



## 274 File FAQ's

### **Q1. How do I report the “Maximum # of Medi-Cal Caseload” field?**

A1. This is the maximum number of unique Medi-Cal members this provider will accept in a month. This number is subjective based on agency, provider type, and level of care. Use your best judgement to identify the most accurate number as this can vary from agency to agency. **CANNOT BE “0”.**

### **Q2. How do I report the “Current Medi-Cal Caseload” Field?**

A2. At the time of completion, how many unique Medi-Cal beneficiaries is the provider currently seeing. Ok to list “0” if it is a new provider. If this # is equal to or greater than the Maximum number Med-Cal Caseload, it will show “Not accepting patients” in the provider directory.

### **Q3: How do I calculate “Full-Time Equivalents”?**

A3. A provider may be counted as one (1) FTE position if the individual’s full-time job assignment is direct service delivery to Medi-Cal eligibles. In the case where an individual is assigned to direct service delivery on a part-time basis, the FTE should be calculated based on the percentage of time the individual could be dedicated to direct service delivery on an ongoing basis over the course of a year. An FTE position is 2,080 hours per year (i.e., 40 hours per week). FTE calculations shall not exceed 40 hours per week, including between service type(s) and age group(s) served. (Please see the section titled “Additional Options to Meet Provider and Capacity Requirements” for instructions on how a Plan may report provider time in excess of 40 hours per week). - BHIN24-020

### **Q4: Who should be included in the 274-file?**

A4. Only direct providers of mental health services and psychiatry services should be included in the 274 file. For each rendering provider (an employee or contracted provider), the MHP should report the total FTEs available to directly provide mental health services including psychiatry services as evidenced by the contract. All providers both licensed and non-licensed that are providing OUTPATIENT services to Medi-Cal beneficiaries at certified sites that have gone through the credentialing process. - BHIN24-020

### **Q5: Should administrative and/or supervisory staff be included in the 274 file?**

A5: MHP administrative staff and/or members of leadership can only be included if they have the ability to serve clients on a regular and on-going bases. If an administrative staff employee is needed to function 100% in their administrative role (directory, quality improvement manager, medical director) but could pick up a client on an emergency basis, the employees should not be included as they do not have the regular capacity to serve Medi-Cal beneficiaries.

### **Q6. Under what provider type should paraprofessionals be reported in the 274 file.**

A6. They should be reported as “other qualified professionals” under provider type.

### **Q7. What is this data used for?**



A7. This data is used to report network adequacy to the state. The data also feeds into our provider directory. It is important that this data is updated monthly and completed as accurately as possible. This can impact Medi-Cal beneficiaries in seek of mental health and SUTS services.