**MassHealth and**

**The Center for Health Care Financing**

**Municipal Medicaid Program**

**Time Study Manual for**

**School-Based Administrative Activities**

**January 1, 2005**

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# Section I

## Introduction

The Massachusetts Municipal Medicaid Program coordinates claims by local education authorities (LEAs) for partial federal reimbursement of qualifying direct health services provided to MassHealth members in schools and of administrative support expenditures incurred in providing those services. LEAs receive detailed guidance about claiming for administrative support expenditures in the Massachusetts Administrative Claiming Manual. One component of administrative claiming is the completion of a time study.

This Time Study Training Manual represents part of an ongoing effort by MassHealth and the Center for Health Care Financing (the Center) at the University of Massachusetts Medical School to provide support to Municipal Medicaid Providers in connection with the Medicaid reimbursement process.

This Training Manual is a support tool to assist school personnel in their Administrative Activity Claim (AAC) logging activities and to explain to school personnel how to perform an AAC time study. Section II of this Manual describes the time logging procedures in detail. Section III itemizes and provides examples of the nine (9) categories of activity into which time study participants divide their workday.

## Administrative Activity Claiming

In order for your district to submit a claim for reimbursement from the federal government, there are a number of steps that the district must take to adhere to the federally approved methodology for identifying costs.

A random sample of school direct service and direct support personnel must participate in an AAC time study for five consecutive days for each of the three quarters of the school year. The sample, as determined by a statistician, must have a 95% confidence level, with plus or minus 5% precision. Time study quarters are defined as:

* + October - December
  + January - March
  + April – June

The District must utilize an average of the data from the previous three quarters for claiming purposes for the fourth quarter.

The District must determine the ***school personnel eligible to participate in this program*** based ***on the actual function that such personnel perform, not on their job title.*** Time study participants select from 9 categories of activities the activity that most closely corresponds to the predominant activity they are performing during each 15-minute time interval. These nine categories are listed in Section III.

It is important that personnel take the time to understand these categories and correctly identify those they perform during the week of the time study. The activities are segregated to identify reimbursable versus non-reimbursable costs as well as to track activities that are reimbursed by the federal government. There is a code that will correspond with all functions performed by personnel completing the time study. It is important that time is tracked according to the activity being performed rather than for whom the activity is being performed (whether or not the student personnel are working with is on Medicaid is **not** relevant for the time study).

## Contact Information

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# Section II

## Time Logs

The AAC Time Study takes place on 5 consecutive logging days. For each logging day, the time log for each participant is divided into 15-minute intervals. Personnel should record the predominant activity they perform in each 15-minute interval for the total number of hours they work on days of the time study. Only one of the activity codes can be recorded for each 15-minute interval. If more than one task is performed in a 15-minute time period, personnel must use their judgment to decide on the predominant activity.

Over the course of an hour there will be four activities recorded—one for each 15-minutes of the hour. For example, if an individual starts at 8:00am he would choose and fill in one code performed from 8:00-8:15, a second for 8:15-8:30 and so on. The study should be completed for the total number of hours worked each day during the five consecutive days the study is being conducted.

## Logging Form Sections

School District Personnel must complete each of the following Logging Form sections:

1. **School Provider Number -** This is an LEA’s unique number, which is used to bill the Medicaid program.
2. **School District Name -** The name of the school district where time study is being completed.
3. **Job Position Number -** Please refer to Tables I and II for a list of job position numbers.
4. **Job Position Description -** A brief description of the school personnel’s job position.
5. **Date -** Date completing the time study.
6. **Signature -** sign the time study form in order to verify completion of the time study.
7. **Activity Code -** This is the activity code that best describes the *predominant* activity performed at a particular time interval.

## Logging Procedures

In order to ensure the accuracy and timeliness of the Administrative Activity Claim School personnel must follow these procedures when completing the time study.

Complete the time study form for the entire duration of the time study. If school personnel are absent on one of the logging days due to personal leave, vacation, illness or school cancellation, complete the form for the day absent and fill-in ‘H’ General Administration & Overhead for the entire scheduled workday.

## Common Logging Errors

* **Filling in multiple bubbles for one 15-minute interval -** Fill in only ***one*** bubble per 15-minute interval. Fill in a bubble for the ***predominant*** activity performed during that 15-minute interval.
* **Leaving blank bubbles -** For each 15-minute increment of the workday, one bubble must be filled in. The nine AAC categories are designed to account for all activities performed during the day, including lunches and breaks.

# Section III – Activity Codes and Examples (A-I)

## Activity (A)

**Medicaid Outreach and Training**

This code should be used by all staff when performing activities that inform eligible or potentially eligible individuals about Medicaid and how to access it. Activities would include bringing potential eligibles into the Medicaid system for the purpose of determining eligibility and arranging for the provision of Medicaid services. This code should also be used by school staff when coordinating, conducting, or participating in training events and seminars for outreach staff regarding the benefit of the Medicaid program, how to assist families to access Medicaid services, and how to more effectively refer students for services. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

* **Informing** Medicaid eligible and potential Medicaid eligible children and families about the benefits and availability of services provided by Medicaid.
* **Informing** children and their families on how to effectively access, use, and maintain participation in all health resources under the Medicaid program.
* **Informing** children and their families and distributing literature about the benefits and availability of the EPSDT program and other Medicaid programs.
* **Notifying** families of EPSDT programs, such as screenings conducted at a school.
* **Providing** information regarding Medicaid managed care programs and health plans to individuals and families and how to access that system.
* **Participating** in or **coordinating** training, which improves the delivery of Medicaid services.

## Examples:

* When you **participate** in or **present** training sessions which improve the quality and frequency of identification and referral.
* This may include your **talking** to other staff, students and families about the Medicaid program, referral process, and health-related services.
* This process may be facilitated by your **distribution** of announcements, brochures, or contacting students or families.

## Activity (B)

**Facilitate/Assist in the Medicaid Eligibility Process**

School staff should use this code when assisting an individual in becoming eligible for Medicaid. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

* **Informing or assisting** an individual or family in the Medicaid eligibility process, including assistance with completing the Medicaid application.
* **Gathering** information related to the application and eligibility determination from a client, including third party liability information.
* **Verifying** a student's current Medicaid eligibility status.
* **Explaining** Medicaid rules and the Medicaid eligibility process to prospective clients.
* **Providing** the necessary forms and packaging all forms in preparation for the Medicaid eligibility determination.
* **Referring** an individual or family to the local Assistance Office to make application for Medicaid benefits.

**Examples:** When a time study participant **performs** the following:

* **Gives** an individual or his/her family the telephone number to the local Medicaid Enrollment Center.
* **Assists** in the completion of the enrollment forms in order to apply for Medicaid services.

## Activity (C)

**Provider Networking/Program Planning/Interagency Coordination**

This code should be used by school staff when performing activities associated with the development of strategies to improve the coordination and delivery of Medicaid covered services to school age children, and when performing collaborative activities with other agencies. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

* **Identifying** gaps or duplication of medical/behavioral health services to school age children and developing strategies to improve the delivery and coordination of these services.
* **Developing** strategies to assess or increase the capacity of school medical/behavioral health programs.
* **Monitoring** the medical/behavioral health delivery systems in schools.
* **Developing** procedures for tracking families’ requests for assistance with Medicaid services and providers. (This does not include the actual tracking of requests for Medicaid services.)
* **Working** with other agencies providing Medicaid services to improve the coordination and delivery of services, to expand access to specific populations of Medicaid eligibles, and to improve collaboration around the early identification of medical problems.
* **Defining** the scope of each agency’s Medicaid service in relation to the other.
* **Developing** advisory or work groups of health professionals to provide consultation and advice regarding the delivery of health care services to the school populations.
* **Developing** medical referral sources such as directories of Medicaid providers and managed care plans, who will provide services to targeted population groups, e.g., EPSDT children. This activity must be coordinated with the state Medicaid agency.

## Examples:

* **Coordinates** with interagency committees to identify, promote and develop Medicaid health related services in the community.
* **Building** a bridge between community providers and school clinicians in an effort to build resource relationships.

## Activity (D)

**Individual Care Planning, Monitoring, Coordination and Referral**

School staff should use this code when making referrals for, coordinating, and/or monitoring the delivery of Medicaid covered services. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities. Activities that are an integral part of or an extension of a medical service (e.g., patient follow-up, patient assessment, patient counseling, patient education, patient consultation, billing activities) should be reported under Code G, Direct Medical Services.

* **Making** referrals for and/or **coordinating** medical examinations and necessary medical/mental health evaluations.
* **Making** referrals for and/or assisting MassHealth eligible children to **schedule** EPSDT screens, interperiodic screens, and appropriate immunization, but NOT to include the State-mandated health services.
* **Referring** students for necessary medical health, mental health, or substance abuse services covered by Medicaid.
* **Arranging** for any Medicaid covered medical/behavioral health diagnostic or treatment services, which may be required as the result of a specifically identified medical/behavioral health condition based on the findings.
* **Gathering** any information that may be required in advance of these referrals.
* **Providing** follow-up contact to ensure that a child has received the prescribed medical/behavioral health services.
* **Providing** information to other staff/parents on the child’s related medical/behavioral health services and plans, subject to applicable state and federal confidentially laws
* **Participating** in a meeting/discussion to coordinate or review a student’s needs for health-related services covered by Medicaid.
* **Coordinating** the delivery of community based medical/dental/behavioral health services for a child with special/severe health care needs.
* **Coordinating** the completion of the prescribed services, termination of services, and the referral of the child to other Medicaid service providers as may be required to provide continuity of care.
* **Monitoring** and **evaluating** the Medicaid service components of the IEP as appropriate.

## Examples:

* When you **contact** (on the telephone, face-to-face in the school, home or other setting) a family about the referral, screening or evaluation process.
* When you **coordinate** or **assist** in the scheduling of health-care appointments, health- related screenings, or evaluations for Special Education students.
* When you discuss a student’s medical/behavioral health services with parents or another professional is the school district.

## Activity (E)

**Transportation and Translation Related To Medicaid Services**

School district employees should use this code when assisting an individual to obtain transportation to services covered by Medicaid. This code should be used by school employees who provide translation services related to Medicaid covered services as an activity separate from the activities referenced in other codes. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

* **Arranging** for or **providing** translation services that assist the individual/parent to access and understand necessary care or treatment;
* **Arranging** for or **providing** signing services that assist the individual or family access and understand necessary care or treatment.
* **Scheduling** or **arranging** transportation to Medicaid covered services.

## Activity (F) Family Planning Referral

* **Identifying** and referring adolescents whom may be in need of family planning services.
* Administrative activities that act to delay or prevent the onset of pregnancy.
* **Coordinating** family planning activities in the school setting.
  + Include related paperwork, clerical activities or staff travel required to perform these activities.

## Examples:

* **Coordinating** activities provided to students for the purpose of delaying or preventing the onset of pregnancy.
* When you **refer** an adolescent to an outside agency or other provider for the purpose of delaying or preventing the onset of pregnancy.

## Activity (G) Direct Service

School staff should use this code when providing care, treatment, and/or counseling services to an individual in order to correct or ameliorate a specific condition. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

* **Providing** health/mental health services contained in an IEP.
* **Conducting** medical/health assessments/evaluations and diagnostic testing and preparing related reports.
* **Providing** health care/personal aide services.
* **Providing** speech, occupational, physical and other therapies.
* **Administering** first aid, or prescribed injection or medication to a student.
* **Providing** direct clinical/treatment services.
* **Performing** developmental assessments.
* **Providing** counseling services to treat health, mental health, or substance abuse conditions.
* **Performing** routine or mandated child health screens including but not limited to vision, hearing, dental, scoliosis and EPSDT screenings.
* **Providing** immunizations.
* **Attending** Special Education team meetings.

## Examples:

* When an RN or other skilled professional **provides** therapy, counseling, **applies**

bandages, **adjusts** equipment, etc.

* When a skilled professional **provides** speech therapy, occupational therapy, and/or physical therapy and records the results in the child’s health care record.
* When a RN or other skilled professional **administers** first aid, or a prescribed injection or medication to a student.
* When a physician **gives** a student a physical exam.
* Team meetings and discussions related to a child’s educational IEP services.

## Activity (H)

**General Administrative Activities and Overhead**

This code should be used by time study participants when performing activities that are not directly assignable to program activities. Both written and oral methods may be used.

Include related paperwork, clerical activities or staff travel required to perform these activities.

* Covers the **performance** of support activities for the administration of the local education authority.
* Covers time spent for **non-work** related time.
* Covers any paid vacation, sick or personal time.
* **Taking** a lunch, breaks, or leave.
* **Attending** school or unit staff meetings, training, or board meetings.
* **Conducting** external relations related to school educational issues.
* **Reviewing** school or district rules and procedures.
* **Providing** general supervision of staff.
* **Performing** clerical activities related to general building or district operations, or specific to instructional and curriculum areas.

## Examples:

* When you **attend** administrative staff meetings, **supervise** staff, **review** rules and procedures, administrative paperwork, etc.
* When you **take lunch** or a **break** and any paid vacation, sick, or personal time.
* When you **perform** clerical activities related to building or district operations.

## Activity (I)

**Non-Health Related Activities**

This code should be used for any other school-related activities that are not health related, such as social services, educational services, and teaching services; employment and job training. These activities include the development, coordination, and monitoring of a student’s educational plan. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

* + **Educational** and other **service activities** that do not relate to time spent performing health-related activities. This code specifically relates to school-related activities such as social services, educational services, and teaching services.
  + **Conferring with students or parents about** student's academic or discipline problems or other school related issues.
  + **Compiling** attendance reports.
  + **Reviewing** the education record for students who are new to the school district.
  + **Providing** general supervision of students (e.g. playground, lunchroom).
  + **Compiling** report cards.
  + **Applying** discipline activities.
  + **Compiling**, **preparing** and **reviewing** reports on textbooks or attendance.
  + **Providing** classroom instruction.
  + **Testing**, correcting papers.
  + **Providing** individualized instruction (e.g., math concepts) to a special education student.
  + **Enrolling** new students or obtaining registration information.
  + **Evaluating** curriculum and instructional services, policies, and procedures.
  + **Performing** clerical activities specific to instructional or curriculum areas.
  + **Participating** in or **presenting** training related to curriculum or instruction.
  + Activities related to the immunization requirements for school attendance.

## Examples:

* + When you **conduct** activities that do not fall into categories A-H.
  + When you **perform** activities that are not related to health care issues.
  + When you **conduct** classroom instruction, **prepare** lesson plans, **correct** papers, **supervise** the playground or lunchroom, **compile** report cards, **compile** attendance reports, etc.
  + Administrative time associated with general public health initiatives such as vision, hearing and scoliosis screenings for regular education students.
  + **Participating in** or presenting training related to language arts or computer instruction.
  + **Translating** an academic test.

# Section IV –Tables

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| **TABLE I DIRECT PERSONNEL** | |
| **JOB POSITION**  Speech/Language Therapist, Assistant or Aide Occupational Therapist, Assistant or Aide Physical Therapist, Assistant or Aide  School Psychologist/Psychologist Intern School RN/LPN  Audiologist/Hearing Impaired Specialist Psychiatrist/Physician  Case Manager, School Adjustment Counselor, School Social Worker or Guidance Counselor  ***\*School personnel eligible to participate in this program are based on the actual function that they perform, not on their job title.*** | **POSITION NUMBER**  01  02  03  04  05  06  07  08 |

**Section IV –Tables**

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| --- | --- |
| **TABLE II**  **DIRECT SUPPORT PERSONNEL** | |
| **JOB POSITION**  **Special Education:**  Director, Administrators/ Assistants Education Team Leaders/ Chairperson Clerical and Technical Support Personnel  **Pupil Support Services:**  Director, Administrators/ Assistants Health Coordinator  Clerical and Technical Support Personnel  **Nursing:**  Director, Administrators/Assistants Clerical and Technical Support Personnel  ***\*School personnel eligible to participate in this program are based on the actual function that they perform, not on their job title.*** | **POSITION NUMBER**  09  09  09 |