

Medicaid Administrative Claiming Program

Time Study Participant Training
2019

What Is Medicaid?

- Medicaid is a program to help low income Montanans pay for medical bills.
 - Low-income families
 - Elderly and disabled Medicare beneficiaries
 - Other eligibility groups
- Medicaid only pays for some services.
- Medicaid is a joint Federal/State program.
- Medicaid is the second largest health coverage program.

What Is **M**edicaid **A**administrative **C**laiming?

MAC is a Federal Medicaid reimbursement available to schools for administrative activities associated with linking a child to appropriate Medicaid services.

What Is an Administrative Activity?

Administrative Activity



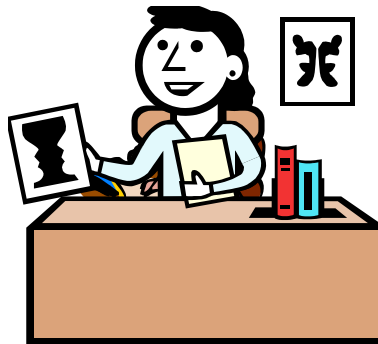
Direct Service



Administrative Activity



Refer a student for speech therapy

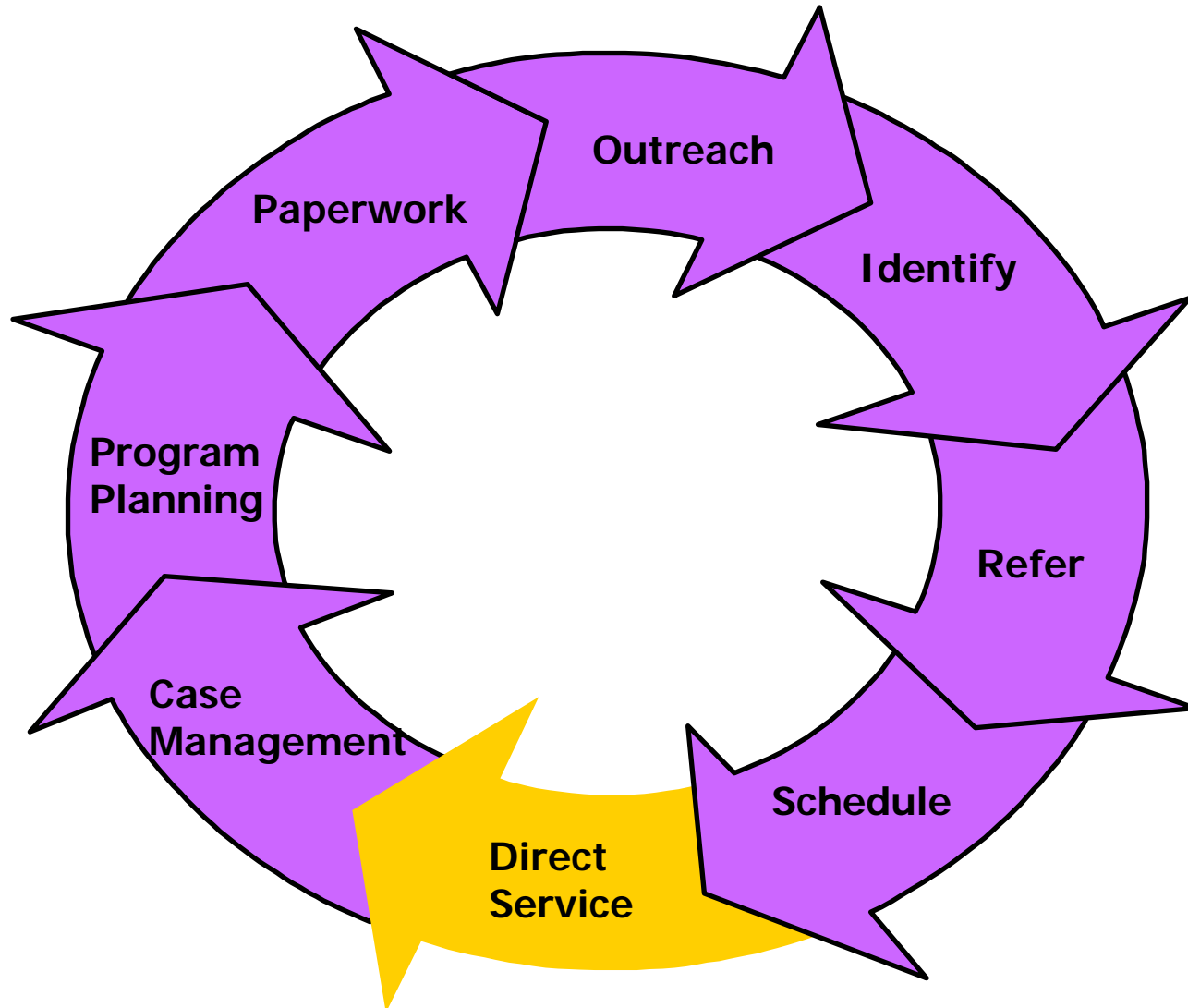


Provide speech therapy



Participate in plan of care meeting

Continuum of Services



Who Can Participate in MAC?

- In general, all school district or cooperative staff that routinely spend time on any of the Medicaid reimbursable MAC activities should be included in the MAC random moment sampling time study.
- Staff excluded from the sample universe include:
 - Staff who do not perform Medicaid administrative activities, such as staff who are dedicated 100% to providing educational services and contract staff who provide 100% direct services.
 - Staff that are 100% federally funded.
 - Teachers and instructional aides are not typically included in this program as their services are typically instructional in nature and as a result, not reimbursable by this program.

Who Can Participate in MAC?

- Administrators for special education
- Audiologists and audiology assistants
- Bilingual specialists
- Counselors
- Diagnosticians
- Dietitians
- Home to school coordinators/liaisons for special education
- Interpreters
- Licensed practical nurses or school health aides
- Medicaid billing clerks
- Occupational therapists and assistants
- Orientation and mobility specialists
- Physical therapists and assistants
- Program and staffing specialists (including staff like mobility, behavioral and transportation paraprofessionals)
- Psychologists and interns
- Recreation therapist
- Registered nurses
- Respiratory therapists
- Social workers
- Speech-language pathologist and aides
- Student services personnel
- Work-study coordinator

Generally, school district employees or contract staff with the job titles/activities listed above may be included in time studies. Because of the diversity of staff in school districts in Montana, an exhaustive list of potential sample personnel job titles is not possible. Staff will be selected by the individual school districts and cooperatives based upon functional responsibilities not job titles.

John Doe

Administrators for Special Education
Any Public School – Admin Office

Sample Moment: **Oct/01/2005 8:08:00AM**

Sample Sequence #: **1**

Participant Signature _____

Date _____

Please provide a brief answer to each of the questions below. You need to sufficiently describe what you were doing at the date and time listed above in order to support your activity code selection. Please do not use individually identifiable health information in your description.

What were you doing? _____

Who were you with? Student Family/Parent Colleague Self Other: _____

Why were you doing this? _____

Section I: Job Title (Please select only one [x])

- 01 Administrators for Special Education
- 02 Audiologists and Audiology Assistant
- 03 Bilingual Specialists
- 04 Counselors
- 05 Diagnosticians
- 06 Dietitians
- 07 Coordinators/Liaisons for Spec. Ed.
- 08 Interpreters
- 09 Licensed Nurses or School Health Aides
- 10 Medicaid Billing Clerks
- 11 Occupational Therapists and Assistants
- 12 Orientation and Mobility Specialists
- 13 Physical Therapists and Assistants
- 14 Program and Staffing Specialists
- 15 Psychologists and Interns
- 16 Recreation Therapists
- 17 Registered Nurses
- 18 Respiratory Therapists
- 19 Social Workers
- 20 Speech-language Pathologist and Aides
- 21 Student Services Personnel
- 22 Work-Study Coordinator

Section II: Activities (Please select only one [x])

- 01 Direct Medical and School Health-Related Services
- 02 Educational and Other Social Activities, Non-Medicaid
- 03 Outreach to Medicaid Programs
- 04 Outreach to Non-Medicaid Programs
- 05 Facilitating an Application for Medicaid
- 06 Facilitating an Application for Non-Medicaid Programs
- 07 Referral, Coordination and Monitoring of Medical Services
- 08 Referral, Coordination and Mntrg of Non-Medical Svcs
- 09 Client Assistance to Access Medicaid Services
- 10 Client Assistance to Access Non-Medicaid Services
- 11 Prgm Planning, Devlpmt & Mntrg of Medicaid Services
- 12 Prgm Planning, Devlpmt & Mntrg of Non-Medicaid Services
- 13 General Administration
- 14 Not Scheduled to Work

Check the definition of activity codes on the back of this form.

Instructions for Completing the Random Moment Sample Form

1. Check the name and job title at top left of the sample form. Make a note of the sample time.
2. After your sample moment, provide a brief answer to each of the three questions that accurately describes what you were doing at the date and time listed above. This description should sufficiently describe what you were doing to support the activity code you choose.
3. In Section I, (middle left of RMS form), select the box next to your job title. This should match the job title under your name. If the title is incorrect under your name, cross it out, and write in the correct job title from the choices in Section I.
4. In Section II, (middle right of RMS form), select the box next to the activity code that matches your answers to the questions above. Use the definition of activity codes on the back of this sheet to help you choose the correct code.
5. If you need to make a correction, cross out the incorrect information. Circle, re-mark and initial the corrected information. White-out invalidates the form.
6. Sign, and date the form under your name (top left of form). Promptly return the form to your MAC Coordinator.

Please use ink to complete this form.

DO NOT USE WHITEOUT

Validate: True False

Validation Signature _____

Date _____

If "TRUE", your MAC Coordinator, or supervisor must check the form for accuracy, then sign and date.

If "FALSE", do nothing.

RMS Observation Sample Form

Random Moment Observation Sampling Form

Montana – Medicaid Admin Claiming

For the Period: 3-October-2014 to 23-December-2014

John Doe

Administrator for Special Education
Montana Public School – Admin Bldg

Sample Moment: Oct/03/2014 8:01:00AM

Sample Sequence #: 1

(Signature)

(Date)

Please provide a brief answer to each of the questions below. You need to sufficiently describe what you were doing at the date and time listed above in order to support your activity code selection. Please do not use individually identifiable health information in your description.

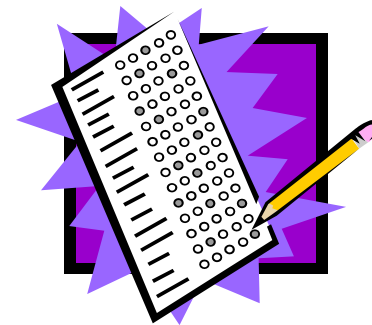
What were you doing? _____

Who were you with? Student Family/Parent Colleague Self Other: _____

What is the purpose of this activity? _____

Instructions for Completing the Observation Form

- Check the name and job title. Make note of the sample time.
- Provide a brief answer to each of the three questions that accurately describes what you were doing. This description should sufficiently describe what you were doing to support the activity code you choose.
 - What were you doing?
 - Who were you with?
 - What is the purpose of this activity?



Good Examples

What were you doing? Assisted student in toileting

What is the purpose of this activity? Student needs assistance per IEP

What were you doing? Meeting with a parent

What is the purpose of this activity? Discussing discipline problem

What were you doing? Writing psychological reports

What is the purpose of this activity? In preparation for child study team meeting

What were you doing? Meeting with a parent about her child's anxiety

What is the purpose of this activity? To discuss with parent options and plans.

What were you doing? Paid vacation

What is the purpose of this activity? Vacation

What were you doing? Reviewing SPED records of LW

What is the purpose of this activity? Preparing for upcoming IEP

Bad Examples

What were you doing? In the gym with student

What is the purpose of this activity? It was student's time to be in gym

What were you doing? Working with a student

What is the purpose of this activity? Scheduled reg. Time

What were you doing? Paperwork

What is the purpose of this activity? Got behind and need to do it!

What were you doing? Climate meeting

What is the purpose of this activity? Team planning

What were you doing? Helping a student read

What is the purpose of this activity? Job requirement

What were you doing? Throwing up

What is the purpose of this activity? Had the flu

Instructions for Completing the Observation Form

- In Section I, select the box next to your job title.
 - This should match the job title under your name.
 - If the title is incorrect, cross it out, and write in the correct title from the choices in Section I.
 - No other job titles are valid.

- In Section II, select the activity code that matches your answers to the questions above.
 - Read the Definition of Activity Codes for examples. This should be on the back of your form.

- If you need to make a correction, cross out the incorrect information. Circle, re-mark, and initial the corrected information.
 - **DO NOT USE WHITEOUT!! It invalidates the form.**

Instructions continued

- Check at the bottom left side of the form to see if it needs validation.
 - If *True*, have your MAC Coordinator or supervisor check the form for accuracy. This person needs to sign your form.
 - If *False*, no signature is needed.
- Sign and date the form under your name in the top left corner. **There is to be no pre-dating forms.**
- Promptly return the form to your MAC Coordinator.

RMS Observation Sample Form

Instructions for Completing the Random Moment Sample Form

1. Check the name and job title at top left of the sample form. Make a note of the sample time.
2. After your sample moment, provide a brief answer to each of the three questions that accurately describes what you were doing at the date and time listed above. This description should sufficiently describe what you were doing to support the activity code you choose.
3. In Section I, (middle left of RMS form), select the box next to your job title. This should match the job title under your name. If the title is incorrect under your name, cross it out, and write in the correct job title from the choices in Section I.
4. In Section II, (middle right of RMS form), select the box next to the activity code that matches your answers to the questions above. Use the definition of activity codes on the back of this sheet to help you choose the correct code.
5. If you need to make a correction, cross out the incorrect information. Circle, re-mark and initial the corrected information. White-out invalidates the form.
6. Sign, and date the form under your name (top left of form). Promptly return the form to your MAC Coordinator.

Please use ink to complete this form.

DO NOT USE WHITEOUT

Validate: True

Validation Signature

Date

If "TRUE", your MAC coordinator or supervisor must check the form for accuracy, then sign and date.

If "FALSE", do nothing

Activity Codes

You must pick one of the following 14 codes that best describes what you were doing at your sample moment.

Refer to the “Definition of Activity Codes” or your MAC Coordinator for help choosing the correct code.

Activity Codes

Any paperwork (including phone calls, emails, copying, etc.), clerical activities, training or staff travel related to a specific activity are included with that activity code.



Example:

Driving to another school for a meeting to try to work out a schedule to share speech pathologists.

Activity #11 – Program Planning, Policy Development and Interagency Coordination Related to Medical Services

Description of Activity Codes

Direct Medical and School Health Related Services

Activity Code 1



Providing direct medical care, counseling, and therapeutic services or treatment.

Examples of Activity Code 1

Use activity **code 1** when you are performing:

- **Direct clinical treatment & therapeutic services, and the administrative paperwork, follow-up, and billing activities.**
- Developing care plan
- **Conducting screenings, diagnostic evaluations and/or assessments, and treatments.**
- **Counseling about a health, mental health or substance abuse issue.**
- Performing vision, hearing or other EPSDT health screens
- Administering first aid, emergency care, or prescribed medications.
- All services that can be billed to Medicaid

Description of Activity Codes

Educational and Other Social Activities, Non-Medicaid

Activity Code 2

Performing activities that are specific to instructional, curriculum and student focused areas. Not health or Medicaid related.



Examples of Activity Code 2

Use activity **code 2** when you are:

- Providing classroom instruction including lesson planning, testing, & correcting
- **Developing, coordinating or monitoring the educational component of the IEP & associated meetings and conferences**
- Conducting parent conferences about academic progress
- **Conferring/meeting with student, teachers, and/or parents about discipline, academic matters, attendance or other school related issues**
- Generally supervising students (lunch, playground, bus)
- Reviewing student records, and monitoring student academic achievement
- Evaluating curriculum and instructional services, policies and procedures
- Supervising, coaching or attending extra-curricular activities

Description of Activity Codes

Outreach to Medicaid Programs

Activity Code 3

Informing eligible or potentially eligible individuals about Medicaid and how to access it. Includes describing range of services covered by Medicaid and how to obtain Medicaid preventative services.



Examples of Activity Code 3

Use activity **code 3** when you are:

- Informing students and their families about the services provided by Medicaid, including preventive care, treatment, screenings and the EPSDT program.
- **Encouraging families to access medical, dental, and mental health services provided by Medicaid.**
- Distributing literature about the benefits, eligibility requirements and availability of Medicaid services, including EPSDT screenings

Description of Activity Codes

Outreach to Non-Medicaid Programs

Activity Code 4

Performing activities that inform individuals about non-Medicaid, educational, social, or vocational programs and how to access them. Includes describing the range of services covered under these programs and how to obtain services.



Examples of Activity Code 4

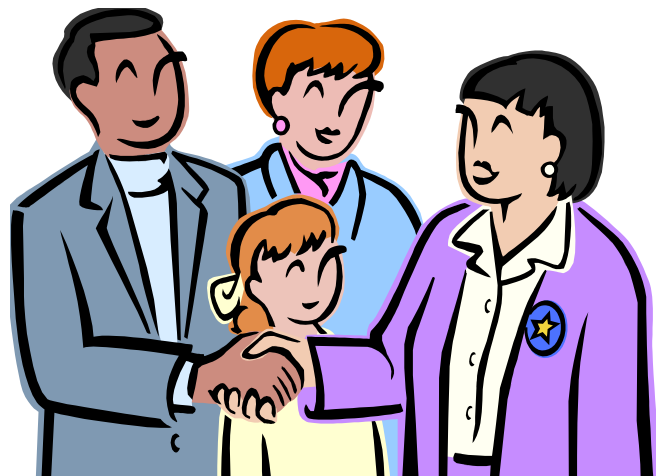
Use activity **code 4** when you are:

- **Describing educational, social, or vocational programs or services**
 - Spec. Ed. Program, Title I, after-school programs, Boy/Girl scouts
- Scheduling and promoting activities that educate about benefits of healthy life-styles and practices
- **Informing families & distributing literature about the benefits & availability of non-health related programs**
 - WIC, childcare scholarships, summer programs, sports camps, career searches, CHIP
- Conducting general health education programs
 - DARE, Red Ribbon Week
- Outreach to access social, educational, legal and other services not covered by Medicaid

Description of Activity Codes

Facilitating an Application for Medicaid

Activity Code 5



Assisting an individual or family in becoming eligible for Medicaid.

Examples of Activity Code 5

Use activity **code 5** when you are:

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

Description of Activity Codes

Facilitating an Application for Non-Medicaid Programs

Activity Code 6



Assisting an individual or family in becoming eligible for non-Medicaid programs.

Examples of Activity Code 6

Use activity **code 6** when you are:

- **Assisting individual/family complete a college, job, or scholarship application**
- **Referring to an appropriate agency to make application for food stamps, daycare or other social assistance program**
- Explaining the eligibility process for non-Medicaid programs
- Verifying eligibility for free or reduced lunch
- Assisting a family in completing an application for social services programs

Description of Activity Codes

Referral, Coordination and Monitoring of Medicaid Services

Activity Code 7

Making referrals for, coordinating and monitoring the delivery of medical and mental health services. Includes linking students and families to Medicaid service providers to plan, carry out and maintain a health service plan.



Examples of Activity Code 7

Use activity **code 7** when you are:

- **Participating in a meeting/discussion to coordinate or review an individual's need for health related services covered by Medicaid**
- **Monitoring and evaluating the Medicaid service components of the IEP as appropriate**
- Providing info to other staff about child's health services and plans
- Gathering information that may be required in advance of health referrals
- Referring students for necessary medical health, mental health, or substance abuse services covered by Medicaid
- Arranging for any Medicaid covered medical/dental/mental health diagnostic or treatment services that may be required as the result of an identified health condition
- Providing follow-up contact to ensure that a child has received the prescribed health services covered by Medicaid
- Making referrals for, coordinating, and/or scheduling medical or physical exams and health evaluations, EPSDT screens, delivery of community based health services, or

Description of Activity Codes

Referral, Coordination and Monitoring of Non-Medicaid Services

Activity Code 8

Making referrals for, coordinating and monitoring the delivery of non-medical, such as educational, vocational and other social services. Linking students and families to service providers to plan, carry out and maintain an education service plan.



Examples of Activity Code 8

Use activity **code 8** when you are:

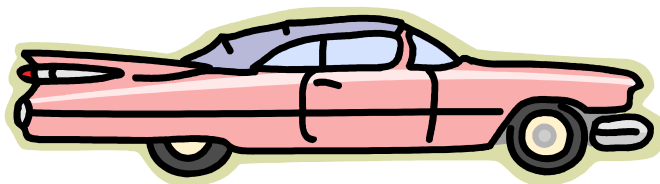
- Making referrals for and/or coordinating access to social and educational services such as child care, employment, job training and housing
- Gathering information in support of non-health related referrals
- Making referrals for, coordinating & monitoring scholastic, vocational or non-health related examinations
- Participating in meetings/discussions to coordinate a student's need for scholastic, vocational & other non-health related social services
- **Monitoring and evaluating non-medical educational components of the student's individualized plan**

Description of Activity Codes

Client Assistance to Access Medicaid Services

Activity Code 9

Arranging for specific support provisions such as transportation, translation, or signing assistance, which are necessary for an individual or family to access Medicaid services.



Examples of Activity Code 9

Use activity **code 9** when you are:

- Arranging for or providing translation or signing services to assist an individual or family accessing and understanding necessary health care or treatment
- Arranging for transportation for an individual or family to access services
 - Does NOT include actual provision of transportation services



Description of Activity Codes

Client Assistance to Access Non-Medicaid Services

Activity Code 10

Arranging for specific support provisions such as transportation, translation, or signing assistance, which are necessary for an individual or family to access non-Medicaid, educational, vocational and social services.



Examples of Activity Code 10

Use activity **code 10** when you are:

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

Description of Activity Codes

Program Planning, Policy Development and Interagency Coordination of Medical Services

Activity Code 11

The development of strategies to improve the coordination and delivery of medical or mental health services to school age children. Developing, implementing, monitoring and systems to assess the effectiveness of



Examples of Activity Code 11

Use activity **code 11** when you are:

- **Identifying gaps, developing strategies to assess or increase the capacity of school medical/dental/mental health programs, and improve the delivery and coordination of services**
- Working with other agencies to improve the coordination, delivery and access of medical/mental health services
- **Monitoring the effectiveness and delivery of medical/mental health services in schools**
- Developing health-related referral relationships
- Developing and coordinating advisory work groups of health professionals to improve health services
- Working with agencies to expand the scope or availability of services to target groups

Description of Activity Codes

Program Planning, Policy Development and Interagency Coordination of Non-Medical Services

Activity Code 12

The development of strategies to improve the coordination and delivery of non-medical, educational, vocational and social
Developing, monitoring
implementing tracking systems
the effectiveness of these



Examples of Activity Code 12

Use activity **code 12** when you are:

- Working with educational agencies to improve the quality of academic services
- Developing internal plans and strategies to increase service capacity of educational services
- **Monitoring the effectiveness of educational services**
- Coordinating interagency committees to identify, promote and develop expanded educational services in schools

Description of Activity Codes

General Administration

Activity Code 13

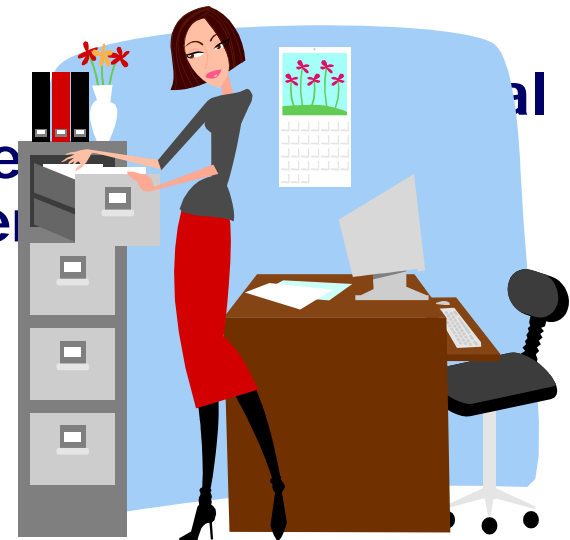


Performing activities that are not directly assignable to other program activity codes.

Examples of Activity Code 13

Use activity **code 13** when you are:

- Lunch, sick leave, breaks, or other **paid time** not at work
- Attending general staff meetings, board meeting, or district trainings
- Reviewing school or district policies and procedures
- Providing general supervision of staff
 - i.e. evaluations
- **Performing other administrative activities related to general district functions or operations**
- You are unable to assign your sample moment to any other code



Description of Activity Codes

Not Scheduled to Work

Activity Code 14



Sample moment occurs
when you are not being
paid to work

Examples of Activity Code 14

Use activity **code 14** when:

- Sample moment is before or after your scheduled workday hours
- You are not being paid
 - Unpaid leave
 - Holidays



MAC Activity Code Quiz

1. A parent is interested in your school's after school care for his child. You are a counselor referring him to the person who can answer his questions.

4 – Outreach to Non-Medicaid Programs

2. A student in your school is physically impaired and needs a wheelchair. The family can't afford one. You are a physical therapist explaining to the parents the Medicaid services available that can assist with the purchase of equipment even though both parents work.

3 – Outreach to the Medicaid Program

MAC Activity Code Quiz

3. You are a PT evaluating whether a student needs a brace.

1 – Direct Medical and School Health Related Services

4. You are a SLP and are meeting with a team of para-professionals about how to improve augmentative communication skills of your schools non-verbal students

11 – Program Planning, Policy Development and Interagency Coordination Related to Medical Services

MAC Activity Code Quiz

5. You are a dietician helping a family fill out an application for food stamps.

6 – Facilitating an Application to Non-Medicaid Programs

6. You are in a staff meeting to develop strategies to improve school safety.

12 – Program Planning, Policy Development and Interagency Coordination Related to Non-Medical Services

MAC Activity Code Quiz

7. You are an administrator arranging for a translator to help a non-English speaking family understand the paperwork they need to fill out for their child to apply for Medicaid services.

9 – Client Assistance to Access Medicaid Services

8. You are a program specialist helping enroll a new student at your school.

2 – Educational and other Social Activities, Non-Medical

MAC Activity Code Quiz

9. You're a speech language pathologist providing group therapy to a number of students.

1 – Direct Medical and School Health Related Services

10. You are a Health Aide documenting a child's disability on a form sent to you for the purpose of the child's obtaining SSI and Medicaid benefits.

5 – Facilitating an Application for Medicaid

MAC Activity Code Quiz

11. You are writing a recommendation letter for a student to apply for college scholarships.

8 – Referral, Coordination and Monitoring
of Non-Medicaid Services

12. A student at your school would be better served at a special center for seriously emotionally disturbed children. You are a counselor telephoning to coordinate services between your school and the special center for an easy transition for the student.

7 – Referral, Coordination and Monitoring of Medicaid Services

MAC Activity Code Quiz

13. You're a part-time employee and your sample time is before your workday is scheduled to begin.

14 – Not Scheduled to Work

14. You're in an IEP meeting discussing what educational placement level is best for a child whose testing indicates a need for speech language therapy.

2 – Educational and Other Social Activities, Non-Medical

MAC Activity Code Quiz

15. You're arranging transportation for students to be honored at the Capital for academic achievement.

10 - Client Assistance to Access Medicaid Services

16. You are a billing clerk, and your random moment sample time is during your lunch break.

13 – General Administration

What If You Have Questions?

- Contact the MAC Coordinator from your district

Hint: The MAC Coordinator is probably the person who gave you the time study form

- Contact DPHHS

Rena Steyaert, Program Officer
Health Resources Division, DPHHS
PO Box 202951
Helena, MT 59602-2951
Phone: (406) 444-4066
Fax: (406) 444-1861
[Email: rsteyaert@mt.gov](mailto:rsteyaert@mt.gov)

Online Access

Provider Website: <https://medicaidprovider.mt.gov/>

- Under “Resources by Provider Type”, select “School-Based Services”
 - Manuals/Guides
 - Training Presentation
 - Definition of Activity Codes
 - Training Quiz
 - Medicaid Information

