

**ACTIVITY CODE (19)**  
**MAA/TCM COORDINATION AND CLAIMS ADMINISTRATION**

Claiming Unit: Public Guardian

Submittal Date: 06/30/2025

Local Governmental Agency: ABC County

Amended Date:

For each type of MAA/TCM Coordination and Claims Administration performed, provide the following information:

1. **Individually list** each type of allowable MAA/TCM coordination and claims administration activity performed and describe how staff perform this activity (if adding the LGA Participation Fee, list that here):

MAA coordination and claims administration is provided by [LGA Department] staff. [LGA Department] invoices Public Guardian at the end of each fiscal year for an administrative fee that includes Public Guardian's portion of the LGA Participation Fee to Host County. [LGA Department] initially pays the LGA participation fee for all claiming units and then invoices other counties claiming units at the end of the fiscal year for the LGA Participation Fee and Administrative Fee.

2. Indicate whether staff perform this activity part-time in addition to other duties:

N/A - staff reside in [LGA Department]. [LGA Department] staff perform this activity part-time.

3. Describe the method that will be used for claiming, i.e. direct charge or time survey:

Staff in this claiming unit do not use Code 19. However, the Direct Charge method will be used for the cost of a contract with the [Electronic Time Study Software Name] for time survey tracking software.

4. If applicable, indicate whether contractors or consultants will provide claims preparation activities. Then provide the names of those contractors/consultant:

All claim preparation is done by county staff members from the [LGA Department]. [Electronic Time Study Software Name] software is used by County staff members for time study management. This contract cost will be direct charged.

Documents Required:

1. Attach copies of any contracts entered into for the performance of LGA claims administration.