00

Enter data values

Click "Save" Button

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## Cost Report – Staff Costs

Cost Settlement
Reports

### Salaries/Contracted Staff (Direct Entry)

➔

- Cost Report
- Cost Reconciliation
- Monitoring

Last Name	First Name	Quarter	Salary Amt	Benefit Amt	Total
██████	██████	JAS 2014	25000.00	4000.00	29000.00
<b>Page Total:</b>			<b>\$25,000.00</b>	<b>\$4,000.00</b>	<b>\$29,000.00</b>
<b>Grand Total:</b>			<b>\$25,000.00</b>	<b>\$4,000.00</b>	<b>\$29,000.00</b>

➔

After all entries are made, click "Verify" button to check data against validation rules

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# Cost Report – Staff Costs

## Salaries/Contracted Staff (Excel Upload)

- Cost Settlement Reports
- Cost Report
- Cost Reconciliation Monitoring

- Select “Export”
- Open file in Excel and make necessary changes

Click  
“Export”

LEA	Employee ID	Type	Hire Date	Salary	Benefits	Other	Contracted Cost	Contracted Fee	Contracted Fee
Conestoga		S	JAN 2014	25000.00	8000.00	25000.00	0.00	0.00	25000.00
Conestoga		S	PHI 2015	30000.00	10000.00	40000.00	0.00	0.00	40000.00
Conestoga		S	OND 2014	27000.00	9000.00	36000.00	0.00	0.00	36000.00
Occupational Therapists		S	JAN 2014	10000.00	1000.00	11000.00	0.00	0.00	11000.00
Occupational Therapists		S	PHI 2015	40000.00	10000.00	50000.00	0.00	0.00	50000.00
Occupational Therapists		S	OND 2014	30000.00	1000.00	31000.00	0.00	0.00	31000.00
Psychologists		C	JAN 2014	0.00	0.00	100.00	0.00	0.00	100.00
Psychologists		C	PHI 2015	0.00	0.00	0.00	0.00	0.00	0.00
Psychologists		C	OND 2014	0.00	0.00	0.00	0.00	0.00	0.00
Speech Language Patholog...		S	JAN 2014	25000.00	2000.00	27000.00	0.00	0.00	27000.00
Speech Language Patholog...		S	OND 2014	30000.00	7000.00	37000.00	0.00	0.00	37000.00
Speech Language Patholog...		S	PHI 2015	10000.00	4000.00	14000.00	0.00	0.00	14000.00
Page Total:				\$582,000.00	\$77,000.00	\$659,000.00	\$13,400.00	\$0.00	\$681,400.00
Grand Total:				\$582,000.00	\$77,000.00	\$659,000.00	\$13,400.00	\$0.00	\$681,400.00

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# Cost Report – Staff Costs

## Salaries/Contracted Staff (Excel Upload)

- Cost Settlement Reports
- Cost Report
- Cost Reconciliation Monitoring

- On the Upload tab, select the file type (Salaried/Contracted Staff Costs)
- Choose file type; locate file, click “Upload”

Fiscal Year\*

LEA\*

Dashboard **Upload** Salaried/Contracted Staff Direct Medical Other

File Type **--Select--**

- Salaried/Contracted Staff Costs
- Direct Medical Other Costs
- Transportation Staff Costs
- Transportation Other Costs
- Tuition
- Depreciation

Dashboard **Upload** Salaried/Contracted Staff Direct Med

File Type **Salaried/Contracted Staff Costs**

File Name

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## Cost Report – Staff Costs

### Salaries/Contracted Staff – Verify

Cost Settlement Reports  
Cost Report  
Cost Reconciliation  
Monitoring

- After entering/uploading all data, click “Verify” to run edit and reasonableness checks on reported expenditures
- Entries that do not pass the edit checks create “Warning Message” and are moved to the top and highlighted
- To make necessary changes, select Edit, or correct and upload file again; Save and click Verify again

Participant ID	Last Name	First Name	Salary	Benefits	Total	Contracted Labor	Federal Funded	Allocable Expenditures
06			0.00	0.00	0.00	0.00	0.00	0.00
07			0.00	0.00	0.00	0.00	0.00	0.00
02			0.00	0.00	0.00	0.00	0.00	0.00
01			0.00	0.00	0.00	0.00	0.00	0.00
05			50.00	0.00	50.00	0.00	0.00	50.00
08			10000.00	2000.00	12000.00	0.00	0.00	12000.00
06			9999.00	2000.00	12000.00	0.00	0.00	12000.00
15			7000.00	1000.00	8000.00	0.00	0.00	8000.00
11			9000.00	1800.00	10800.00	0.00	0.00	10800.00
03			5000.00	955.00	5955.00	0.00	0.00	5955.00
04			0.00	0.00	0.00	0.00	0.00	0.00
Page Total:			\$474,214.00	\$9,076.00	\$531,119.00	\$0.00	\$0.00	\$531,119.00
Grand Total:			\$474,214.00	\$9,076.00	\$531,119.00	\$0.00	\$0.00	\$531,119.00

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## Cost Report – Staff Costs

### Salaries/Contracted Staff – Verify

Cost Settlement Reports  
Cost Report  
Cost Reconciliation  
Monitoring

- A few of the System edits checks:
  - Salaries & Benefits and Contracted Amount for a participant is zero dollars
  - Benefits amount is more than 50% of Salary amount
  - 10% or more increase or decrease in expenditures for the same participant from the same quarter of the prior year (Not applicable for FY2015-2016)
- Warning messages require explanation in Notes section

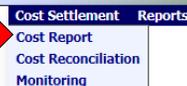
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## Cost Report – Staff Costs

### Salaries/Contracted Staff – Verify



- Entries that do not pass the edit checks are moved to the top and highlighted
- Click Edit, make necessary changes
- Click ! to enter explanatory Notes as necessary. Once a Note has been entered, the entry will pass verification
- An \* next to the ! indicates a Note has been entered
- Click Save and Verify again

Allowable Expenditures	
1000.00	!
0.00	! *
100.00	!

Comments

Error - Benefits amount cannot be more than 50% of Salary amount

Please provide explanation to clear the errors.

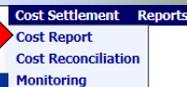
OK Cancel

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## Cost Report – Direct Other

### Direct Medical Other



#### Material and Supplies

- These costs should only have materials and supplies found on the CMS approved list

#### Do NOT Include!

- Cost for materials & supplies applicable to ONLY general education students
- Cost for materials & supplies used in out-of district (tuition paid) institutions
- Direct Medicaid Equipment Cost over \$5,000 (these go on Depreciation tab)
- Federally funded costs (enter in the Federal Fund fields)

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## Cost Report – Transportation Staff

### Transportation Staff

Cost Settlement Reports  
Cost Report  
Cost Reconciliation  
Monitoring

#### Specialized Transportation Services Include

- Travel to and from school and between schools or school buildings on a day when a Medicaid service is on the IEP to be rendered on school premises and special transportation is included on the IEP as a separate service.
- Travel to and from off-site premises on a day when a Medicaid service is on the IEP to be rendered off-site and special transportation is included on the IEP as a separate service
- Use of a specially adapted or other qualified vehicle (e.g., specially adapted bus or van).

The Medicaid Service rendered on day of transportation must result in a paid claim

## Cost Report – Transportation Other

### Transportation Other

Cost Settlement Reports  
Cost Report  
Cost Reconciliation  
Monitoring

Report costs as “Specialized Transportation”, or “Not Only Specialized Transportation”

If including transportation costs, complete the transportation ratios on “General Stats” tab

If transportation costs are entered, make sure your LEA is keeping detailed bus logs and all supporting documentation

## Cost Report – Tuition

### Tuition

Cost Settlement	Reports
Cost Report	
Cost Reconciliation	
Monitoring	

LEAs may claim 100% full tuition costs for eligible students enrolled in an APS or CSDB, including those with partial PDE funding. Contracted tuition costs will be subject to an individual health-related tuition percentage to determine the Medicaid allowable health-related tuition costs.

When reporting tuition, LEAs are not to include out-of-district service providers on the LEA's Direct Service Cost Pool and are not to submit separate claims to receive interim payments for health-related services that are included in tuition.

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## Cost Report – Depreciation

### Direct Medical Equipment

Cost Settlement	Reports
Cost Report	
Cost Reconciliation	
Monitoring	

Applies to approved Medical Equipment over \$5,000

### Do NOT Include!

- Cost for equipment applicable to ONLY general education students
- Cost for equipment used in out-of-district (tuition paid) institutions
- Items costs of \$5,000 or less
- Federally Funded Costs

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## Cost Report – Depreciation

### Transportation Equipment

Cost Settlement	Reports
	Cost Report
	Cost Reconciliation
	Monitoring

Applies to approved Transportation Equipment over \$5,000

#### Do NOT Include!

- Cost for equipment used ONLY for general education students
- Costs for equipment used in out-of district (tuition paid) institutions
- Items costs of \$5,000 or less
- Federally Funded Costs

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## Cost Report – General Statistics

### General Statistics – IEP and Transportation Ratios

Cost Settlement	Reports
	Cost Report
	Cost Reconciliation
	Monitoring

The IEP Ratio is used to calculate direct Medicaid allowable expenditures.

- LEA's are required to self report both the numerator and denominator of their IEP ratio.

The Specialized Transportation Ratio is used when specialized transportation costs cannot be discretely broken out from general transportation costs.

- Only applies to costs reported as "Not Only Specialized Transportation"
- LEA must report the numerator and denominator.

A One Way Trip is defined as a trip to or from school for a special education student with specialized transportation in their IEP.

- Transportation to AND from school would be considered two one way trips.

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# Cost Report – General Statistics

**Cost Settlement Reports**

- Cost Report
- Cost Reconciliation
- Monitoring

**General Statistics – IEP and Transportation Ratios**

- Direct Entry – Click on Edit, Enter Data and Save
- Fields pointed with arrow are entered by LEA

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# Cost Report – Submit for Desk Review

**Cost Settlement Reports**

- Cost Report
- Cost Reconciliation
- Monitoring

**Submit Cost Report for Desk Review**

- Ensure all Cost Data is accurate
- Review preliminary Cost Settlement Amount
- Submit Cost Report to SSG for Desk Review

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## Annual Medicaid Cost Report

# DATE TO REMEMBER

The Annual Medicaid Cost Report is due by  
**December 31, 2016**

## Cost Reconciliation

### Cost Settlement – Cost Reconciliation

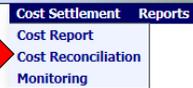
- Select Applicable Fiscal Year
- LEA defaults based on Security Role

Cost Settlement Reports  
Cost Report  
Cost Reconciliation  
Monitoring

Fiscal Year*	--Select--	▼
LEA*	--Select--	▼

# Cost Reconciliation

## Cost Reconciliation & CPE Form – 5 Steps

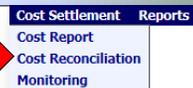


- Step 1. “Calculate”, Review and Approve
- Step 2. “View Cost Settlement” to display Cost Summary Report and Cost Settlement Summary in Excel format
- Step 3. “View CPE Form” to display completed CPE Form
  - ✓ CPE Form is stamped DRAFT until Cost Report data on every tab has been approved
- Step 4. “Upload” Signed CPE Form
- Step 5. “Submit” CPE Form

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# Cost Reconciliation

## Cost Reconciliation & CPE Form – Step 1



- Click “1. Calculate”
- Review Cost Settlement Amounts
- Approve
  - ✓ Can “Unapprove” until Submission of CPE Form

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# Cost Reconciliation

## Cost Settlement & CPE Form – Step 1

Cost Settlement Reports  
 Cost Report  
 Cost Reconciliation  
 Monitoring

- Successful cost settlement requires that all data is entered in the System

The screenshot shows a web application interface for 'Cost Settlement'. At the top, there are dropdown menus for 'Fiscal Year\*' (set to 'FY 2014-2015') and 'LEA\*'. Below these are two buttons: 'Cost Settlement' and 'Upload CPE Form'. The main content area has three tabs: '1. Calculate', '2. View Cost Settlement', and '3. View CPE Form'. A warning icon is present above the text: 'Cost Settlement amount calculated successfully with warnings. 1. Final Cost Settlement amount difference between current and prior fiscal year exceeded the threshold limit.' Below this is a 'Comments' text area. At the bottom, there are fields for 'Calculated By' (SSCADM), 'Calculated Date' (9/30/2016 1:39:36 AM), 'Approved By' (SSCADM), and 'Approved Date' (9/30/2016 1:39:20 AM), followed by an 'Approve' button.

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# Cost Reconciliation

## Cost Settlement & CPE Form – Step 1

Cost Settlement Reports  
 Cost Report  
 Cost Reconciliation  
 Monitoring

- Potential System Error messages include:
  - ✓ All required data is not entered in Cost Report Section
  - ✓ No salaries data has been entered
  - ✓ Data required for IEP Ratio has not been entered
- Cost Settlement Amount will be generated with warnings if:
  - ✓ 10% or more increase or decrease in Cost Settlement Amount from prior year (Not applicable for FY2015-2016). Cost Settlement Amount can only be approved after adding comments in Notes section
  - ✓ Cost Report tabs are not in Approved status

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# Cost Reconciliation

Cost Reconciliation & CPE Form – Step 2

Cost Settlement
Reports

- Cost Report
- Cost Reconciliation
- Monitoring

- ➔
- ➔

- ➔

- ➔

Sample Data   Participant Data   Admin Claim   **Cost Settlement**   Reports

Fiscal Year\* FY 2014-2015

LEA\* [REDACTED]

Cost Settlement   Upload CPE Form

1. Calculate
2. View Cost Settlement
3. View CPE Form

Calculated By [REDACTED]   Calculated Date [REDACTED]

Approved By [REDACTED]   Approved Date [REDACTED]

Approve

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# Cost Reconciliation

Cost Reconciliation & CPE Form – Step 2

Cost Settlement
Reports

- Cost Report
- Cost Reconciliation
- Monitoring

- ➔

- ➔

Sample Data   Participant Data   Admin Claim   **Cost Settlement**   Reports

Fiscal Year\* FY 2014-2015

LEA\* [REDACTED]

Cost Settlement   Upload CPE Form

1. Calculate
2. View Cost Settlement
3. View CPE Form

Calculated By [REDACTED]   Calculated Date [REDACTED]

Approved By [REDACTED]   Approved Date [REDACTED]

Approve

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Page 44




# Cost Reconciliation

Cost Reconciliation & CPE Form – Step 2

Cost Settlement
Reports

- Cost Report
- Cost Reconciliation
- Monitoring

- ➔

- ➔

Sample Data   Participant Data   Admin Claim   **Cost Settlement**   Reports

Fiscal Year\* FY 2014-2015

LEA\* [REDACTED]

Cost Settlement   Upload CPE Form

1. Calculate
2. View Cost Settlement
3. View CPE Form

Calculated By [REDACTED]   Calculated Date [REDACTED]

Approved By [REDACTED]   Approved Date [REDACTED]

Approve

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# Cost Reconciliation

Cost Reconciliation & CPE Form – Step 2

Cost Settlement
Reports

- Cost Report
- Cost Reconciliation
- Monitoring

- ➔

- ➔

Sample Data   Participant Data   Admin Claim   **Cost Settlement**   Reports

Fiscal Year\* FY 2014-2015

LEA\* [REDACTED]

Cost Settlement   Upload CPE Form

1. Calculate
2. View Cost Settlement
3. View CPE Form

Calculated By [REDACTED]   Calculated Date [REDACTED]

Approved By [REDACTED]   Approved Date [REDACTED]

Approve

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Service Type	Salaries	Benefits	Contracted Staff Costs	Other Costs
Assistive Technology Devices				
Nurse Practitioner Services				
Nursing Services				
Occupational Therapy Services				
Orientation, Mobility and Vision Services				
Personal Care Services				
Physical Therapy Services				
Physician Services				
Psychological, Counseling and Social Work Services				
Speech, Language and Hearing Services				
<b>Grand Totals</b>				
<b>Transportation Services Total Costs Summary</b>				

# Cost Reconciliation

## Cost Reconciliation & CPE Form – Step 2

Cost Settlement Reports  
Cost Report  
Cost Reconciliation  
Monitoring

- Cost Settlement Summary Report

1	Commonwealth of Pennsylvania				
2	Department of Public Welfare				
3	Department of Education				
4	School Based Access Program				
5					
6					
7	FY 2014-2015				
8					
9					
10					
11	Total Composable Direct Medical Services and Transportation Medicaid Costs				
12	Service Type	Total Medicaid Costs	Medicaid Benefits Payable	Include in Medicaid Cost Settlement	Total Medicaid Costs
13	Assistive Technology Services	\$0.00	\$0.00	\$0.00	\$0.00
14	Nurse Practitioner Services	\$0.00	\$0.00	\$0.00	\$0.00
15	Speech Services	\$0.00	\$0.00	\$0.00	\$0.00
16	Occupational Therapy Services	\$0.00	\$0.00	\$0.00	\$0.00
17	Orientation, Mobility and Vision Services	\$0.00	\$0.00	\$0.00	\$0.00
18	Presential Care Services	\$0.00	\$0.00	\$0.00	\$0.00
19	Pharmac Therapy Services	\$0.00	\$0.00	\$0.00	\$0.00
20	Physical Services	\$0.00	\$0.00	\$0.00	\$0.00
21	Psychological, Counseling and Social Work Services	\$0.00	\$0.00	\$0.00	\$0.00
22	Specialized Transportation	\$0.00	\$0.00	\$0.00	\$0.00
23	Speech, Language and Hearing Services	\$0.00	\$0.00	\$0.00	\$0.00
24	Total Medicaid Costs	\$0.00	\$0.00	\$0.00	\$0.00

25 \* Only show direct medical service rates for which the LEA billed and received reimbursement for the dates of service within the cost reporting period or included in the Medicaid cost settlement calculation

26	Total Medicaid Costs	Total Medicaid Costs
27	\$0.00	\$0.00
28	\$0.00	\$0.00
29	\$0.00	\$0.00
30		
31		

32 **3. IMAP Application to Medicaid Cost Settlement**

33	Cost Settlement	IMAP %
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# Cost Reconciliation

## Cost Reconciliation & CPE Form – Step 3

Cost Settlement Reports  
Cost Report  
Cost Reconciliation  
Monitoring

- Click "3. View CPE Form" to display completed CPE Form
- CPE Form is stamped DRAFT until Cost Report data on every tab has been approved

Sample Data Participant Data Admin Claim Cost Settlement Reports

Fiscal Year\* FY 2014-2015  
LEA\* [Redacted]

Cost Settlement Upload CPE Form

1. Calculate 2. View Cost Settlement 3. View CPE Form

Calculated By [Redacted] Calculated Date [Redacted]  
Approved By [Redacted] Approved Date [Redacted]

Approve

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# Cost Reconciliation

## Cost Reconciliation & CPE Form – Step 3

- Cost Settlement Reports
- Cost Report
- Cost Reconciliation Monitoring

### ■ CPE Form Draft

**Certification of Public Expenditures for State of Pennsylvania Annual SBAP Medicaid Cost Report**

LEA Name: [REDACTED]  
National Provider Identification (NPI): [REDACTED]  
Medicaid Provider Number: [REDACTED]

**DRAFT**

This statement of expenditures that the undersigned certifies are allocable and allowable to the State Medicaid program under Title XIX of the Social Security Act (the Act), and in accordance with all procedures, instructions and guidance issued by the single state agency and in effect during the state fiscal year. Complete Section II and sign and date below. The form must be submitted with your claim.

HEREBY CERTIFY that for the reporting period: **From: July 01, 2014 To: June 30, 2015**

**Section I:**

1. Total Expenditures \_\_\_\_\_
2. Total Medicaid Expenditures \_\_\_\_\_
3. Medicaid Interim Payments \_\_\_\_\_
4. Medicaid Cost Settlement \_\_\_\_\_

**Section II:**  
**LEA Financial Account Code**  
The expenditures identified above are the match for the federal funds received from Medicaid are drawn from the following approved local account(s):

\_\_\_\_\_

\_\_\_\_\_

**CERTIFICATION STATEMENT BY OFFICER OF THE PROVIDER**  
**INTENTIONAL MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION**

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# Cost Reconciliation

## Cost Reconciliation & CPE Form – Step 3

- Cost Settlement Reports
- Cost Report
- Cost Reconciliation Monitoring

### ■ CPE Form after all Cost Report Data Approved

**Certification of Public Expenditures for State of Pennsylvania Annual SBAP Medicaid Cost Report**

LEA Name: [REDACTED]  
National Provider Identification (NPI): [REDACTED]  
Medicaid Provider Number: [REDACTED]

This statement of expenditures that the undersigned certifies are allocable and allowable to the State Medicaid program under Title XIX of the Social Security Act (the Act), and in accordance with all procedures, instructions and guidance issued by the single state agency and in effect during the state fiscal year. Complete Section II and sign and date below. The form must be submitted with your claim.

HEREBY CERTIFY that for the reporting period: **From: July 01, 2014 To: June 30, 2015**

**Section I:**

1. Total Expenditures \_\_\_\_\_
2. Total Medicaid Expenditures \_\_\_\_\_
3. Medicaid Interim Payments \_\_\_\_\_
4. Medicaid Cost Settlement \_\_\_\_\_

**Section II:**  
**LEA Financial Account Code**  
The expenditures identified above are the match for the federal funds received from Medicaid are drawn from the following approved local account(s):

\_\_\_\_\_

\_\_\_\_\_

**CERTIFICATION STATEMENT BY OFFICER OF THE PROVIDER**  
**INTENTIONAL MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION**  
**CONTAINED HEREIN MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER FEDERAL AND/OR STATE LAW.**

1. All expenditures presented should be allowable in accordance with federal and State Plan Amendment approval requirements.  
2. I have examined this statement, the accompanying supporting exhibits, the allocation of expenses and services, and the worksheets for the above indicated reporting period and to the best of my knowledge and believe they are true and correct statements prepared from our books and records in accordance with applicable instructions.

3. The expenditures included in this statement are based on the actual cost recorded expenditures.

4. The required amount of state and local funds were available and used to pay for total comparable allowable expenditures included in this statement, and such state and local fund uses in accordance with all applicable federal requirements for the non-federal share match of expenditures, including that the funds were not Federal funds in origin, or any Federal funds authorized by Federal law to be used to match other Federal funds, and that the claimed expenditures were not used to meet matching requirements under other Federally funded programs.

5. Federal matching funds are being claimed on this report in accordance with the cost report instructions provided by the Pennsylvania Department of Public Welfare effective for the above indicated reporting period.

6. I am the officer authorized by the referenced government agency to submit this form and I have made a good faith effort to ensure that all information reported is true and accurate.

7. I understand that this information will be used as a basis for claims for Federal funds, and possibly State funds, and that a falsification and concealment of a material fact may be prosecuted under Federal or State civil or criminal law.

Signature of Signer (CEO, CFO, or Superintendent) \_\_\_\_\_ Title of Signer \_\_\_\_\_  
Printed/Typed Name of Signer \_\_\_\_\_ Date \_\_\_\_\_

Address of Signer (owner or P.O. Box, city, state, 5-digit zip) \_\_\_\_\_  
Contact Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_  
Email Address \_\_\_\_\_

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# Cost Reconciliation

## Cost Settlement & CPE Form – Approval & Submission

- Cost Settlement
- Reports
- Cost Report
- Cost Reconciliation
- Monitoring

### Enhanced Real-time Submission of CPE Form

- SBAP Cost Settlement Report and CPE Form can be calculated and reviewed, but cannot be approved until all Cost Report tabs are Approved and Cost Report Submitted
- Approve each of the Cost Report tabs and Submit
- View, Approve, print, sign and scan LEA-generated SBAP CPE Form
- On “Upload CPE Form” tab, Upload signed Certification form
- Click “Submit” to electronically transmit to SSG

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# Cost Reconciliation

## Cost Reconciliation & CPE Form – Step 4

- Cost Settlement
- Reports
- Cost Report
- Cost Reconciliation
- Monitoring

- Click “Upload CPE Form” Tab
- Click “4. Upload” to upload signed CPE Form

Fiscal Year\*

LEA\*

Cost Settlement    Upload CPE Form

File Type\*

Select File\*

Submitted By     Submitted Date

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# Cost Reconciliation

## Cost Reconciliation & CPE Form – Step 5

Cost Settlement   Reports

Cost Report  
Cost Reconciliation  
Monitoring

- Click “Upload CPE Form” Tab
- Click “5. Submit” to submit all data and signed CPE Form to SSG

Fiscal Year\* FY 2014-2015  
LEA\* [REDACTED]

Cost Settlement   Upload CPE Form

File Type\* CPE Form  
Select File\* [Browse...]   4. Upload  
View Uploaded CPE Form

Submitted By [ ]   Submitted Date [ ]

5. Submit

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# Reports

## Reports – Cost Data

Cost Report  
Cost Reconciliation  
Monitoring   Reports

- Reports are generated in real-time
- Report access is based on user roles
- Reports can be viewed on screen, in .pdf format, or exported to Microsoft Excel
- Report Code is useful while communicating with SSG Help Desk

Search		
	Report Code	Report Name
<input type="radio"/>	RR801	Salaried and Contracted Staff Costs
<input type="radio"/>	RR803	Direct Medical Other Costs
<input type="radio"/>	RR805	Transportation Staff Costs
<input type="radio"/>	RR806	Transportation Other Costs
<input type="radio"/>	RR807	Depreciation
<input type="radio"/>	RR808	Tuition
<input type="radio"/>	RR809	General Statistical Percentages
<input type="radio"/>	RR830	Cost Settlement
<input type="radio"/>	RR831	Certification

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# Reports

## Reports – Cost Settlement

- Reports
- Cost Report
- Cost Reconciliation
- Monitoring

Search		Direct Medical Other Costs	
<input type="radio"/> RR801	Salaried and Contracted Staff Costs	Fiscal Year*	[Redacted]
<input type="radio"/> RR802	Direct Medical Other Costs	LEA*	[Redacted]
<input type="radio"/> RR803	Transportation Staff Costs	Service Type	[Redacted]
<input type="radio"/> RR805	Transportation Other Costs	Expense Type	Materials an
<input type="radio"/> RR807	Depreciation		
<input type="radio"/> RR808	Tuition		
<input type="radio"/> RR809	General Statistical Percentages		
<input type="radio"/> RR830	Cost Settlement		

choose format

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# Reports

## Reports – Cost Settlement (PDF)

- Reports
- Cost Report
- Cost Reconciliation
- Monitoring

**Medicaid Admin and Cost Settlement System (e-SivicMACS)**  
 Test State  
 Direct Medical Other Costs  
 July - June 2015

Fiscal Year: [Redacted]  
 LEA: [Redacted]  
 Service Type: [Redacted]      Expense Type: 01 - Materials and Supplies  
 Report Option: Detail

Service Type	Expense Type	Expense Amount	Federally Funded	Claimable Amt
Assistive Technology Devices	Materials and Supplies	0.00	0.00	0.00
Audiology Services	Materials and Supplies	5,000.00	0.00	5,000.00
Counseling Services	Materials and Supplies	0.00	0.00	0.00
Nursing Services	Materials and Supplies	0.00	0.00	0.00
Occupational Therapy Services	Materials and Supplies	0.00	0.00	0.00
Orientation and Mobility Services	Materials and Supplies	0.00	0.00	0.00
Personal Care Services	Materials and Supplies	0.00	0.00	0.00
Physical Therapy Services	Materials and Supplies	0.00	0.00	0.00
Physician Services	Materials and Supplies	0.00	0.00	0.00
Psychiatric Services	Materials and Supplies	0.00	0.00	0.00
Psychological Services	Materials and Supplies	0.00	0.00	0.00
Social Work Services	Materials and Supplies	0.00	0.00	0.00
Speech Language Services	Materials and Supplies	0.00	0.00	0.00
Teacher of the Hearing Impaired	Materials and Supplies	0.00	0.00	0.00
<b>Total:</b>		<b>5,000.00</b>	<b>0.00</b>	<b>5,000.00</b>
<b>Grand Total:</b>		<b>5,000.00</b>	<b>0.00</b>	<b>5,000.00</b>

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# Reports

## Reports – Cost Settlement (Excel)

Reports

Cost Report  
Cost Reconciliation  
Monitoring

Fiscal Year	Fiscal Year Description	LEA Code	LEA Name	Service Type	Expense Type Code	Expense Type Description	Expense Amount	Federally Funded	Claimable
2016	FY 2014-2015	*02		Assistive Technology Devices	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Audiology Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Counseling Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Nursing Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Occupational Therapy Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Orientation and Mobility Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Personal Care Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Physical Therapy Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Physician Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Psychiatric Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Psychological Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Social Work Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Speech Language Services	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00
2016	FY 2014-2015	*02		Teacher of the Hearing Impaired	71	Materials and Supplies	\$,000.00	\$,000.00	\$,000.00

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# Monitoring

## Monitoring

- Select Applicable Fiscal Year
- LEA defaults based on Security Role

Cost Settlement Reports

Cost Report  
Cost Reconciliation  
Monitoring

Fiscal Year\* --Select--

LEA\* --Select--

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# Monitoring

## Monitoring Process – 4 Steps

- Cost Settlement
- Reports
- Cost Report
- Cost Reconciliation
- Monitoring**

- LEAs selected for Monitoring Review will be notified in writing by DHS
1. Review Monitoring Request for each category using “Monitoring Request” Link
  2. Upload Supporting documents using “Upload Documents” Link
  3. Communicate with SSG Team using “Response/Discussion” Link
  4. SSG Team Reviews documents and Finalizes each Section

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# Monitoring

## Monitoring Process – 4 Steps

- Cost Settlement
- Reports
- Cost Report
- Cost Reconciliation
- Monitoring**

S.No	Category	Status	1	2	3
1	<b>Salaried Staff Costs</b> Please Provide Supporting Documentation For Salary Staff Cost Information	New	Monitoring Request	Upload Documents	Response/Discussion
2	<b>Contracted Staff and Services</b> Please Provide Supporting Documentation For Contracted Staff and Services	New	Monitoring Request	Upload Documents	Response/Discussion
3	<b>Direct Medical Service Staff - Credentials &amp; Licensing</b> Please Provide Supporting Documentation For Direct Medical Service Staff - Credentials & Licensing	New			
4	<b>Direct Medical Services Other Costs</b> Please Provide Supporting Documentation For Direct Medical Services Other Costs	New			
5	<b>IEP Ratio</b> Please Provide Supporting Documentation For IEP Ratio	New			
6	<b>Tuition Payments</b> Please Provide Supporting Documentation For Tuition Payments	New			
7	<b>One Way Trip Ratio and Specialized Transportation Ratio</b> Please Provide Supporting Documentation For One Way Trip Ratio and Specialized Transportation Ratio	New			

Reviewed
All data has been reviewed and verified

In Process
Data has been submitted, but still needs verification

New
No data has been uploaded

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# Monitoring

## Monitoring Process – Step 1

Cost Settlement Reports  
Cost Report  
Cost Reconciliation  
Monitoring

- SSG staff uploads Monitoring records request for each category
- LEA Contact downloads records request using “Monitoring Request” Link

S.No	Category	Status	Monitoring Request	Upload Documents	Response/Discussion
1	<b>Salaried Staff Costs</b> Please Provide Supporting Documentation For Salary Staff Cost Information	New	Monitoring Request	Upload Documents	Response/Discussion
2	<b>Contracted Staff and Services</b> Please Provide Supporting Documentation For Contracted Staff and Services	New	Monitoring Request	Upload Documents	Response/Discussion
3	<b>Direct Medical Service Staff - Credentials &amp; Licensing</b> Please Provide Supporting Documentation For Direct Medical Service Staff - Credentials & Licensing	New	Monitoring Request	Upload Documents	Response/Discussion
4	<b>Direct Medical Services Other Costs</b> Please Provide Supporting Documentation For Direct Medical Services Other Costs	New	Monitoring Request	Upload Documents	Response/Discussion
5	<b>IEP Ratio</b> Please Provide Supporting Documentation For IEP Ratio	New	Monitoring Request	Upload Documents	Response/Discussion
6	<b>Tuition Payments</b> Please Provide Supporting Documentation For Tuition Payments	New	Monitoring Request	Upload Documents	Response/Discussion
7	<b>One Way Trip Ratio and Specialized Transportation Ratio</b> Please Provide Supporting Documentation For One Way Trip Ratio	New	Monitoring Request	Upload Documents	Response/Discussion

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# Monitoring

## Monitoring Process – Step 2

Cost Settlement Reports  
Cost Report  
Cost Reconciliation  
Monitoring

- LEA updates Contact information and uploads Supporting documents using “Upload Documents” Link

Fiscal Year\* [dropdown] LEA\* [dropdown] Contact Information

Last Name [input] First Name [input]  
 Title [input]  
 Address [input]  
 City [input] State [dropdown: Pennsylvania] Zip [input]  
 Phone [input] Email [input]

Enter point of contact →

Save Cancel

**Salaried Staff Costs**  
Please Provide Supporting Documentation For Salary Staff Cost Information

File Name [input] Browse... Upload Cancel

Comments [input]

Search  
 File Name [input]  
 Comments [input]  
 From Date [input] To Date [input] Reset Search

File Name	Comments	Upload Date Time
No Record(s) Found		

Upload all supporting documentation

Search / view uploaded files

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# Monitoring

**Cost Settlement** | **Reports**  
 Cost Report  
 Cost Reconciliation  
**Monitoring**

## Monitoring Process – Step 3

Fiscal Year\* FY 2014-2015 Contact Information

LEA\* XXXXXXXXXX

---

**Salaried Staff Costs**

Please Provide Supporting Documentation For Salary Staff Cost Information

(10/2/2016 2:37:28 AM)

John Doe's Salary does not match with payroll data. Please Explain

(10/2/2016 2:30:49 AM)

Requested documents uploaded

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# Monitoring

**Cost Settlement** | **Reports**  
 Cost Report  
 Cost Reconciliation  
**Monitoring**

## Monitoring Process – Step 3

Fiscal Year\* FY 2014-2015 Contact Information

LEA\* XXXXXXXXXX

---

**Salaried Staff Costs**

Please Provide Supporting Documentation For Salary Staff Cost Information

(10/2/2016 2:37:28 AM)

John Doe's Salary does not match with payroll data. Please Explain

(10/2/2016 2:30:49 AM)

Requested documents uploaded

John Doe's payroll data is missing a pay period. New documents were uploaded, which reflect correct amounts

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# Monitoring

## Monitoring Process – Step 3

- Cost Settlement
- Reports
- Cost Report
- Cost Reconciliation
- Monitoring**



S.No	Category	Status	Monitoring Request	Upload Documents	Response/Discussion
1	<b>Salaried Staff Costs</b> Please Provide Supporting Documentation For Salary Staff Cost Information	New			Response/Discussion(09/20 14:19)
2	<b>Contracted Staff and Services</b> Please Provide Supporting Documentation For Contracted Staff and Services	New	Monitoring Request	Upload Documents	Response/Discussion
3	<b>Direct Medical Service Staff - Credentials &amp; Licensing</b> Please Provide Supporting Documentation For Direct Medical Service Staff - Credentials & Licensing	New	Monitoring Request	Upload Documents	Response/Discussion
4	<b>Direct Medical Services Other Costs</b> Please Provide Supporting Documentation For Direct Medical Services Other Costs	New	Monitoring Request	Upload Documents	Response/Discussion
5	<b>IEP Ratio</b> Please Provide Supporting Documentation For IEP Ratio	New	Monitoring Request	Upload Documents	Response/Discussion
6	<b>Tuition Payments</b> Please Provide Supporting Documentation For Tuition Payments	New	Monitoring Request	Upload Documents	Response/Discussion
7	<b>One Way Trip Ratio and Specialized Transportation Ratio</b> Please Provide Supporting Documentation For One Way Trip Ratio	New	Monitoring Request	Upload Documents	Response/Discussion

Date/Time of latest comment displayed



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# Monitoring

## Monitoring Process – Step 4

- Cost Settlement
- Reports
- Cost Report
- Cost Reconciliation
- Monitoring**



- SSG staff reviews documents for each category and submits report to DHS
- Green (Reviewed) Status indicates the completion of this step by SSG staff

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## Contact Information

### Help Desk Support

**Live Support: 8:00 am – 5:00 pm**

**By Phone:**

Toll Free: 1-877-916-3222

**By email:**

[PAsupport@sivicsolutionsgroup.com](mailto:PAsupport@sivicsolutionsgroup.com)

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## SBAP Training Survey

**We want to hear from you!**

**Please provide your feedback of the afternoon session by completing this short survey:**

<https://www.surveymonkey.com/r/NL5RFBL>

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