

COMMONWEALTH OF MASSACHUSETTS

Executive Office of Health and Human Services
MASSHEALTH SCHOOL-BASED MEDICAID PROGRAM

LEA RMTS Coordinator Guide for Random Moment Time Study (RMTS)

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Executive Summary

The School-Based Medicaid Program (SBMP) offers local education agencies (LEAs) an opportunity to receive federal dollars to offset costs associated with providing certain Medicaid-covered services in a school setting.

Medicaid is a joint state-federal program that offers reimbursement for both the provision of covered services and for the costs of administrative activities that support the Medicaid program. The Executive Office of Health and Human Services (EOHHS) is the single state agency responsible for the operation of the Medicaid program in Massachusetts (MassHealth). The University of Massachusetts Medical School (UMMS) administers the SBMP on behalf of, and in conjunction with, MassHealth.

MassHealth uses a method called the Random Moment Time Study (RMTS) to quantify the time that staff spend doing reimbursable activities. Participation in the RMTS is required under the SBMP Provider Contract as a condition for reimbursement. All employed and contracted practitioners for whom the LEA wishes to seek Direct Service or Administrative Activity reimbursement must be included in the RMTS. LEAs receive Administrative reimbursement for all staff in the RMTS and receive Direct Service reimbursement for staff in a Direct Service pool.

LEAs are required to designate an individual from the LEA as the primary contact for all matters related to the operations of the RMTS (RMTS Coordinator). LEAs may also designate another LEA employee or contracted billing agent to assist with RMTS operations. Regardless of designation to an outside entity, as with all LEA contractual obligations, the LEA is ultimately responsible for ensuring compliance with the RMTS, as well as all other program requirements and deadlines as outlined in this guide.

The RMTS is a factor that impacts revenue for each LEA and the entire Commonwealth. Designated RMTS Coordinators and other staff involved with the administration of the RMTS should carefully review this guide to gain an understanding of LEA requirements and to ensure reimbursable costs are accurately captured through the RMTS.

This guide provides an overview of the key components of the RMTS. For step-by-step instructions, please refer to the Step-by-Step Manual: RMTS Participant Management, and the Step-by-Step Manual: RMTS Work Schedules. Both step-by-step guides must be used in conjunction with this guide.

Section 1:

Introduction

1.1 School-Based Medicaid Program (SBMP) Overview

The school setting provides a unique opportunity for local communities to partner with MassHealth to enroll eligible children, and to assist enrolled children in accessing their benefits. Federal matching funds (called Federal Financial Participation or FFP) are available to contracted LEAs through participation in the SBMP. Final reimbursement for SBMP direct services and administrative activities is based on Medicaid-allowable actual incurred costs.

Massachusetts is authorized to claim federal dollars for direct services and administrative activities through its State Plan Amendment, which is approved by the Centers for Medicare & Medicaid Services (CMS).

1.2 How to Use School-Based Medicaid Guides

This guide provides an overview of the RMTS, and is designed for LEA RMTS Coordinators, other LEA staff, and their LEA SBMP-contracted billing agents. For a general understanding of the SBMP, including Direct Service Claiming and Administrative Activity Claiming, please refer to the SBMP Program Guide for Local Education Agencies, available on the <u>SBMP Resource Center</u>.

Other guides, which are available on the Resource Center, are referenced throughout this guide. This guide must be used in conjunction with these detailed step-by-step instruction guides, and can be obtained by emailing schoolbasedclaiming@umassmed.edu.

- 1. Step-by-Step Manual: RMTS Participant Management; and
- 2. Step-by-Step Manual: RMTS Work Schedules.

The RMTS captures reimbursable time, which means it is crucial that RMTS Coordinators and participants understand reimbursable services and requirements for reimbursement. Accordingly, RMTS Coordinators must read the SBMP Direct Service Claiming Guide, as well all the executive summaries of other guides available on the SBMP Resource Center.

Because this guide will be updated on an ongoing basis, it is critical to visit the <u>SBMP Program</u> website for the most up-to-date information. All program bulletins, training materials, and additional resources must be followed and are consistent with the scope of the School-Based Medicaid Program Provider Contract. Materials referenced in this guide, and their availability in the Resource Center, are listed in Appendix C. The SBMP distributes new and updated materials after they are posted online. To receive notification of new materials and other important communications, LEAs must update contacts by filling out the School District Contact Information Form on the <u>SBMP Resource Center</u>.

1.3 Applicable Laws, Regulations, and Published Guidance

Any LEA or subcontractor participating in the SBMP must comply with all applicable federal and state laws, regulations, published guidance, and the terms of the Provider Contract, including

- Section 1902(a) of the Social Security Act
- Code of Federal Regulation (CFR) Titles 42 and 45
- OMB Uniform Administrative Requirements, Cost Principle, and Audit Requirements for Federal Awards (2 CFR 200)
- OMB Circular A-133 Audits of States, Local Governments and Non-Profit Organizations
- MassHealth School-Based Medicaid Program Bulletins
- MassHealth School-Based Medicaid Program Instruction Guides
- Massachusetts School-Based Medicaid Program Provider Contract

LEAs may not claim reimbursement and staff must be excluded from the RMTS in any of the following situations.

- 100 percent of the staff person's salary is paid through a federal grant or from other federal funds [including Individuals with Disabilities Education Act (IDEA) funds]. As a reminder, this includes any state or local funds that were a required match to receive the federal grant, which are considered part of the federal funding percentage related to staff salary;
- Medicaid billing vendors who are paid on a contingency fee (percent of claim) basis; or
- Any staff member whose salary is included in the LEA's Indirect Cost Rate. See <u>School-Based Medicaid</u>
 <u>Provider Bulletin 28</u> for additional details and excluded account object codes.

Section 2:

RMTS Overview & LEA Requirements

2.1 Overview

The SBMP reimburses LEAs based on actual costs incurred for reimbursable services and administrative activities through the Direct Service Claiming (DSC) and Administrative Activity Claiming (AAC) Programs. To quantify the proportion of reimbursable staff time, for the purpose of allocating staffing costs, a method called the Random Moment Time Study (RMTS) is used.

The RMTS samples LEA staff time at random moments throughout the school year. Staff from all participating LEAs in the Commonwealth are put into subgroups based on job function. These subgroups are called RMTS pools. Respondents in each RMTS pool answer questions to indicate what they were doing at randomly assigned moments (see Figure 1 for the list of the RMTS pools). A specified number of moments are randomly assigned across each RMTS pool. The methodology then determines a statistically valid statewide proportion of reimbursable time for each RMTS pool.

Figure 1: RMTS Pools

RMTS Pools

- 1. Mental/Behavioral/Health Services*
- 2. Therapy Services*
- 3. Medical Services*
- 4. Administrative Only
- * Direct Service Pools. LEAs can claim costs associated with both direct service and Medicaid administrative activities provided by staff in these pools.

The results of the RMTS are used to allocate LEA-specific costs in both DSC and AAC reimbursement. Therefore, all employed and contracted practitioners for whom the LEA wishes to seek reimbursement must be included in the RMTS. LEAs may claim administrative costs for staff in any RMTS pool on the quarterly AAC cost report. Additionally, LEAs may claim for DSC for staff in the Direct Service pools on the annual DSC cost report.

The RMTS process is designed to be as quick and unobtrusive to participants as possible and is completed online using the statewide RMTS system. Each response is expected to take roughly five minutes. The RMTS is completed in the RMTS Moments web application.

Participants are asked the following five questions.

- 1. What type/category of activity were you doing?
- 2. What were you doing more specifically?
 - a. What were you doing more specifically— what was the primary focus of your activity?
 - b. What were you doing more specifically— if health related, what type of service or treatment?

- 3. Where were you?
- 4. Who were you working or interacting with in performance of this activity?
- 5. Why were you performing this activity?
 - a. Why were you performing this activity— was it pursuant to an IEP?
 - b. Why were you performing this activity—Was the service needed to screen, identify, diagnose, prevent, treat, manage or improve a student's physical or behavioral health and/or development?
 - c. Why were you performing this activity— were you acting within the scope of your clinical license?

2.2 RMTS Impact on Reimbursement

The results of the RMTS are used to allocate LEA-specific costs in both DSC and AAC reimbursement. Figure 2 illustrates how the percent of reimbursable time is applied as an allocation factor to LEA-reported allowable costs in the calculation of the gross Medicaid reimbursable amount.

Figure 2: Calculation to determine Gross Medicaid Reimbursable Amount for Administrative Claims and Cost Reports

[Allowable Costs for Covered Services] times [RMTS Results (statewide)] times [Medicaid Penetration Factor (LEA Specific)] equals [Gross Medicaid Reimbursable Amount]

RMTS results are calculated statewide in each RMTS pool. This means the percent of reimbursable time identified for the statewide pool is impacted by every LEA, and the accuracy with RMTS administration and participant responses impacts statewide revenue.

2.3 LEA Requirements

In addition to the requirements listed in Section 1.3, LEAs must comply with all roles, responsibilities, limitations, restrictions, timelines, deadlines, and documentation requirements described in the Provider Contract, program instruction guides, training materials, and other documentation provided by MassHealth and UMMS. This includes designating an LEA RMTS Coordinator. If a billing vendor is used, LEAs may designate a billing vendor contact in addition to the LEA RMTS Coordinator.

Ultimately, the LEA is contractually, legally, and financially responsible for the oversight and compliant participation in the RMTS.

2.3.1 RMTS Participation Requirements

Participation is crucial to the accuracy of the RMTS results. A statewide compliance rate of 85 percent per RMTS pool per quarter has been set by CMS. If the statewide participation rate is not met, a statewide penalty will be applied, and all unanswered moments will be considered non-reimbursable. This will negatively impact statewide federal reimbursement for both AAC and DSC. Each RMTS Coordinator is required to monitor RMTS participant compliance for their respective LEAs.

2.3.2 Non-Compliance and Corrective Action

If an LEA has a response rate lower than 85 percent in any RMTS pool in any quarter, the superintendent receives a notification letter. If the statewide response rate for any RMTS pool does not reach 85 percent in a given quarter, LEAs will be unable to claim reimbursement for that quarter if: 1) that LEA failed to achieve an 85 percent response rate in the same RMTS pool within the last two years; and 2) that LEA's response rate was lower than 85 percent in that quarter. The Executive Office of Health and Human Services (EOHHS) reserves the right to grant exceptions to this rule on claiming prohibitions for individual LEAs in instances of extreme unforeseen circumstances, such as a natural disaster, on a case-by-case basis.

Additionally, failure to comply with SBMP RMTS requirements may result in implementation of a corrective action plan, the inability to claim expenditures for federal reimbursement, or other financial consequences, per the Provider Contract section 4.1(G). Requirements include, but are not limited to

- Meeting established deadlines;
- Maintaining an accurate and appropriate list of RMTS participants;
- Overseeing and monitoring staff participating in the RMTS to ensure compliance by LEA;
- Achieving the required 85 percent LEA-participation-compliance percentage;
- Responding to UMMS or MassHealth quality assurance inquiries;
- Maintaining reasonably accurate RMTS participant work schedules;
- Monitoring and updating staff license information (where required) for participation in Direct Service reimbursement pools, including updating expired license information;
- Monitoring and ensuring compliance with RMTS participant training and supporting documentation requirements; and
- Complying with the requirements outlined in this instruction guide.

2.4 Designating an LEA RMTS Coordinator

The LEA RMTS Coordinator oversees compliance with all RMTS requirements on behalf of the LEA. LEAs may assign tasks related to RMTS duties to a subcontractor or to multiple LEA staff, but the ultimate responsibility for the LEA's compliance with all RMTS responsibilities and requirements must be designated to the single LEA RMTS Coordinator. To update this information as required, complete the School-Based Medicaid Program: District Contact Information Form on the <u>SBMP Resource Center</u>. The completed and signed form should be scanned and sent to UMMS via email to schoolbasedclaiming@ umassmed.edu.

2.5 RMTS Supporting Documentation Requirements

Providers must comply with all records requirements in the Provider Contract, including retaining records to support activities recorded in response to the RMTS for at least six years after the date of submission of the administrative claim or cost report which is supported by such documentation. *Effective October 1, 2021*, the RMTS system has been updated to gather a written narrative from the RMTS participants when documenting their moment responses. The written narrative will supplement their responses and provide additional detail of their work activity. The LEA RMTS Coordinator must ensure that backup documentation is retrievable by the LEA in the event of an audit or review during the record retention period, which means they must train their participants. Backup documentation must include the level of detail necessary to support the participant's narrative. Similarly, the LEA RMTS Coordinator must coordinate both where backup documentation should be stored and also other recordkeeping requirements. SBMP providers are responsible to keep up to date with all requirements of the MassHealth Provider Contract and MassHealth SBMP bulletins, rules, and regulations.

Section 3:

LEA RMTS Coordinator Role & Responsibilities

3.1 Overview

This section presents an overview of the RMTS process to help RMTS Coordinators fulfill their responsibilities as they administer the RMTS. This section also describes what actions are needed by the LEA RMTS Coordinator to ensure compliant and successful participation.

3.2 RMTS Management Deadlines

The RMTS is conducted quarterly each state fiscal year.

RMTS work schedules must be entered at the beginning of each fiscal year no later than the first Friday of June. Quarterly edits and updates to both work schedules and certified RMTS participant information must be completed no later than the first Friday of the month preceding the start of each quarter. The quarterly RMTS due dates are shown in Figure 3.

Figure 3: RMTS Quarterly Deadlines:

Time Study Quarter	RMTS Admin Task Deadline
Q1: July 1-September 30	First Friday of June
Q2: October 1–December 31	First Friday of September
Q3: January 1–March 31	First Friday of December
Q4: April 1–June 30	First Friday of March

Before the beginning of each fiscal year, MassHealth posts all important program deadlines, including RMTS deadlines, on the <u>SBMP Resource Center</u>. For the current fiscal year deadlines, please see SBMP Schedule SFY20XX.

3.3 Understanding the RMTS Process

Understanding the RMTS quarterly cycle, as well as the activities that happen during different stages of the RMTS process, will help RMTS Coordinators manage their time and keep track of deadlines. These steps are discussed in greater detail in upcoming sections of this guide. Section references are indicated in the following outline.

Annually – Starting a New Fiscal Year (Section 3.4)

- RMTS Coordinators enter school district calendars and staff work schedule information for each fiscal year.
- LEAs provide the updated RMTS Systems Requirements document to the LEA IT department to ensure that staff will be able to receive RMTS emails and access the RMTS website successfully.
- LEAs provide training to new and returning RMTS participants.

Quarterly – Before the Quarter Starts (<u>Section 3.5</u>)

- LEAs identify staff for whom they will seek direct service and/or administrative reimbursement for the quarter.
- LEA RMTS Coordinators complete and certify participant lists, including identifying correct staff for each pool, providing required demographic information, and assigning staff to accurate work schedules to ensure that staff are selected for moments when they are scheduled to work.
- RMTS participants are notified of their inclusion in the time study and given necessary information for participation.
- New RMTS participants and returning participants who have not completed RMTS training in more than one year must complete the online training module on the RMTS website.
- The RMTS system randomly selects moments for the quarter.

• During the Quarter (Section 3.6)

- At the time of the preselected moment, RMTS participants receive email notification that they have a moment to respond to in the RMTS system.
- If necessary, RMTS participants are reminded to answer their moment, and their supervisor and the LEA RMTS Coordinator are copied to remind them of the RMTS deadline.
- RMTS participants access the RMTS website and submit accurate responses to selected moments within the allowed two-school-day grace period.
- If necessary, SBMP staff will contact participants for clarification of RMTS responses.

After the Quarter (Section 3.7)

- o If necessary, RMTS Coordinators submit online Change of Status (COS) requests for unforeseen circumstances impacting staff's ability to respond to the time study (such as terminations or leaves of absence). These requests may be submitted at any time during the quarter, but are due no later than five business days after the end of the quarter.
- RMTS responses are used to calculate RMTS pool statewide percentages of time spent doing reimbursable activities (RMTS results).

3.4 Tasks to be Completed Annually, at the Beginning of the Fiscal Year

3.4.1 RMTS Work Schedule Requirements

The RMTS methodology depends on sampling all paid time and only paid time. RMTS Coordinators must carefully review the working days and hours of staff included in the RMTS to ensure that all paid time is captured through the accurate assignment of staff to RMTS Work Schedules, including work hours that occur when no students are present. This helps improve accuracy, as required by CMS, and avoid financial penalties. Similarly, unpaid time (which may include scheduled unpaid break or lunch time during the school day) should be excluded from schedules.

Staff should be grouped into common work schedules based on sharing the same scheduled days of the week and start and end times per working day. The RMTS system allows flexibility to create individual work schedules to accommodate staff with complex schedules, including part-time staff and staff with varied hours per day, rotating schedules that vary by week, and split shifts. LEA RMTS Coordinators must adhere to the following requirements when creating and maintaining RMTS Work Schedules.

- All scheduled working time must be available to be sampled, including days or hours when students are not in school; all working hours in all buildings and travel time between buildings; and time scheduled to work during school vacations or holidays, as applicable.
- Contractors should be entered with work schedules that reflect only their working hours in the LEA.
- Staff members who hold more than one job at the LEA should be associated with an RMTS work schedule that reflects only their time spent performing reimbursable activities. For example, a part-time librarian who is also a part-time occupational therapy assistant should be associated only with the occupational therapy work schedule. This must be based on a reasonable estimate of scheduled hours related to the staff member's different duties.
- Staff paid a stipend to provide supervision for extracurricular activities (such as an athletic coach or club
 advisor, etc.) should not be available for RMTS sampling when performing those duties, to the extent
 that this schedule is known. For example, after-school hours spent coaching would not be included in the
 RMTS schedule; but an unpredicted club or athletic team meeting or event during regular school hours
 cannot be predicted and therefore cannot be accommodated in the work schedules.

 Staff who take a predictably scheduled unpaid lunch break should be scheduled accordingly, with a split shift in their work schedule to prevent them from being selected for a random moment during unpaid, non-working time.

RMTS Coordinators must do the following.

- 1. At the beginning of each fiscal year, no later than the first Friday of June, enter the annual school district calendar and work schedule information, indicating the days of the week and times of the day when staff are scheduled to work;
- 2. Create additional schedules quarterly and make updates as necessary; and
- 3. No later than the first Friday of March, adjust any changes to the last day of school that may have occurred because of snow days or other school closures in all impacted work schedules.

For detailed instructions on entering and updating work schedules, please refer to the Step-by-Step Manual: RMTS Work Schedules available on the SBMP Resource Center.

3.4.2 RMTS System Requirements

The RMTS System Requirements document is updated annually. As a web-based system dependent on email notification to RMTS participants, it is critical for the RMTS System Requirements document to be shared with LEA IT staff to ensure that all participants have access to computers with internet access and updated web browsers, and that emails are not erroneously marked as spam or junk mail.

3.4.3 LEA Training for Time Study Participants

LEA RMTS Coordinators are required to provide training to all new and returning RMTS participants at least annually. RMTS participant trainings should have two components: (1) The SBMP-provided, federally required online training video (discussed in the next section), which gives an overview of the RMTS, and takes participants through the mechanics of responding to moments; and (2) LEA-specific supplemental training.

Ensuring that staff are adequately trained in their role in the RMTS leads to better, more-accurate answers, which leads to more-accurate RMTS percentages and can result in more revenue for all participating LEAs across the Commonwealth.

3.4.4 Online Training for Time Study Participants and Training Report Monitoring

The required online training video is available for RMTS Coordinators at www.chcf.net/chcfweb/ and for RMTS participants within the RMTS Moments application (https://cbe-rmts.chcf-umms.org/). Participants must complete the RMTS Participant online training at least once annually. The training provides an overview of the RMTS and takes participants through the mechanics of responding to a moment. Reports are available in the RMTS system to assist RMTS Coordinators in ensuring that participants have met the training requirement.

The RMTS system tracks each participant's training status. Participants out of compliance with the training requirement will be prompted to complete the training upon login. RMTS Coordinators should monitor the Online Training Management reports and follow up with participants to ensure that they are properly trained.

Real-time training reports are available for RMTS Coordinators to monitor LEA staff compliance with the training requirement. These reports list all participants who have and have not viewed the online training module and are available to RMTS Coordinators at www.chcf.net/chcfweb/. Sample reports can be found in Appendix E.

Tip: RMTS Coordinators can use the Training Documents Viewed Report in the RMTS Moments web application to anticipate when staff members will be due to complete the training annually by referencing the date when they last viewed the training.

3.4.5 LEA-Supplemental Training for Time Study Participants

LEAs, or schools within LEAs, may have different operational processes, supervision structures, and RMTS Coordinator division of labor. These differences necessitate LEA-led supplemental RMTS trainings.

LEA-supplemental RMTS training must do the following.

- 1. Explain what the RMTS is and why it is important to complete, including fiscal impact to the LEA and why each particular staff member is included in the time study;
- 2. Explain the LEA's expectations, including LEA oversight and staff compliance expectations and consequences;
- 3. Inform staff who are new to the time study about their required participation in the RMTS;
- 4. Inform staff about the required online training module and the need to complete the training before answering any random moments, and annually thereafter;
- 5. Provide staff with appropriate LEA resources for troubleshooting any problems or answering questions about the Medicaid program;
- 6. Instruct participants what to do if they return to work after being out for several days and discover that they have missed a random moment;
- 7. Discuss whether participants can access school email from their personal cell phone (so they can take advantage of the option to respond from their mobile device);
- 8. Indicate how participants without a dedicated computer at the school will be notified and respond to moments. This includes questions such as, "What is the school's expectation for how frequently I should check my email?" and "Where should I go to check my email and/or respond to RMTS moments?"
- 9. Specify where participants must save or submit RMTS moment supporting documentation;
- 10. Identify the staff in participants' building that they can go to if they have questions or need assistance related to the RMTS;
- 11. Describe LEA policy around copying "supervisors" on RMTS moments; and
- 12. Address any other topics participants need to understand to be fully compliant, including responding to moments timely and accurately.

3.5 Tasks to be Completed Before the Start of Each Quarter

3.5.1. Identifying Appropriate Staff to Include in the RMTS

LEAs must accurately identify partial federal reimbursement-eligible staff and include those staff in the RMTS (as a reminder, fully federal reimbursement eligible staff cannot be claimed in the SBMP). Staff excluded from the RMTS cannot be claimed. RMTS participant lists should be reviewed and updated quarterly to reflect any changes in workload or duties that would impact whether staff will be performing reimbursable activities during the quarter.

Remember, LEAs claim costs associated with **both** DSC and AAC provided by staff in the RMTS. LEAs must include staff in the RMTS as of the earliest possible RMTS quarter following a staff member's date of hire or transfer to a qualified position. The following process should be used to identify staff to include in the RMTS.

- 1. For the Direct Service pools, identify staff who are direct medical service providers who meet the Medicaid licensing qualifications for their specialty area, and who are *reasonably expected to provide Medicaid reimbursable services in the upcoming RMTS quarter*. LEA-based practitioners who are not included in a Direct Service pool may not submit claims, and the LEA may not claim the staff's costs in the Annual Direct Service Cost Report.
 - Refer to the Local Education Agencies Covered Services and Qualified Practitioners list and to the SBMP Direct Service Claiming Guide on the <u>SBMP Resource Center</u> for additional details about the Direct Service program and for directions on Direct Service pool assignments.
- 2. Identify staff who perform Medicaid billing activities, including any tasks related to completing, submitting, tracking, or other recordkeeping directly for the purpose of submitting interim claims to the Medicaid Management Information System (MMIS). This may include LEA staff who work directly with contracted billing agents to accomplish Medicaid billing for the LEA. These staff members should be included in the Direct Service pool.
- 3. For the Administrative Only RMTS pool, identify staff who routinely perform at least one of the seven types of Medicaid administrative activities. Refer to the SBMP Administrative Activity Claiming Guide for additional details about the Administrative reimbursement program. Note that LEAs also receive administrative cost reimbursement for staff included in a Direct Service RMTS pool. The Administrative Only RMTS pool is designed to identify additional staff for whom the LEA is not claiming, or cannot claim, Direct Service reimbursement, but who perform reimbursable Medicaid administrative activities. Staff can be listed in only one RMTS pool.

The eight types of Medicaid administrative activities are described in detail in Appendix D and are outlined in this list.

- Outreach— Informing eligible or potentially eligible individuals and families about MassHealth and how to access it;
- Application assistance— Assisting individuals and families to apply for MassHealth;
- Participating in activities to develop strategies to improve coordination and/or the delivery of covered services, including when performing collaborative activities with other agencies regarding health-related services;

- Making referrals, coordinating, or monitoring the delivery of covered services;
- Assisting an individual to obtain MassHealth-covered transportation;
- Translation and interpretation services when required to access health-related services;
- Providing or receiving school staff training related to Medicaid topics: and
- Work activities in response to public health guidance.

3.5.2 Qualified Positions and Job Descriptions

The determination to include a staff member in the RMTS must be based on job *function*, not job title. The LEA RMTS Coordinator should *not* include staff members based solely on the job descriptions associated with the Direct Service RMTS pools.

By placing a staff member in an RMTS pool, an LEA is indicating that it intends to seek federal reimbursement through the SBMP for the portion of that staff member's actual costs that are attributable to the performance of Medicaid reimbursable administrative or direct services. Therefore, staff members who do not perform Medicaid reimbursable administrative or direct services are not allowed to be included; and doing so would negatively impact statewide revenue by reducing the amount of reimbursable time.

This is a list of helpful hints and examples.

- An LEA that employs or contracts with many actively state-licensed registered nurses may determine that some are providing services that meet all of the requirements for Direct Service reimbursement; some are only performing activities that are eligible for Administrative Activity reimbursement; and others do not perform any reimbursable activities. Accordingly, the LEAs should include the nurses in different RMTS pools based on how they spend their time and in accordance with program guidelines, while not including other nurses in any RMTS pools.
- RMTS participant lists are updated quarterly, so every quarter the participating staff should be reviewed carefully, and appropriate changes should be made, shown in the following examples.
- Several school nurses who had been included in the Administrative Only pool are expected to
 perform several of the covered Department of Public Health (DPH)— mandated grade-level screening
 services during the upcoming quarter. Consider moving those nurses to the Direct Service pool for
 the upcoming quarter only and follow up to make sure the nurses complete all required steps for
 submission of interim claims for those screenings.
- A qualified staff member who had previously not been trained on the LEA's service documentation
 process used to support Medicaid interim claiming has recently received such training and will start
 completing the service documentation going forward. The RMTS Coordinator moves that staff
 member to the appropriate Direct Service RMTS pool for the upcoming quarter.
- A staff member is reassigned to a new school building or grade level resulting in a complete change in the staff member's caseload, which will no longer include any MassHealth-eligible students. The RMTS Coordinator moves the practitioner to the Administrative Only RMTS pool.
- During the second quarter, the LEA has several health fairs and open house events planned where staff members will be doing a variety of Medicaid outreach activities for the community. Therefore, the RMTS Coordinator includes staff who will plan, prepare for, and conduct the outreach work at the event in the RMTS. This includes staff who otherwise would not have been expected to perform any reimbursable activities.

3.5.3. License Verification for Direct Service RMTS Pools

LEA staff may be considered for potential participation in a Direct Service RMTS pool only when specific license requirements are met. Refer to the Local Education Agencies Covered Services and Qualified Practitioners document on the SBMP Resource Center for a complete list of Direct Service practitioners and their corresponding licensure requirements.

When including a staff member in any of the Direct Service RMTS pools when there are specific license restrictions, the LEA RMTS Coordinator must include the appropriate active license information for each staff member. This includes the state license number, license type, and license expiration date.

Staff found to have an inactive or expired license or whose license information is invalid or cannot be verified will be required to be removed from the Direct Service RMTS pools, and their associated costs will not be claimable.

3.5.4 Certification of Quarterly RMTS Participant Information

The LEA RMTS Coordinator is responsible for the accurate and timely submission and certification of all RMTS participant information that is entered and maintained on the RMTS website. For submission deadlines and detailed instructions on how to use the RMTS system, please refer to the SBMP Schedule SFY20XX, Step-by-Step Manual: RMTS Participant Management, and the Step-by-Step Manual: RMTS Work Schedules available on the SBMP Resource Center.

3.5.5 RMTS Participant Notification

Before the start of the first RMTS quarter for a new fiscal year, all new and returning RMTS participants will receive an email from the system that includes an RMTS website link, login information, and instructions to complete the required online training module. Approximately seven to 15 days before the start of each subsequent quarter, the RMTS system will send email notifications with this information to new RMTS participants only. RMTS Coordinators should alert their staff of these expected email notifications and instruct them to log in, set their personal password, and take the required training in case they are selected to respond to a random moment.

Accordingly, RMTS Coordinators must do the following.

- 1. Ensure that all email addresses provided for participants are accurate, and respond timely to any UMMS notifications of undeliverable email issues;
- Ensure that email notifications are getting through LEA network firewalls and reaching the intended recipients;
- 3. Allow the participants time to troubleshoot any technical difficulties they have accessing the website; and
- 4. Ensure that participants have completed SBMP- and LEA-specific RMTS training before the beginning of the quarter to ensure that they are prepared before they are selected to respond to a moment.

3.5.6 RMTS Moment Generation

Approximately seven-to-10 days before the start of each RMTS quarter, UMMS generates the statistically valid random sample of moments for each of the statewide RMTS pools. After moment generation, RMTS

information (including participant information and work schedules) cannot be changed. The only exception is that participant and "supervisor" email addresses may be changed at any time. RMTS Coordinators should maintain accuracy throughout the quarter to ensure RMTS notification and moment reminder emails are received.

Any changes other than to email addresses that RMTS Coordinators make after moment generation will be effective the following quarter. RMTS Coordinators are encouraged to access the system and make changes for the next quarter as soon as changes are known, allowing the updates to be effective for the next RMTS quarter. For example, as soon as a staff member renews a license, when a new staff member is hired, or a staff member changes job position, coordinators are encouraged to make those updates in the system.

A statistically valid sample of 2,401 moments per RMTS pool are required; therefore, the RMTS process includes a 30 percent oversample with 3,122 moments per pool for quarter 1 and a 20 percent oversample with 2,882 moments randomly selected per RMTS pool in quarters 2-4. These moments are shared across all LEAs participating in the RMTS statewide. Historically, the RMTS has included between 14,000 and 16,000 participants in total. Depending on the final number of participants in each statewide RMTS pool for the quarter, an individual participant may be chosen once, multiple times, or not at all. The potential infrequency of moments underscores the need for training (see Section 3.4.4 for more information).

3.6 During Each Quarter

3.6.1 RMTS Participant Moment Notifications

Participants receive notification of moments from the RMTS system at the time of the moment (approximately two to three minutes after the moment, depending on email delivery time).

Note: The Centers for Medicare & Medicaid Services (CMS) prohibits participants, LEA staff, and their designated billing agents from receiving advance notification of moments.

3.6.2 RMTS Participant & Supervisor Moment Reminders

Participants receive follow-up email reminders from the RMTS system if a response is not entered at the following intervals.

- Two hours after the moment
- 24 hours after the moment
- 12 hours before moment expiration date (with email notification to the RMTS Coordinator and any "supervisors")
- 4 hours before moment expiration date (with email notification to the RMTS Coordinator and any "supervisors")

Note: "Supervisors" may be copied on any of the reminder emails. To customize an email notification schedule, please contact schoolbasedclaiming@umassmed.edu for additional information.

3.6.3 RMTS Participants Certify Their Random Moment Activity

Participants log in to the RMTS system and respond to the questions within a grace period (two school district business days). Participants must electronically certify that their RMTS responses are accurate and complete. After two business days, the participant will not be able to complete or edit the moment.

This process is covered in greater depth in the forthcoming RMTS Participant Guide.

3.6.4 UMMS Activity Coding Process & Follow-up

UMMS reviews all moment responses where the participants typed a manual response to their moment or provided responses that were incomplete or inconsistent. Participants will be contacted as needed to clarify their responses. RMTS participants are required to respond to any follow-up inquiries related to their moments.

If no response is received to this request, UMMS will send up to two additional reminders, and "supervisors" will be copied on the reminder. Failure to respond to UMMS's follow-up questions will result in the moment being set to a Pending Expired status, which is counted as an unanswered moment for the purpose of calculating LEA participation compliance.

3.6.5 Change-of-Status Requirements

If a participant is no longer able or eligible to complete the time study (e.g., leaves the LEA temporarily or permanently, or changes jobs), the RMTS Coordinator must submit a Change of Status (COS) request online. For detailed instructions on how to submit an online COS Request using the RMTS Administration website, please refer to the Step-by-Step Manual: RMTS Participant Management. The following is a list of guidelines for assessing whether a COS is appropriate.

- If participants were working at the time of their moment, or at any time during the grace period, they should complete the moment. A COS request may not be submitted.
- If participants are selected for a random moment on a day when they were not scheduled to work due to a work schedule error made by the LEA, a COS request may not be submitted.
- For participants who have terminated their employment for any reason:
 - Submit a COS request for a "termination" indicating the effective date of termination of employment. A termination is appropriate to submit for any of the following reasons.
 - Participant resigns voluntarily or involuntarily;
 - Participant retires; or
 - Participant is a contractor who will no longer be contracted to work for the LEA.
 - If a participant is expected to end employment with the LEA effective as of the start of the next quarter, it is not necessary to submit a COS request as long as the RMTS Coordinator inactivates the participant when making quarterly updates.
- For participants who are still working for the LEA, but are no longer eligible to participate in the RMTS:
 - Submit a Change of Employment Status request indicating the effective date that the participant is no longer qualified to participate. A Change of Employment Status is appropriate to submit for any of the following reasons.
 - Participant is reassigned to a new job position within the LEA, and in the new job position the
 participant is not anticipated to perform any Medicaid- reimbursable activities;
 - Participant becomes 100 percent federally funded; or
 - Participant was previously in a position that required a clinical license for Medicaid reimbursement, but no longer has an active and current license.
- For participants who were not at work for several consecutive scheduled work days:
 - Submit a Leave of Absence request indicating the start and end dates when the participant was not working.
 - When reporting a Leave of Absence as paid time off, only LEA-incurred salary expenditures charged to accrued benefit time off, such as vacation or sick time, should be reported as paid time off.
 - When a staff member receives some pay during a leave that is funded through a short-term or long-term disability insurance plan or a workers' compensation plan, report this as unpaid time off.

- A leave of absence can be split between paid and unpaid time by indicating the start and end dates of paid time, as well as the start and end dates of unpaid time.
- If the paid or unpaid status of a leave of absence is not known, it may be submitted as "unknown" initially, but until the paid or unpaid periods are identified, the leave will not be processed.
- All COS requests related to leaves or terminations within a quarter must be reported no later than five business days following the end of that quarter.
- Any unanswered and expired moments that occurred while a participant was on leave or occurred after their date of termination or change in employment status will not be processed or excused without a COS request.
- If a request for a Leave of Absence is submitted, the participant will not be deactivated. The participant will be excused from answering moments during their leave, but will remain as an active participant in anticipation of their return to work. If the leave of absence becomes permanent, the COS form must be amended to remove the participant from the RMTS for the following quarter.
- If school is closed unexpectedly for an extended period of time that affects all participants, not just an individual participant, please email UMMS at schoolbasedclaiming@umassmed.edu for assistance.

3.7 After Each Quarter Closes

3.7.1 RMTS Percentages Calculation

After all quarterly moments have been answered and assigned appropriate activity codes, final participation compliance percentages are verified and the RMTS percentages are calculated.

3.7.2 RMTS Compliance Monitoring Reports & Tools

To assist RMTS Coordinators with monitoring the RMTS, there are several tools and reports available online at any time. These tools are designed to help monitor compliance, both while moments are out for response, and on an ongoing basis to inform training at the LEA and individual participant levels. Sample reports appear in Appendix E.

The following is a list of available tools.

• Tool #1: RMTS "supervisors" option

Each RMTS participant can be associated with up to three "supervisors" to ensure that the participant completes assigned random moments. The RMTS Coordinator indicates these individuals by including their email addresses in the RMTS participant list to correspond to staff whom they will be following up with. These "supervisors" do not need to have actual supervisory authority over the staff; rather, they are intended to be individuals who work in the same building or department as the RMTS participant who will take responsibility for following up with the participant regarding unanswered moments. The "supervisors" will be copied on the last two "late" email reminders when moments haven't been answered.

• Tool #2: RMTS Coordinator copied on late reminder emails

The RMTS Coordinator designee(s) identified by the LEA on the SBMP Authorized Designee Information Form is automatically copied on the last two "late" reminder emails to participants.

• Tool #3: RMTS Incomplete Moments with Supervisors Report

This report lists all incomplete (unanswered) moments for the quarter, and provides the participant name and email address, the date and time of the moment, the date and time when the moment expires, and the email addresses of supervisors listed for the participant.

RMTS Coordinators are encouraged to sort the report by supervisor to quickly provide a list of participants requiring follow-up to their respective supervisors or to follow up with the participants directly. Moments that are "incomplete" can still be answered before they expire. Moments that are "incomplete expired" can no longer be answered, but should be reviewed by the RMTS Coordinator in case a Change of Status request is appropriate or participant training is indicated.

• Tool #4: RMTS Participation Compliance Status Report

This report provides an overview of the participation compliance status for the LEA in all RMTS pools at any point during the quarter.

• Tool #5: RMTS Participant Moments Completed Report

This report lists all completed moments for the quarter, including information about each staff member, the date and time of the staff member's moment, and the current status of the moment.

- Status terms used in the RMTS include the following.
 - Incomplete: The RMTS participant has not answered the questions and the grace period has not ended. The participant can still answer the questions.
 - Incomplete Expired: The RMTS participant has not answered the questions, and the grace period has expired.
 - Manual Incomplete: The RMTS participant has answered the questions, and a UMMS coder will
 review the answers.
 - Automapped: The RMTS participant has answered the questions, and the system has assigned an activity code. The moment is complete.
 - Pending 1, 2, & 3: The UMMS coder has reviewed the RMTS participant's answers, but has asked the participant for additional information to code the response accurately.
 - Pending Expired: The UMMS coder has asked the participant for additional information on three separate occasions, and no response was received. The grace period to respond has expired.
 - First Approval: A UMMS coder has reviewed the RMTS participant's answers and assigned an
 activity code to the moment, and a second UMMS coder will review the assigned code.
 - Approved: The second UMMS coder has reviewed the RMTS participant's answers, and approved the activity code assigned by the first coder.
 - Not Paid Time: The RMTS participant has indicated that they were not scheduled to work at the time of their moment.

Section 4:

LEA RMTS Coordinator Best Practices

Based on feedback from LEAs who have participated in the RMTS since 2009, the following are considered best practices for managing and monitoring a successful and compliant RMTS. For additional information and support (or to share ideas about what is working well for you), please contact the UMMS Help Desk at schoolbasedclaiming@umassmed.edu or (800) 535-6741.

Best Practice #1: Figure out what works for your LEA.

Each LEA has a different structure and size. Some LEAs are large with tens or hundreds of sites. Others are a single school. Some LEAs work with a billing vendor to assist with RMTS operations and billing, others work with a vendor only for billing, and others do everything in-house.

Regardless of your LEA's unique setup, it is critical to identify how all RMTS-related tasks will be managed. The person who monitors interim billing may be different (or at a different site or work for a vendor) from the person who checks the Human Resources (HR) system to update participant lists for hirings and departures. It is imperative to identify what works for your LEA and make sure that a clear agreed-upon RMTS process, which accounts for all the moving parts, is followed.

Ultimately, the LEAs are responsible for ensuring that RMTS and all program requirements are met, so checks should be put in place to make sure no RMTS tasks are overlooked. LEAs have also found that debriefing after SBMP training to connect training materials to practices has been helpful.

Best Practice #2: Enlist building-level or department-level support.

RMTS Coordinators are not always physically located in the same building with all staff participating in the RMTS. Therefore, LEAs can greatly benefit from the support of designated building- or department-level SBMP resource staff. These individuals can be used as "first responders" for staff questions or training needs, for following up with staff who haven't answered moments, and for communicating personnel changes and leave time to the RMTS Coordinator. They also help break up the large task of managing moments, participant lists, and work schedules into smaller tasks at the building or department level.

Best Practice #3: Partner with business office, payroll, and human resources staff.

LEA RMTS Coordinators who have support from the business office, payroll staff, and HR staff can build internal processes to ensure that staffing changes are communicated to RMTS Coordinators. This supports the requirement to maintain accurate RMTS participant information and ensure updates are timely.

RMTS Coordinators need to know information about staff who are participating in the RMTS, such as: full-time employee (FTE) status, federal funding status, license status, paid versus unpaid time off, and "split" duties/roles. Involving the business office staff from the beginning of the RMTS process and making sure that they are trained properly in the Medicaid program rules and requirements will also help ensure that financial data is reported accurately in claims and cost reports. These staff may also benefit from attending SBMP trainings and webinars.

Best Practice #4: Provide annual training for RMTS participants.

RMTS and Medicaid program training can be incorporated during professional development time, prior to extended school year, or at staff meetings early in the school year. Note that if the required RMTS online training video is used during a group training session, the RMTS Coordinator can send the list of trainees to the UMMS Help Desk so that the training can be recorded in the RMTS system for all those who participated.

Best Practice #5: Cross-check RMTS Direct Service pools to interim billing.

The Direct Service RMTS pools are intended to quantify the time of staff who participate in the Direct Service program. In general, all practitioners included in a Direct Service pool should submit claims for every quarter they are in that pool. Monitoring interim claiming, therefore, is a best practice to ensure accuracy of RMTS lists. For example, if a practitioner is not submitting interim claims, then they should not be included in a Direct Service pool because the expectation to submit claims is a requirement for inclusion in a Direct Service pool. Conversely, if a practitioner is providing a covered service that meets all requirements for reimbursement, except the practitioner is not in a Direct Service pool, then the RMTS Coordinator should consider including the practitioner in the appropriate Direct Service pool and then begin submitting interim claims for the practitioner's services.

Best Practice #6: Increase understanding of Medicaid administrative activities.

A full understanding of Medicaid administrative activities is essential for RMTS Coordinators to properly meet RMTS program requirements for staff participant inclusion. Including staff in the Administrative Only RMTS pool who spend very little-to-no time performing reimbursable activities negatively impacts statewide revenue. Please refer to the descriptions of these activities included in Appendix D, as well as to the Instruction Guide for Administrative Activity Claiming and other training materials and resources found on the SBMP Resource Center.

Best Practice #7: RMTS Coordinators should read and understand this guide and the detailed "how to" instructions found in the Step-by-Step guides.

RMTS Coordinators are responsible for the proper administration of the Medicaid program for the LEA and should utilize all resources available to them to increase their knowledge and understanding of the program. No single guide or FAQ or tip sheet is intended to be referenced in isolation. It is each RMTS Coordinator's responsibility to understand the program, use all resources available on the SBMP Resource Center, and contact the UMMS Help Desk as necessary.

Best Practice #8: Monitor federal grant funding changes.

Timeframes for various grant awards can vary, and each LEA might have different internal procedures for making final determination about allocating grant funds. Therefore, strong communication between the RMTS Coordinator and business office, or other personnel responsible for tracking grant funds, is important to ensure compliance with accurately reporting the percentage of all staff salary that is paid from federal funding sources. As a reminder, this includes any state or local funds that were a required match to receive the federal grant. These dollars should also be considered part of the federal funding percentage in RMTS participant information (and in administrative claims and the cost report).

Best Practice #9: Develop internal LEA quality assurance process for supporting documentation.

As indicated in <u>Section 2.5</u>, documentation for DSC and AAC activities must be maintained for at least six years. Developing a process to centralize this documentation so that it is available upon audit is strongly recommended. Training LEA staff to submit their supporting documentation for moments to a centralized designee has been a successful strategy employed by many LEAs. The RMTS system reports available to RMTS Coordinators can be used to track moments and to ensure that supporting documentation for those moments has been gathered and filed appropriately.

Appendix A:

Contact Information

For SBMP publications and other information, including where to find this and other guides, please visit

• www.mass.gov/masshealth/schools.

For questions about the program, contact the SBMP Help Desk at

- schoolbasedclaiming@umassmed.edu, or
- (800) 535-6741, M–F, 7:30 a.m.–7:30 p.m.

To enroll as a School-Based Medicaid provider, as well as for information about MMIS claims, please contact MassHealth Customer Service at

- providersupport@mahealth.net (for non-member-specific questions only), or
- (800) 841-2900, M-F, 8 a.m.-5 p.m.

For general MassHealth information, including regulations, please visit the MassHealth website at

www.mass.gov/masshealth.

Appendix B:

Commonly Used RMTS Terms

ABA – Applied Behavior Analysis; a service type covered for students with an autism spectrum diagnosis

AAC – Administrative Activity Claiming

CHIP – Children's Health Insurance Program

CMS – Centers for Medicare & Medicaid – the federal agency that gives MassHealth, including the School-Based Medicaid Program, the authority to operate and claim federal dollars

Cost Report – The annual submission of an LEA's actual incurred costs related to the provision of Medicaid Reimbursable Services, which determines the total Medicaid-allowable costs the LEA incurred that year

Covered Services – The SBMP covers direct medical services provided in the school setting, including speech, occupational, and physical therapies; psychological counseling; skilled nursing services; audiology services; personal care services; and ABA therapy services when all Medicaid-claiming requirements are met. Services for which there is a SBMP-corresponding procedure code are "Covered Services." When covered services are provided and meet the requirements for reimbursement, including medical necessity, they are referred to as "Reimbursable Services."

CPE – Certified Public Expenditure

DESE – Massachusetts Department of Elementary and Secondary Education

DSC – Direct Service Claiming

FERPA – The Family Educational Rights and Privacy Act

HIPAA – Health Insurance Portability and Accountability Act

IDEA - Individuals with Disabilities Education Act

IEP - Individualized Education Program

LEA – Local Education Agency

MassHealth – The jointly administered Medicaid and the Children's Health Insurance Program (CHIP) in Massachusetts

MMIS – Medicaid Management Information System

POSC – Provider Online Service Center

Reimbursable Service – A covered service that has been provided and that meets the requirements for reimbursement, including medical necessity

RMTS – Random Moment Time Study

SBMP – School-Based Medicaid Program

UMMS – University of Massachusetts Medical School; UMMS administers the School-Based Medicaid Program on behalf of MassHealth

Appendix C:

SBMP Guides and Other Resources

Please see the <u>SBMP Resource Center</u> for other SBMP publications. Documents available online as of the date of publication are indicated with an asterisk. The following documents were discussed in this guide.

- School-Based Medicaid Program Provider Contract*
- SBMP Program Guide for Local Education Agencies*
- Step-by-Step Manual: RMTS Participant Management
- Step-by-Step Manual: RMTS Work Schedules
- Direct Service Claiming Guide*
- Administrative Activity Claiming (AAC) Guide
- Instruction Guide for the Annual Direct Service Cost Report
- School-Based Medicaid Bulletin 28*
- School-Based Medicaid Program: District Authorized Designee Information Form*
- RMTS Systems Requirements*
- SBMP Schedule SFY20XX
- School-Based Medicaid Program: School District Contact Information*

Appendix D:

Medicaid Administrative Activities

Individuals included in the RMTS under the Administrative Only category should be staff members who are expected to perform Medicaid-related administrative activities but who do not qualify for participation in a Direct Services pool. Medicaid-related administrative activities must fall into one or more of the categories in the following list.

1. Medicaid Outreach

These are activities that inform eligible or potentially eligible individuals about Medicaid benefits and services and how to access them.

Examples include but are not limited to

- Providing a student's family with literature about the benefits and availability of EPSDT (Early and Periodic Screening Diagnosis and Treatment) programs or other Medicaid programs
- Informing students and families how to effectively access, use, and maintain participation in MassHealth resources
- 2. Facilitate/Assist in the Medicaid Application Process

These are activities that assist students or their families in applying for Medicaid. Examples include but are not limited to

- Talking with a family about the Medicaid eligibility process, including helping them complete the Medicaid application
- Gathering information from the family related to the Medicaid application process
- 3. Provider Networking/Program Planning/Interagency Coordination Medicaid-Related.

These are activities that are associated with developing strategies and procedures used to improve the coordination and delivery of Medicaid-covered services to students, and activities that coordinate with non-Medicaid programs to ensure an effective child health program.

Examples include but are not limited to

- Identifying gaps or duplications to improve the coordination and delivery of Medicaid-covered health services
- Working with agencies to improve the coordination and collaboration of Medicaid services they provide, including opportunities to expand access to those services
- Developing advisory or work groups of health professionals to provide consultation and advice regarding the delivery of health care services to school populations
- 4. Individual Care Planning, Monitoring, Coordination, and Referral Medicaid-Related.

These are activities in which staff are making referrals for, coordinating, or monitoring the delivery of Medicaid-covered services to specific students.

Examples include but are not limited to

- Collaborating with other health care providers to coordinate students' health services
- Arranging for Medicaid-covered medical, diagnostic, or treatment service as a result of a specifically identified medical condition
- Coordinating the completion of the prescribed services, termination of services, and the referral of the child to other Medicaid service providers for continuity of care
- Participating in a meeting/discussion to coordinate or review a student's needs for health-related services covered by Medicaid (other than an IEP/504 meeting)
- 5. Arrangement of Medicaid-covered Transportation.

These are activities in which staff help a student obtain Medicaid-covered transportation services. (Note: The provision of transportation is not included.)

Examples include but are not limited to

- Scheduling a student's transportation to a Medicaid-covered service appointment outside school
- Scheduling or coordinating transportation that is specially equipped or adapted to meet the needs of a student with a disability to attend school where Medicaid-covered services will be provided to the student
- 6. Arrangement of Translation/Interpretation Services Related to Medicaid Services.

These are activities in which staff arrange for or provide translation services related to Medicaid-covered services. (Note: The arrangement or provision of translation services at an IEP meeting or for any educational reason is not included.)

Examples include but are not limited to

- Arranging translation or interpretation services that help the student or family access and understand necessary health-related care or treatment
- 7. Providing or Receiving Training Related to Medicaid.

These are activities in which staff is involved in a training activity that improves the delivery of health-related services to students.

Examples include but are not limited to

- Providing or coordinating training that teaches or reinforces clinical best practices in patient care, such as training for school nurses on asthma management plans
- 8. Work Activities in Response to Public Health Guidance.

These are activities associated with federal or state public health guidance and initiatives, including but not limited to

- Developing, planning, or coordinating activities and programs in response to public health guidance
- Investigating, reporting, or monitoring communicable diseases in response to public health guidance
- Monitoring or surveilling activities, including contact tracing efforts or screening of students and staff in response to public health guidance
- Making referrals or coordinating medical examinations or services in response to public health guidance

Here is a list of key activities that are NOT reimbursable under the Medicaid Administrative Program.

- IEP meetings (attending, scheduling, preparing for, etc.)
- Writing/editing an IEP
- Obtaining parental consent
- Chairing an IEP meeting
- Educational/vocational/social services
- Discipline/general student supervision services
- Monitoring student attendance
- Activities that are an "integral component" of the delivery of a health service (such as planning and
 preparing to deliver a service or documenting service delivery notes). Medicaid billing activities are part
 of the Direct Service reimbursement portion of the Medicaid program. These activities are not
 reimbursable under the Administrative program.

Appendix E: RMTS Reports

RMTS Coordinators should monitor RMTS participant training and participation for compliance. This appendix contains five real-time reports to assist with this compliance monitoring, which are also available on the School-Based Claiming website.

Additional reports are available to help RMTS Coordinators with their responsibilities to update and maintain accurate RMTS participant lists and work schedules. Information about these additional reports are included in the Step-by-Step Manual: Participant Management and the Step-by-Step Manual: RMTS Work Schedules.

Training Reports

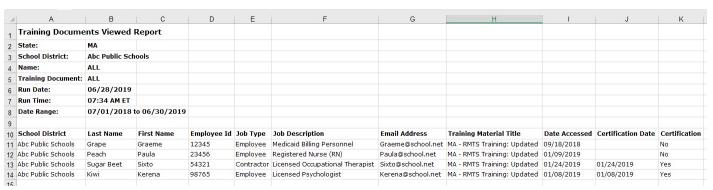
There are two reports available for monitoring whether LEA staff have viewed the online training video for RMTS participants. These include the following.

- Training Documents Viewed Report
- Training Documents Not Viewed Report

Training Documents Viewed Report

The Training Documents Viewed Report identifies LEA staff members who completed the required training during the date range requested. RMTS participants are required to certify the completion of training at least once per year; therefore, it is recommended that RMTS Coordinators use this report to identify when participants last completed training, and sort by "certification date" to identify staff who are due to recertify training. Staff email addresses are provided in the report to streamline follow-up.

Sample Report



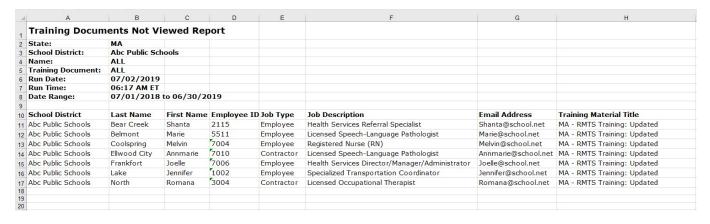
Notes:

- 1. Staff may be listed multiple times on the report if they accessed the training video multiple times within the selected date range.
- 2. Staff listed with a "date accessed" but a "certification" status of "No" have accessed the training video, but either failed to complete the training or may have viewed the training video but failed to certify that they had successfully completed the training. Staff must have certified to meet the requirement for annual training. Staff with a date accessed and no certification date should retake the training and certify.

Training Documents Not Viewed Report

The Training Documents Not Viewed Report identifies LEA staff members who were "active" during the date range requested, but who did not complete the required RMTS training during that period. RMTS Coordinators should run the report with a date range of one year to identify staff who are out of compliance with the training requirement.

Sample Report



RMTS Monitoring and Participation Reports

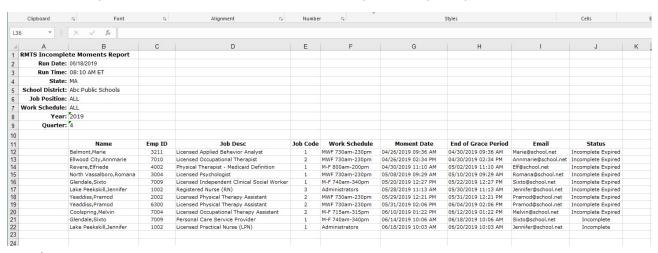
There are reports available for monitoring whether RMTS participants have answered their assigned moments. These include the following.

- Incomplete Moments Report
- Participation Compliance Status Report
- Participant Moments Completed Report

RMTS Incomplete Moments Report

The RMTS Incomplete Moments Report lists all moments for the selected quarter that were not answered by the participant. The "status" column indicates either

- Incomplete Expired—Moments can no longer be answered because the time limit allowed for a
 participant's response has been exceeded. RMTS Coordinators should review Incomplete Expired
 moment information to determine why the moments were not answered and either follow up with the
 participant to provide training or submit a Change of Status request if necessary.
- Incomplete—Moments can still be answered by the participant. Participant email addresses are provided on the report so that RMTS Coordinators can follow up with the participant.

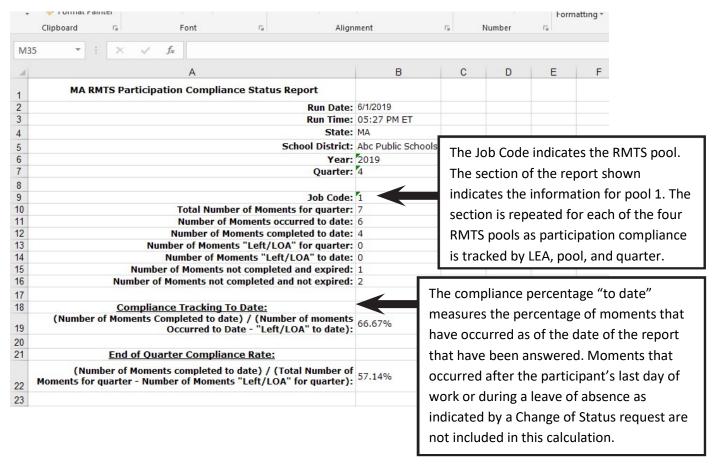


Sample Report

RMTS Participation Compliance Status Report

The RMTS Participation Compliance Status Report provides a current listing of the LEA's participation in the time study as of the date and time that the report is generated.

Sample Report: The report section shown in the following example is repeated for each of the RMTS pools.



The Job Code indicates the RMTS pool. The section of the report shown indicates the information for pool 1. The section is repeated for each of the four RMTS pools as participation compliance is tracked by LEA, pool, and quarter.

The compliance percentage "to date" measures the percentage of moments that have occurred as of the date of the report that have been answered. Moments that occurred after the participant's last day of work or during a leave of absence as indicated by a Change of Status request are not included in this calculation.

RMTS Participant Moments Completed Report

The RMTS Participation Moments Completed Report lists all moments assigned to LEA staff for the selected quarter that have been answered by participants.

Sample Report

