School Supportive Health Services Program Preschool Supportive Health Services Program

Questions and Answers

Random Moment Time Study Issued March 16, 2012

Note: The response to Question #186 was revised November 24, 2014.

178. Q. What is a Random Moment Time Study (RMTS)?

A. A Random Moment Time Study (RMTS) is a mechanism for identifying the amount of time SSHSP practitioners spend delivering Medicaid reimbursable activities. It is important to note that RMTS is <u>not</u> a management tool used to evaluate staff activities or performance.

179. Q. How will RMTS affect SSHSP?

A. Pending approval of State Plan Amendment #11-39 that outlines changes in the reimbursement methodology for SSHSP, the results of the RMTS will be used in determining the portion of costs related to direct medical services outlined in section 3.1(a) of the Medicaid State Plan.

180. Q. What is each entity's role in RMTS?

- **A.** State Education Department (SED)
 - Implementation
 - Special Education Policy

Department of Health, Office of Health Insurance Programs (OHIP)

- Medicaid Policy
- Payment Methodology

Regional Information Centers (RIC)

School district, county, and §4201 school support on SSHSP matters

School districts, counties and §4201 schools

- Implement SSHSP, participate in RMTS, file annual cost reports
- Monitor Contractors

Public Consulting Group, Inc (PCG) (DOH contractor)

 Assist DOH, SED, and SSHSP providers in implementation of RMTS and support the preparation and submission of annual cost reports for each SSHSP provider actively billing Medicaid.

181. Q. What is a staff pool roster?

A. A staff pool roster (participant list) is each SSHSP Medicaid billing provider's list of all SSHSP qualified practitioners.

182. Q. Who is responsible for the creation and/or certification of the participant list (staff pool roster)?

A. Each school district, county, and §4201 school, as a Medicaid billing provider, is responsible for the creation and/or certification of its own participant list. To assist SSHSP billing providers in creating the initial list, SED and PCG utilized the "relevant employee" training database maintained by SED for the Medicaid Compliance Trainings. A file was distributed by PCG to a designee of each SSHSP billing provider with the expectation that the list would be reviewed and edited as needed. This ensures that PCG has the most up-to-date list of employees and contracted staff (SSHSP reimbursable clinicians) when creating staff pool rosters/participant lists.

183. Q. Who should be included in a participant list?

- A. Only Medicaid qualified clinicians who perform direct service activities (including "under the direction of" and "under the supervision of" activities) should participate in the time study. These clinicians must be eligible per the requirements in section 3.1(a) of the Medicaid State Plan. Each school district, county, and §4201 school will certify its own participant list quarterly. The following clinicians (licensed, registered, and/or certified as required) should be included in the participant list:
 - psychologist
 - psychiatrist
 - clinical social worker
 - master social worker
 - physician
 - physician assistant
 - nurse practitioner
 - audiologist
 - speech-language pathologist
 - teacher of the speech and hearing handicapped
 - teacher of students with speech and language disabilities
 - physical therapist
 - physical therapy assistant
 - occupational therapist
 - occupational therapy assistant
 - registered professional nurse
 - licensed practical nurse

184. Q. Which staff should be excluded from the participant list for RMTS?

- **A.** Staff who are not licensed/registered and/or certified and who do not provide SSHSP Medicaid reimbursable services must not be included in the participant list. These include:
 - Non-paid temporary staff such as interns
 - School psychologists
 - Administrative and facility-related staff/contractors who do not provide direct medical services (e.g., receptionists, billing clerks, janitors).

185. Q. Which agencies need to certify their participant list for RMTS?

A. School districts, counties, and §4201 schools that participate in the Medicaid program must certify participant lists for the RMTS.

Note: The response to Question #186 was revised November 24, 2014. Deletions are struck through and additions are <u>underlined.</u>

186. Q. Should school districts, counties, and §4201 schools include direct service contractors in their participant list?

A. Yes, at this time, school districts, counties, and §4201 schools must include both employed and contracted clinicians that perform direct service activities billed to Medicaid in the participant list. School districts and counties must include all employees providing direct medical service activities in their participant lists. In addition, school districts and counties must provide names of all contracted direct service providers on supplemental rosters.

187. Q. PCG's email states that "each provider must designate a state employee as its SSHS Program Coordinator." The school districts, counties, and §4201 schools have no State employees. Does that mean the requirement does not apply?

A. The email inadvertently stated that "each provider must designate a state employee as its SSHS Program Coordinator". Instead, the Random Moment Time Study Coordinator (RMTS Coordinator) and Assistant RMTS Coordinator are selected by the school district, county, or §4201 school. Individuals filling this role may include, but are not limited to: clinicians, Medicaid Compliance Officers, representatives from the Committee on Special Education (CSE), school principals, or billing clerks, for example. Therefore, the requirement for selecting a designated state employee does not apply.

188. Q. Does every school district, county, and §4201 school need a "Random Moment Time Study Coordinator" and can it be anyone the school district, county or §4201 school selects?

A. Yes, every school district, county, and §4201 school participating in the Medicaid program needs to assign a RMTS Coordinator and a designated Assistant RMTS Coordinator to serve as back up. Individuals filling this role may include, but are not limited to: clinicians, Medicaid Compliance Officers, representatives from the Committee on Special Education (CSE), school principals, or billing clerks, for example.

189. Q. Who must receive RMTS training provided by PCG?

A. RMTS Coordinators must participate in web-based RMTS training. The Assistant RMTS Coordinator and clinical staff identified in the participant list are strongly encouraged to attend one of the web-based sessions; however, there is an acceptable alternative to attending a web-based session. Assistant RMTS Coordinators and staff identified in the participant lists may receive RMTS training from their RMTS Coordinator who attended the web-based training.

This supersedes and clarifies information included in PCG's Medicaid Director letter dated March 7, 2012 that indicated both RMTS Coordinators and RMTS participants must receive web-based RMTS training prior to April 1, 2012.

190. Q. How will school districts, counties, and §4201 schools receive training on RMTS?

A. Medicaid billing providers may receive required RMTS training through various web-based sessions sponsored by PCG. PCG will also be available during many Phase III Compliance training sessions.

191. Q. What is the schedule for face-to-face trainings that "Random Moment Time Study Coordinators must attend"?

A. At this time, there are no face-to-face RMTS trainings available. Therefore, RMTS Coordinators must attend the web-based training.

PCG provided a schedule of web-based training seminars for RMTS Coordinators and RMTS participants. (See Attachment B, which was included with PCG's Medicaid Director letter dated March 7, 2012.) You may also refer to Question #192 for more information. All RMTS Coordinators must attend one of the web-based training sessions.

192. Q. How do the RMTS Coordinators sign up/register for web-based training?

A. Morning and afternoon sessions are available beginning Monday March 12th and continuing through March 27th. Each RMTS Coordinator must attend RMTS training prior to April 1, 2012. Assistant RMTS Coordinators and SSHSP practitioners may also attend this RMTS training prior to April 1, 2012. It is not necessary to register for this training.

To start or join an online meeting that begins at 9:00am go to

https://pcgus.webex.com/pcgus/j.php?ED=163872467&UID=481393857&PW=NNTJkZmMy ZjJI&RT=MiMxMQ%3D%3D

and call

1-888-866-0650 (Conference ID: 0198159) for the audio conference.

To start or join the online meeting that begins at **1:00pm** go to:

https://pcgus.webex.com/pcgus/j.php?ED=163872542&UID=481393857&PW=NMTExY2Q4 YWQz&RT=MiMxMQ%3D%3D

<u>and</u> call

1-888-866-0650 (Conference ID: 0198159) for the audio conference.

193. Q. Will there be additional RMTS training separate from the web-based training?

A. At most face-to-face Phase III Mandatory Compliance Training, representatives from PCG will be available. Further information regarding online RMTS training opportunities will be forthcoming.

194. Q. What is the date for the district to start rolling out RMTS information to their providers?

A. It is the responsibility of the school districts, counties, and §4201 schools to inform their clinicians (those included on staff pool rosters/participant lists) of the need to participate in available RMTS trainings as soon as information is available. It is expected that clinicians on the participant list will be included in the RMTS sampling process that will begin on April 1, 2012.

195. Q. How can school districts, counties, and §4201 schools be expected to include contracted employees in their list of participants since most are employed by BOCES, private schools, or independent agencies?

A. On September 12, 2011, Medicaid Alert #11-03 notified school districts, counties, and §4201 schools participating in the Medicaid program of the requirement to include National Provider Identifier (NPI) numbers for attending providers on SSHSP claims. This requirement went into effect for services rendered on and after January 1, 2012.

This process necessitated establishing and maintaining a list of current employees and/or contracted staff for which school districts, counties, and §4201 schools can bill Medicaid. School districts, counties, and §4201 schools can use these lists as a starting point in developing their staff pool/participant lists for the RMTS. Those lists can then be forwarded to PCG for use in the RMTS process.

196. Q. Do school districts have the ability to decline any clinician (from a contracted agency) who did not appear on the original list submitted?

A. School districts, counties, and §4201 schools must include all clinicians (employees and contracted staff) that provide Individualized Education Program (IEP) services for which they intend to bill Medicaid.

197. Q. BOCES, school district and agency school calendars may differ from one another, is this being taken into account?

A. Yes, this has been taken into account in the development of the RMTS.

198. Q. Is this a federal or State mandate?

A. Pending Centers for Medicare and Medicaid Services (CMS) approval of the New York State Plan Amendment (SPA) # 11-39, this is a New York State requirement.

199. Q. Will PCG be doing any webinars after hours, etc. to accommodate staff accordingly?

A. In addition to the trainings already scheduled, PCG will conduct additional training beginning at 4pm on Monday March 26 and Tuesday March 27. Please see the links to the webinar trainings being conducted for the remainder of the month below.

To start or join an online meeting that begins at 4:00pm go to

https://pcgus.webex.com/pcgus/j.php?ED=164221447&UID=481393857&PW=NZTAyZjMzZ DM0&RT=MiMxMQ%3D%3D

and call

1-888-866-0650 (Conference ID: 0198159) for the audio conference.

200. Q. Will school districts, counties, and §4201 schools be reimbursed under 'administrative costs' for the time being spent to develop/update participant lists and the cost reports?

A. No. At this time, there is no Medicaid reimbursement to school districts, counties, or §4201 schools for administrative costs, also referred to Medicaid Administrative Claiming (MAC). However, implementation of a MAC program is under consideration for the future. Should Medicaid Administrative Claiming be implemented for SSHSP, Medicaid providers would be informed of the specific program requirements.

201. Q. How can clinicians participate in the RMTS without interruption to services provided to students?

A. Responding to an RMTS email should not cause an interruption in the provision of services to students. Clinicians will have five (5) business days to respond to a random moment inquiry. Additionally, not all clinicians will receive a moment each quarter. Based on the size of the staff pools/participant lists in New York State, the expectation is one moment per clinician per year.

202. Q. Will the school district, county, or §4201 school fiscal officer be expected to maintain a roster of providers included in the RMTS in order to determine eligible Medicaid costs for the cost reports.

A. The district, county, or §4201 school must maintain the staff pool/participant roster because costs associated with only those direct service providers eligible to participate in RMTS can be included in the cost report.

203. Q. Can the state use the efficiency information in the RS-2 form or the SED-4 form in lieu of participating in the RMTS?

A. No. The Centers for Medicare and Medicaid Services (CMS) requires the use of a federally accepted method for tracking staff time and activities of the billing providers that is a verifiable, statistically valid random sampling technique that produces accurate labor distribution results. Use of the federally accepted RMTS sampling will greatly reduce the amount of staff time needed to record an individual time study participant's activities.