Commonwealth of Virginia

Department of Medical Assistance Services

Administrative Activity Time Study Manual

SECTION I

INTRODUCTION

Local Educational Authorities (LEAs) provide a range of health-related services to students on a daily basis to ensure their overall development. Some of the students served through school-health programs are covered by Medicaid, a joint state and federal health care insurance program. Because Medicaid is funded at both the state and federal level, LEAs are eligible to be reimbursed for a portion of the costs associated with providing health services to Medicaid students.

Phase I of capturing this federal share of funding is a program that identifies costs for providing ***direct*** health services to special education students enrolled in the Medicaid program. Phase II, also referred to as Administrative Activity Claiming (AAC), identifies ***administrative*** costs associated with providing direct health services. This packet is intended to serve as a tool to assist your district in identifying all eligible administrative support expenditures for which the district is entitled to receive federal funding.

ADMINISTRATIVE ACTIVITY CLAIMING

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

Each LEA participating in the program must provide a roster of direct service and direct support personnel who perform administrative support activities related to the delivery of direct health services. The information on these rosters will include the individual's name, profession, and work location (both LEA employees and contracted personnel should be included on the roster). A random sample of these personnel will be chosen to participate in an AAC time study for five consecutive school days during three quarters of the school year. The sample, as determined by a statistician, will have a 95% confidence level, with plus or minus 5% precision. Time study quarters are defined as:

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

An average of the data from the previous three quarters will be used for claiming purposes for the fourth quarter. The beginning day for an LEA's time study in any of the three quarters during which a time study will be conducted will be selected randomly for each LEA.

School personnel eligible to participate in this program are based on the actual function that they perform rather than their job title.   Those selected will be asked to use a scantron sheet as a time log to track their activities according to 17 categories. These 17 categories—which are described in this packet as activity codes—are listed in Section III.

Further assistance with understanding these categories is also available through the contact information listed below.

It is important 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 track activities that are reimbursed by the federal government at an enhanced rate.   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 a student personnel are working with is on Medicaid is **not** relevant for the time study).

Contact Information

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TIME LOGS

The time log 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 the days of the time study. Only **one** of the 17 codes can be recorded for each 15-minute interval. If more than one task is performed in a 15-minute time period, personnel completing the study must use their judgment to decide on the predominant activity of that interval. 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 were to start at 8:00am they would choose and fill in one (out of the possible 17) code they 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.

SECTIONS OF THE LOGGING FORM

1. <u>School Provider Number</u> – This is a number specifically assigned to identify your school district—personnel completing the study will be informed of their district's number.

2. <u>School Name</u> – The name of the school where the time study is being   completed.

3. <u>Job Position Descriptions</u> - A listing of job categories to identify the job function of personnel completing the study

4. <u>Job Position Number</u> – Refer to the back of the time log for job position numbers.

5. <u>Date</u> – Provide the date of the completion of the time study

6. <u>Signature</u> – Please sign the AAC time log sheet. This verifies the completion of the Virginia School-Based Health Services time study.

7. <u>Activity Codes</u> – Codes A-L represent the range of activities school health personnel perform. One code should be chosen to fill in for each 15-minute interval.

LOGGING PROCEDURES

The following procedures must be followed when completing the time study in order to ensure the accuracy and timeliness of the Administrative Activity Claim.

1. Complete the log sheet for the entire duration of the time study—the form should be signed and dated on the last day 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 time log for the day absent by filling in 'Q' General Administration & Overhead for the entire scheduled work day.

2. Complete the log sheets for each day of the designated time-study week.

3. Fill in all bubbles completely with a No. 2 pencil.

4. Photocopy the completed time logs and submit the *original* sheets to the designated school personnel.

5. Do not use "white out" on these forms.

*Note: School personnel are **not** required to tabulate their responses.*

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 twelve AAC categories are designed to account for all activities performed during the day, including lunches, breaks, etc.

ACTIVITY CODE (A)
NON-MEDICAID OUTREACH

This code should be used by all school staff when performing activities that inform eligible or potentially eligible individuals about non-Medicaid social, vocational and educational programs (including special education) and how to access them; describing the range of benefits covered under these non-Medicaid social, vocational and educational programs and how to obtain them. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

- Informing families about wellness programs and how to access these programs.

- Scheduling and promoting activities, which educate individuals about the benefits of healthy life-styles and practices.

- Conducting general health education programs or campaigns addressed to the general population.

- Conducting outreach campaigns directed toward encouraging persons to access social, educational, legal or other services not covered by Medicaid.

- Assisting in early identification of children with special medical/mental health needs through various child find activities.

- Outreach activities in support of programs, which are 100 percent, funded by State general revenue.

ACTIVITY CODE (B) - MEDICAID OUTREACH*

This code should be used by school 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. LEAs may only conduct outreach for the populations served by their school districts, i.e., students and their parents or guardians. 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 (including preventive, treatment and screening) and services through the EPSDT program.

- Informing children and their families on how to effectively access, use, and maintain participation in all health resources under the Medicaid program.

- Compiling brochures designed to effectively inform eligible individuals about the EPSDT program and services, about how and where to obtain those services. This activity must be coordinated with the state Medicaid agency.

- Informing children and their families and distributing literature about the benefits and availability of the EPSDT program and other Medicaid programs.

- Informing children and their families on how to effectively use and maintain participation in all health resources under the Federal Medicaid program.

- 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.

* This code includes activities performed for the Family Access to Medical Insurance Security (FAMIS) program – the state's Child Health Insurance Program (CHIP).

ACTIVITY CODE (C)
FACILITATING APPLICATION FOR NON-MEDICAID PROGRAMS

This code should be used by school staff when informing an individual or family about programs such as TANF, Food Stamps, WIC, day care, legal aid, and other social or educational programs and referring them to the appropriate agency to make application. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

- Explaining the eligibility process for non-Medicaid programs, including IDEA.

- Assisting the individual or family collect/gather information and documents for the non-Medicaid program application.

- Assisting the individual or family in completing the application, including necessary translation activities.

- Developing and verifying initial and continuing eligibility for the Free and Reduced Lunch Program. When a school district employee is verifying a student's eligibility or continuing eligibility for Medicaid for the purpose of developing, ascertaining or continuing eligibility under the Free and Reduced Lunch program, report that activity under this code.

- Providing necessary forms and packaging all forms in preparation for the NON-Medicaid eligibility determination.

ACTIVITY CODE (D)
FACILITATING MEDICAID ELIGIBILITY DETERMINATION*

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.

- Verifying an individual's current Medicaid eligibility status.

- Explaining Medicaid eligibility rules and the Medicaid eligibility process to prospective applicants.

- Assisting individuals or families to complete a Medicaid eligibility application.

- Gathering information related to the application and eligibility determination for an individual, including resource information and third party liability (TPL) information, as a prelude to submitting a formal Medicaid application.

- Providing 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.

- Assisting the individual or family in collecting/gathering required information and documents for the Medicaid application.

* This code includes activities performed for the Family Access to Medical Insurance Security (FAMIS) program – the state's Child Health Insurance Program (CHIP).

ACTIVITY CODE (E)
SCHOOL RELATED AND EDUCATIONAL 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 education plan. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

- Providing classroom instruction (including lesson planning).

- Testing, correcting papers.

- Developing, coordinating, and monitoring the Individualized Education Plan (IEP) for a student, which includes ensuring annual reviews of the IEP are conducted, parental sign-offs are obtained, and the actual IEP meetings with the parents.

- Compiling attendance reports.

- Performing activities that are specific to instructional, curriculum, student-focused areas.

- Reviewing the education record for students who are new to the school district.

- Providing general supervision of students (e.g., playground, lunchroom).

- Monitoring student academic achievement.

- Providing individualized instruction (e.g., math concepts) to a special education student.

- Conducting external relations related to school educational issues/matters.

- Compiling report cards.

- Applying discipline activities.

- Performing clerical activities specific to instructional or curriculum areas.

- Activities related to the immunization requirements for school attendance.

- Performing activities that are specific to instructional, curriculum, student-focused areas.

- Compiling, preparing, and reviewing reports on textbooks or attendance.

- Enrolling new students or obtaining registration information.

- Conferring with students or parents about discipline, academic matters or other school related issues.

- Evaluating curriculum and instructional services, policies, and procedures.

- Participating in or presenting training related to curriculum or instruction (e.g., language arts workshop, computer instruction).

- Translating an academic test for a student.

- Performing clerical activities specific to instructional or curriculum areas.

ACTIVITY CODE (F)
DIRECT MEDICAL SERVICES

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 screens.

- Providing immunizations.

- Activities that are services or components of services listed in the state Medicaid plan.

- Developing a treatment plan (medical plan of care) for a student if provided as a medical service.

- Medical/health assessment and evaluation as part of the development of an IEP.

ACTIVITY CODE (G)
TRANSPORTATION FOR NON-MEDICAID SERVICES

School district employees should use this code when assisting an individual to obtain transportation to services not covered by Medicaid, or accompanying the individual to services not covered by Medicaid. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

- Scheduling or arranging transportation to social, vocational, and/or educational programs and activities.

ACTIVITY CODE (H)
TRANSPORTATION-RELATED ACTIVITIES IN SUPPORT OF MEDICAID
COVERED SERVICES

School district employees should use this code when assisting an individual to obtain transportation to services covered by Medicaid. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

- Scheduling or arranging transportation to Medicaid covered services.

ACTIVITY CODE (I)
NON-MEDICAID TRANSLATION

This code should be used by school employees who provide translation services related to social, vocational, or educational programs and activities 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 to access and understand non-medical services.

- Arranging for or providing translation services that assist the individual to access and understand non-medical programs and activities.

- Arranging for or providing signing services that assist the individual or family access and understand non-medical programs and activities.

ACTIVITY CODE (J)
TRANSLATION RELATED TO MEDICAID SERVICES

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 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.

ACTIVITY CODE (K)
PROGRAM PLANNING, POLICY DEVELOPMENT, AND INTERAGENCY
COORDINATION RELATED TO NON-MEDICAL SERVICES

This code should be used by school staff when performing activities associated with the development of strategies to improve the coordination and delivery of non-medical/non-mental health services to school age children, and when performing collaborative activities with other agencies. Non-medical services may include social, educational, and vocational services. 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 other non-medical services (e.g., social, vocational and educational programs) 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 non-medical school programs.

- Monitoring the non-medical delivery systems in schools.

- Developing procedures for tracking families' requests for assistance with non-medical services and the providers of such services.

- Evaluating the need for non-medical services in relation to specific populations or geographic areas.

- Analyzing non-medical data related to a specific program, population, or geographic area.

- Working with other agencies providing non-medical services to improve the coordination and delivery of services and to improve collaboration around the early identification of non-medical problems.

- Defining the scope of each agency's non-medical service in relation to the other.

- Developing advisory or work groups of professionals to provide consultation and advice regarding the delivery of non-medical services to the school populations.

- Developing non-medical referral sources.

- Coordinating with interagency committees to identify, promote and develop non-medical services in the school system.

ACTIVITY CODE (L)
PROGRAM PLANNING, POLICY DEVELOPMENT, AND INTERAGENCY
COORDINATION RELATED TO MEDICAL SERVICES

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 coverable medical/mental health 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/mental 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/mental health programs.

- Monitoring the medical/mental 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.)

- Evaluating the need for Medicaid services in relation to specific populations or geographic areas.

- Coordinating with interagency committees to identify, promote and develop EPSDT services in the school system.

- 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.

- Working with Medicaid resources, such as the managed care plans, to make good faith efforts to locate and develop EPSDT health services referral relationships.

- Developing advisory or work groups of health professionals to provide consultation and advice regarding the delivery of health care services to the school 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.

ACTIVITY CODE (M)
NON-MEDICAID TRAINING

This code should be used by school staff when coordinating, conducting, or participating in training events and seminars for outreach staff regarding the benefit of the programs other than the Medicaid program such as educational programs; for example, how to assist families to access the services of the relevant programs, and how to more effectively refer students for those services. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

- Participating in or coordinating training, which improves the delivery of services for programs other than Medicaid.

- Participating in or coordinating training, which enhances IDEA child find programs.

ACTIVITY CODE (N)
MEDICAID SPECIFIC TRAINING

This code should 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.

- Participating in or coordinating training, which improves the delivery of Medicaid services.

- Participating in or coordinating training, which enhances early identification, intervention, screening and referral of students with special health needs to EPSDT services. This is distinguished from training on the IDEA child find program.

ACTIVITY CODE (O)
REFERRAL, COORDINATION, AND MONITORING OF NON-MEDICAID SERVICES

School staff should use this code when making referrals for, coordinating, and/or monitoring the delivery of non-medical, such as educational services. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these activities.

- Making referrals for and coordinating access to social and educational services such as childcare, employment, job training, and housing.

- Making referrals for, coordinating, and/or monitoring the delivery of State education agency mandated child health screens (vision, hearing, scoliosis).

- Making referrals for, coordinating, and monitoring the delivery of scholastic, vocational, and other non-health related examinations.

- Gathering any information that may be required in advance of these non-Medicaid related referrals.

- Participating in a meeting/discussion to coordinate or review a student's need for scholastic, vocational, and non-health related services not covered by Medicaid.

- Monitoring and evaluating the non-medical components of the individualized plan as appropriate.

ACTIVITY CODE (P)
REFERRAL, COORDINATION, AND MONITORING OF MEDICAID SERVICES

School staff should use this code when making referrals for, coordinating, and/or monitoring the delivery of medical (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 F, Direct Medical Services.

- Making referrals for and/or coordinating medical or physical examinations and necessary medical/mental health evaluations.

- Making referrals for and/or scheduling 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/mental health diagnostic or treatment services, which may be required as the result of a specifically identified medical/mental health condition based on the findings other then when provided as a direct service.

- 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/mental health services.

- Providing information to other staff on the child's related medical/mental health services and plans.

- Providing information about Medicaid EPSDT screening (e.g., dental, vision) in the schools that will help identify medical conditions that can be corrected or improved by services through Medicaid.

- 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/mental 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.

ACTIVITY CODE (Q)
GENERAL ADMINISTRATION

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.

Below are typical examples of general administrative activities, but they are not all inclusive.

- Taking lunch, breaks, leave, or paid time not at work.

- Establishing goals and objectives of health-related programs as part of the school's annual or multi-year plan.

- Reviewing school or district procedures and rules.

- Attending or facilitating school or unit staff meetings, training, or board meetings.

- Performing administrative or clerical activities related to general building or district functions or operations.

- Providing general supervision of staff, including supervision of student teachers or classroom volunteers, and evaluation of employee performance.

- Reviewing technical literature and research articles.

- Other general administrative activities of a similar nature as listed above, which cannot be specifically identified under other activity codes.

TABLE I	
DIRECT PERSONNEL	
Job Position	**Position Number**
Occupational Therapist, Assistant or Aide Physical Therapist, Assistant or Aide Speech/Language Therapist, Assistant or Aide RN/LPN or Aide or Assistant Audiologist/Hearing Impaired Specialist/ Vision Specialist	**01**
Psychologist/Intern Psychiatrist Physician	**02**
Adjustment Counselor Social Worker Guidance Counselor Case Manager	**03**
* School personnel eligible to participate in this program are based on the actual functions that they perform, not on their job title.	

TABLE II DIRECT SUPPORT PERSONNEL	
Job Position	**Position Number**
Special Education: Director, Administrators/Assistants Education Team Leaders/Chairperson Clerical and Technical Support Personnel	**04**
Pupil Support Services: Director, Administrators/Assistants Health Coordinators Clerical and Technical Support Personnel	**04**
Nursing: Director, Administrators/Assistants Clerical and Technical Support Personnel	**04**
* School personnel eligible to participate in this program are based on the actual functions that they perform, not on their job title.	