Montana Medicaid Administrative Claiming Program

Time Study Completion Guide

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Medicaid Administrative Claming Program Overview

Introduction

Congratulations. Your district or cooperative has enrolled in the Montana Medicaid Administrative Claiming (MAC) Program and as such will be taking advantage of reimbursement that is available from Medicaid for administrative activities associated with health services provided to students in schools. This time study guide will give you an overview of the MAC Program and detail on how to complete the Random Moment Time Study that is necessary documentation required for program participation.

The State of Montana, Department of Public Health and Human Services (DPHHS), Child & Adult Health Resources, is the state agency that is responsible for developing and implementing the MAC Program.

Overview of Medicaid in Schools

Schools have been able to provide and obtain reimbursement from Medicaid for health services provided to students since the early 1990s. Medicaid can be an important source of funding for schools, particularly because the cost of providing special education can greatly exceed the federal assistance provided under the Individuals with Disabilities Education Act (IDEA). Children who qualify for IDEA are frequently eligible for Medicaid services. Although Medicaid is traditionally the "payer of last resort" for health care services, it is required to reimburse for IDEA related medically necessary services for eligible children before IDEA funds are used.

There are currently two Medicaid programs available to schools in Montana. They are the Direct Services Program and the MAC Program. This guide specifically addresses processes related to the MAC Program.

Overview of Medicaid Administrative Claiming (MAC) Program

The MAC program allows school districts and cooperatives to be reimbursed for some of the costs associated with administration of school-based health services as well as outreach activities, which are not claimable under the Medicaid Direct Services Program. In general, the types of school-based health and outreach activities funded under MAC are created to:

- Locate, identify and refer individuals needing health/mental health related services,
- Assist families in accessing Medicaid services through education, public awareness, and
- Seek appropriate providers and care for individuals.

A key focus of the MAC program is the Early Periodic Screening, Diagnosis and Treatment (EPSDT) Program, which is used to ensure a comprehensive, preventative health care program for Medicaid eligible children aged of 3 through 20.

In order to administer this program the following must occur:

1. Districts and cooperatives must sign up to participate in the program. *(Memorandum of Understanding)*
2. Clinicians who perform the activities that are reimbursable through this program must be identified. *(Participant Listing)*
3. A sampling of the work done by these clinicians must be obtained. *(Time Study)*
4. Data from the school districts and cooperatives regarding monies spent to maintain the staff members that provide these services. *(Financial Data Collection)*

This guide addresses the documentation requirements for time study completion.

Guidelines for Completing the RMS Time Study Observation Form

Random Moment Sampling Time Study Overview
The time study is intended to quantify the amount of time that participants spend completing activities that are reimbursable through the MAC program. The time study method used is called a random moment sample (RMS) method. The process is designed to be as quick and unobtrusive to participants as possible.

The RMS method measures the work effort of the entire group of staff (identified on the Participant Listing) involved in the school district's medical and health-related services, by sampling and analyzing the work efforts of a cross-section of the group. RMS methods employ a technique of polling employees at random moments over a given time period and tallying the results of the polling. The method provides a statistically valid means of determining what portion of the selected group of staffs' workloads are spent performing activities that are reimbursable by Medicaid.

Guidelines
The following guidelines should be considered when completing the RMS observation form:
1. Use blue or black ink to complete the form.
2. Do not use whiteout. If you make an error, cross it out and initial the change. Whiteout invalidates the form.
3. Complete the form the day of the random moment that is listed on the bottom right corner of the form.
4. Use the listing of activity codes below, or the abbreviated listing that is on the back of the observation form to pick the activity code that matches the work that you have performed.
5. Choose only one position and one activity code for each random moment.
6. If your form says "Yes" next to "Validate?" on the bottom right hand corner, then your form will have a second signature line for a validation signature. Please ask another person at your district to validate your activity code choice and then sign the form. You may want to ask the MAC Coordinator or your supervisor to do this for you.
7. Return the form to your district's MAC Coordinator in a timely manner. This is most likely the person who gave you the form.

Activity Codes

Use the following descriptions to choose the appropriate activity code that matches the work you performed during the randomly chosen moment on your observation form.

1. **DIRECT MEDICAL AND SCHOOL HEALTH-RELATED SERVICES**
    Providing direct medical care, counseling and therapeutic services or treatment. These activities include screening, evaluations, and treatment. Includes related paperwork, clerical activities, training (including training regarding the delivery of direct health services), staff travel required to perform these activities.

Examples:
   - Direct clinical treatment and therapeutic services
   - Developmental assessments
   - Diagnostic testing and assessments/evaluations
   - Counseling about a health, mental health, or substance abuse issue
   - Performing child health screens such as vision, hearing and other EPSDT screens
   - Providing immunizations or pre-natal care services
   - Administering first aid, emergency care, or prescribed medications or injections
   - All services billed to Medicaid

2. **NON-MEDICAID, EDUCATIONAL AND OTHER SOCIAL ACTIVITIES**
    Performing activities that are not health or Medicaid related, such as education and teaching, employment, job training, and social activities. Includes related paperwork, clerical activities, training (including training regarding non-medical, educational and social activities) or staff travel required to perform these activities.

Examples:
   - Providing classroom instruction, including lesson planning, testing, and correcting papers
   - Developing, coordinating and monitoring the educational component of the IEP and the associated meetings/conferences
   - Conducting a parent-teacher conference about a student's educational progress;
   - Compiling attendance reports
   - Performing activities that are specific to instructional, curriculum, and student focused areas
   - Providing general supervision of students (e.g., lunchroom, playground, bus)
   - Monitoring student academic achievement
   - Evaluating curriculum and instructional services, policies and procedures

3. **OUTREACH TO MEDICAID PROGRAM**
    Informing eligible or potentially eligible individuals about Medicaid and how to access it, describing the range of services covered under Medicaid and how to obtain Medicaid preventive services. Both written and oral methods may be used. Includes related paperwork, clerical activities, training (including training regarding Medicaid outreach), or staff travel required to perform these activities.

Examples:
   - Informing Medicaid eligible and potential Medicaid eligible children and families about the benefits and availability of services provided by Medicaid (including preventative treatment and screening) including services provided through the EPSDT program

- Developing and/or compiling materials to inform individuals about the Medicaid program (including EPSDT) and how and where to obtain those benefits
- Distributing literature about the benefits, eligibility requirements and availability of the Medicaid program, including EPSDT
- Assisting the Medicaid agency to fulfill the outreach objectives of the Medicaid program by informing individuals, students and their families about health resources available through the Medicaid program
- Providing information about Medicaid EPSDT screening (e.g., dental, vision) in schools that will help identify medical conditions that can be corrected or improved by services offered through the Medicaid Program
- Contacting pregnant and parenting teenagers about the availability of Medicaid prenatal, and well baby care programs and services
- Providing information regarding Medicaid managed care programs and health plans to individuals and families and how to access them
- Encouraging families to assess medical/dental/mental health services provided by the Medicaid program

4. OUTREACH TO NON-MEDICAID PROGRAMS

Performing activities that inform eligible or potentially eligible individuals about non-Medicaid, social, vocational, and educational programs and how to access them, describing the range of benefits covered under these non-Medicaid, social, vocational, and educational programs and how to obtain them. Both written and oral methods may be used. Includes related paperwork, clerical activities, training (including training regarding outreach activities to non-Medicaid programs) or staff travel required to perform these activities.

Examples:

- Scheduling and promoting activities which educate individuals about the benefits of healthy life-styles and practices
- Compiling brochures designed to effectively inform eligible individuals about the WIC and other non-health related services, and about how and where to obtain services
- Informing families and distributing literature about the benefits and availability of non-health related programs
- Conducting general health education programs or campaigns addressed to the general population
- Conducting outreach campaigns that encourage persons to access social, educational, legal or other services not covered by Medicaid

5. FACILITATING AN APPLICATION FOR MEDICAID

Assisting an individual or family in becoming eligible for Medicaid. Includes related paperwork, clerical activities, training (including training regarding Medicaid eligibility) or staff travel required to perform these activities.

Examples:

- Referring an individual or family to the local assistance office to complete an application for Medicaid benefits
- Explaining the Medicaid eligibility process to prospective applicants
- Providing assistance to the individual or family in collecting required information and documents for the Medicaid application
- Assisting the individual or family in completing the application

6. FACILITATING AN APPLICATION FOR NON-MEDICAID PROGRAMS

Assisting an individual or family in becoming eligible for non-Medicaid programs. Includes related paperwork, clerical activities, training (including training regarding eligibility for non-Medicaid programs) or staff travel required to perform these activities.

Examples:
- Referring and individual or family to the appropriate agency to make application for Food Stamps, day care or other social program to complete an application for assistance
- Explaining the eligibility process for non-Medicaid programs
- Verifying a student's eligibility for free and reduced lunch
- Assisting an individual or family in completing an application, including necessary translation activities

7. REFERRAL, COORDINATION AND MONITORING OF MEDICAID SERVICES

This code includes making referrals for and coordinating and/or monitoring the delivery of medical/mental health services. Linking the individual and family with Medicaid service providers to plan, carry out and maintain a health service plan. Includes related paperwork, clerical activities, training (including training regarding referral, coordination and monitoring of medical services), or staff travel required to perform these activities.

Examples:
- Scheduling and/or coordinating EPSDT screens or other medical and mental health diagnostic services
- Gathering any information that may be required in advance of these referrals or evaluations for necessary medical health, mental health or substance abuse services
- Coordinating necessary medical, mental health or substance abuse services covered by Medicaid which were identified as a result of a screen or evaluation
- Assisting in coordinating and/or scheduling health care appointments for the individual or family
- Participating in meetings/discussions to coordinate or review an individual's need for health related services covered by Medicaid
- Providing information to other staff about the individual's related medical/mental health services and plans
- Monitoring compliance with periodicity schedules to ensure immunizations are received in a timely manner
- Scheduling and/or coordinating the delivery of immunizations

8. REFERRAL, COORDINATION AND MONITORING OF NON-MEDICAID SERVICES

This code includes time making referrals for and coordinating and/or monitoring the delivery of non-medical, such as educational, vocational and other social services. Linking the individual and family with educational, vocational or other social service providers to plan, carry out and maintain an education service plan. Includes related paperwork, clerical activities, training (including training regarding referral, coordination and monitoring of non-Medicaid service), or staff travel required to perform these activities.

Examples:
- Making referrals for and or coordinating access to social and educational services such as child care, employment, job training and housing
- Making referrals for, coordinating and monitoring the delivery of scholastic, vocational, and other non-health related examinations

- Gathering any information that may be required in advance of these non-Medicaid related referrals
- Participating in a meeting/ discussion to coordinate a student's need for scholastic, vocational, and non-health related services not covered by Medicaid
- Monitoring and evaluating the non-medical components of the individualized plans as appropriate

9. CLIENT ASSISTANCE TO ACCESS MEDICAID SERVICES

Arranging for specific support provisions, such as transportation or translation assistance, which are necessary for an individual or family to access Medicaid services. Includes related paperwork, clerical activities, training (including training regarding medical transportation service and coordination) or staff travel required to perform these activities.

Examples:
- Arranging for or providing translation or signing services that assist an individual or family accessing and understanding necessary care or treatment
- Arranging for transportation for an individual or family to access Medicaid services

10. CLIENT ASSISTANCE TO ACCESS NON-MEDICAID SERVICES

Arranging for specific support provisions, such as transportation or translation assistance, which are necessary for an individual or family to access non-Medicaid educational and social services. Includes related paperwork, clerical activities, training (including training regarding client assistance to access non-Medicaid services), or staff travel required to perform these activities.

Examples:
- Arranging for or providing translation or signing services that assist an individual or family accessing and understanding educational and social services
- Arranging for or providing translation or signing services to assist in the completion of day care, legal, social service program applications
- Arranging for transportation for an individual or family to access educational, vocational and other social services

11. PROGRAM PLANNING, POLICY DEVELOPMENT AND INTERAGENCY COORDINATION RELATED TO MEDICAL SERVICES

Activities associated with the development of strategies to improve the coordination and delivery of medical/mental health services to school age children.
This code includes time spend developing, monitoring, and implementing tracking systems to assess the effectiveness of these services and programs. Includes related paperwork, clerical activities, training (including training regarding program planning, policy development and interagency coordination of medical services) or staff travel required to perform these activities.

Examples:
- Working with other health agencies to improve the coordination, delivery, and access of medical/mental health services
- Developing internal plans and strategies to increase service capacity and close service gaps
- Monitoring the effectiveness of medical/mental health services in schools
- Developing procedures for tracking the requests of families for assistance with Medicaid services and providers

- Working with other agencies and/or providers that provide medical/dental/mental health services to improve the coordination and delivery of services, to expand their access to specific populations of people eligible for Medicaid, and to increase provider participation and improve provider relations
- Working with Medicaid resources, such as the Medicaid agency and Medicaid managed care plans, to make good faith efforts to locate and develop EPSDT health service referral relationships
- Developing advisory or work groups of health professionals to provide consultation and advice regarding the delivery of health care services to the school population
- Developing EPSDT referral resources (e.g., directories of Medicaid providers who will provide EPSDT services to certain population groups)
- Coordinating with interagency committees to identify, promote and develop EPSDT services in the school system
- Coordinating with advisory committees for EPSDT early intervention programs or other Medical health initiatives
- Coordinating the medical/mental health service programs provided in schools with other community medical/mental health programs and agencies

12. PROGRAM PLANNING, POLICY DEVELOPMENT AND INTERAGENCY COORDINATION RELATED TO NON-MEDICAL SERVICES

Activities associated with the development of strategies to improve the coordination and delivery of non-health related education services to school age children. Developing, monitoring and implementing tracking systems to assess the effectiveness of these services and programs. Includes related paperwork, clerical activities, training (including training regarding program planning, policy development and interagency coordination related to non-medical services), or staff travel required to perform these activities.

Examples:
- Working with other education agencies to improve the coordination, delivery, and access of non-health services
- Developing internal plans and strategies to increase service capacity and close service gaps
- Monitoring the effectiveness of education services in schools
- Developing EPSDT referral resources (e.g., directories of Medicaid providers, including manages care providers, who will provide EPSDT services to certain population groups)
- Coordinating with interagency committees to identify, promote and develop expanded educational services in the school system

13. GENERAL ADMINISTRATION

Performing general administration activities of the school or local education agency, as well as time associated with breaks, lunch or paid leave. Includes related paperwork, clerical activities, training (including training regarding general administrative activities) or staff travel required to perform these activities.

Examples:
- Taking lunch, breaks, or paid leave
- Attending staff meetings/training
- Reviewing school or district procedures and rules
- Reviewing technical literature and research articles
- Attending or facilitating general school or unit staff meetings or board meetings

- Providing general supervision of staff
- Performing other administrative or clerical activities related to general building or district functions or operations

14. **NOT SCHEDULED TO WORK**

> *This code should be checked if the random moment occurs at a time when the employee is not scheduled to be at work.*

<u>Role Of The MAC Coordinator</u>
A standardized process must occur each quarter. Coordination of the process is the responsibility of the MAC Coordinator. The processing includes:
1. A participant listing is submitted to DPHHS.
2. A portion of the statewide pool of selected employees and contractors will be identified to participate in the RMS time study.
3. For each employee selected, one or more forms will be generated by DPHHS indicating the specific date and time that the employee is to be surveyed, or "sampled". Selected employees may be sampled more than once during a given quarter.
4. Observation forms will be distributed to each school district's designated MAC Coordinators, who will then be responsible for distributing each form to the selected participants.
5. Each staff person completing the RMS time study must be trained prior to completing the time study. This training must be conducted at least one time annually. Coordinators should maintain a sign in sheet for each person trained.
6. At the specified date and time, the employee will be expected to complete the observation form.
7. Forms are then returned to the MAC Coordinator for data entry to DPHHS.

For details on the MAC Coordinator's role, please see the <u>MAC Coordinators' Guide for Developing Participant Listings and Administering Time Study</u>. The MAC Coordinator received this guide at the onset of the program.

<u>Questions</u>
If you need assistance in completing or submitting your Random Moment Time Study forms, please contact:

Rena Steyaert, Program Officer   Phone: (406) 444-4162
DPHHS   Fax Number: (406) 444-1861
Health Resource Division   Email: rsteyaert@mt.gov
P.O. Box 202951
Helena, MT 59620

The following page is a sample of the Random Moment Sampling observation form.
The answers to the most frequently asked questions appear below the form.

Random Moment Observation Sampling Form
State of Montana - MAC Program
For the Period of: 1-October-2014 to 17-December-2014

Participant's Name   **Sample Moment:** Date Time
Job Title   Sample Sequence #:
School District/Building

_____
(Signature)   (Date)

Note: On the comment lines below please provide a brief statement answering EACH of the three questions listed based on the moment of time selected (see above for sample moment).

What were you doing?_____

Who were you with? (check one) ☐ Student ☐ Family ☐ Colleague ☐ Other: _____

What is the purpose of this activity? _____

_____

Section I: Programs (Please select only one [X])		**Section II: Activities (Please Select Only One [X])**	
☐	01 Administrators for Special Education	☐	01 Direct Medical and School Health Services
☐	02 Audiologists and Audiology Assistants	☐	02 Non-Medicaid, Educational and Other Social Services
☐	03 Bilingual Specialists	☐	03 Outreach to Medicaid Programs
☐	04 Counselors	☐	04 Outreach to Non-Medicaid Programs
☐	05 Diagnosticians	☐	05 Facilitating an Application for Medicaid
☐	06 Dietitians	☐	06 Facilitating an Application for Non-Medicaid
☐	07 Coordinators/Liaisons for Spec. Ed	☐	07 Care Planning and Coordination for Medicaid Services
☐	08 Interpreters	☐	08 Care Planning and Coordination for Non-Medicaid Services
☐	09 Licensed Practical Nurses or School Health Aides	☐	09 Client Assistance to Access Medicaid Programs
☐	10 Medicaid Billing Clerks	☐	10 Client Assistance to Access Non-Medicaid Programs
☐	11 Occupational Therapists and Assistants	☐	11 Program Planning, Development and Monitoring of Medicaid Services
☐	12 Orientation and Mobility Specialists	☐	12 Program Planning, Development and Monitoring of Non-Medicaid Services
☐	13 Physical Therapists and Assistants	☐	13 General Administration
☐	14 Program and Staffing Specialists	☐	14 Not Scheduled to Work
☐	15 Psychologists and Interns		
☐	16 Recreation Therapists		
☐	17 Registered Nurses		
☐	18 Respiratory Therapists		
☐	19 Social Workers		
☐	20 Speech-language Pathologist and Aides		
☐	21 Student Services Personnel		
☐	22 Work-Study Coordinator		

DO NOT USE WHITEOUT

Instructions for completing the Random Moment Sample

1. Make sure the RMS form is for you. (upper left corner of RMS form) Location is not a factor in the sample – just what you are doing during your sample moment.
2. Make a note on your Daytimer or calendar of the date and time of your sample moment. (upper right corner of RMS form)
3. After your moment, write a simple sentence in the comments section of the RMS form stating what you were doing at the time.
4. In section 1 of the RMS form, select the box next to your job title.
5. In Section 2 of the RMS form, select the box next to the activity code that matches the simple sentence in the Comments section. Use the descriptions and examples sent to you or call your MAC Coordinator with any questions.
6. Sign, date and return the RMS form to your MAC Coordinator. Please see Validation of either True or False above Validation Signature Line. True requires a validation signature. Please also see control list for validation requirements.

Validate: True

_____
(Signature)   (Date)

Frequently Asked Questions About the Observation Form

How do I know that this is my RMS observation form?

You will know that the form is yours by looking at the top left hand corner for your name. If someone else's name is printed there, please contact you MAC Coordinator.

Can I choose more than one position?

No. Choose the position that best describes your work. Your position title is under your name. If it is incorrect, cross it out and write in the correct title.

Can I choose more than one activity?

No. Choose the activity that best describes the work that you have performed during the moment listing on the observation form. The activity codes are listed in detail in this document and are listed with brief descriptions on the back of the observation form.

What if my observation form says "True" next to validation?

If your form says "True" next to validation, then someone at your district needs to validate the work that you have done. You can ask the MAC Coordinator or your supervisor to sign on the validation line.

Do I have to write in comments?

Yes. Please answer the three short questions. This will help you choose which activity code to select. DPHHS uses the comments to validate the activity codes.

Why can't I use whiteout?

Using whiteout invalidates your sample sheet. If you make a mistake, cross it out, initialize and make the correction.

Is training provided for this process?

Yes. The MAC Coordinator will provide training for all time study participants. Each participant must be trained at least once a year.

Activity Code Quick Reference

Report the activity that best describes what you are doing at the selected random moment.

CODE 1: DIRECT MEDICAL AND SCHOOL HEALTH-RELATED SERVICES - Providing direct medical care, counseling and therapeutic services or treatment.

CODE 2: NON-MEDICAID, EDUCATIONAL AND OTHER SOCIAL ACTIVITIES - Activities that are not health or Medicaid related, such as education and teaching, employment, job training, and social activities.

CODE 3: OUTREACH TO MEDICAID PROGRAM - Informing eligible or potentially eligible individuals about Medicaid and how to access it, describing the range of services covered under Medicaid and how to obtain Medicaid preventive services.

CODE 4: OUTREACH TO NON-MEDICAID PROGRAMS - Informing eligible or potentially eligible individuals about non-Medicaid, social, vocational, and educational programs and how to access them, describing the range of benefits covered under these non-Medicaid, social, vocational, and educational programs and how to obtain them.

CODE 5: FACILITATING AN APPLICATION FOR MEDICAID - Assisting an individual or family in becoming eligible for Medicaid.

CODE 6: FACILITATING AN APPLICATION FOR NON-MEDICAID PROGRAMS - Assisting an individual or family in becoming eligible for non-Medicaid programs.

CODE 7: REFERRAL, COORDINATION AND MONITORING OF MEDICAL SERVICES - Making referrals for and coordinating and/or monitoring the delivery of medical/mental health services. Linking the individual and family with Medicaid service providers to plan, carry out and maintain a health service plan.

CODE 8: REFERRAL, COORDINATION AND MONITORING OF NON-MEDICAL SERVICES - Making referrals for and coordinating and/or monitoring the delivery of non-medical, such as educational, vocational and other social services. Linking the individual and family with educational, vocational or other social service providers to plan, carry out and maintain an education service plan.

CODE 9: CLIENT ASSISTANCE TO ACCESS MEDICAID SERVICES - Arranging for specific support provisions, such as transportation or translation assistance, which are necessary for an individual or family to access Medicaid services.

CODE 10: CLIENT ASSISTANCE TO ACCESS NON-MEDICAID SERVICES - Arranging for specific support provisions, such as transportation or translation assistance, which are necessary for an individual or family to access non-Medicaid educational and social services.

CODE 11: PROGRAM PLANNING, POLICY DEVELOPMENT AND INTERAGENCY COORDINATION OF MEDICAL SERVICES - Development of strategies to improve the coordination and delivery of medical/mental health services to school age children.

CODE 12: PROGRAM PLANNING, POLICY DEVELOPMENT AND INTERAGENCY COORDINATION OF NON-MEDICAL SERVICES - Development of strategies to improve the coordination and delivery of non-health related education services to school age children.

CODE 13: GENERAL ADMINISTRATION - General administration activities, breaks and lunch.

CODE 14: NOT SCHEDULED TO WORK - Not scheduled to be at work.

This page can be copied to the back of the random moment observation form.