



The MACS was funded by the Florida Department of Education to enable Florida school districts to participate independently in Florida's Medicaid school district administrative claiming program (SDAC).

Development of the MACS was a collaborative effort of the Florida Department of Education, the University of South Florida/Shared Services Network, the Florida Agency for Health Care Administration, Seminole County Public Schools, Orange County Public Schools, and Florida school districts participating in the October–December 2001 pilot of the system.

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### Medicaid Administrative Claiming System (MACS)

# OVERVIEW

#### Introduction

The MACS was developed to

- facilitate the Medicaid school district administrative claiming (SDAC) process
- create an option for school districts (use of the MACS enables school districts to obtain Medicaid cost recovery for administrative activities independently)
- create training and other information for increased oversight and program compliance.

The MACS consists of

- custom-developed software integrated with commerciallyavailable scanning hardware/software and spreadsheet software to create a system that automates the SDAC process
- three components: sampling, training, and cost/claim generation.

The MACS can be used by

- a single district
- a district group with one district acting as a data management

### Sampling

It is necessary to determine the amount of time school district staff spend performing Medicaid administrative activities. Time spent by school district staff on Medicaid administrative activities is captured through the use of quarterly time samples. Florida school districts may use cluster sampling methodology or random moment sampling methodology for the time samples. The MACS sampling module uses random moment sampling (RMS) methodology.

The MACS sampling software

- imports school district staff information
- randomly selects staff/moments to be sampled
- generates printed RMS forms
- generates mailing labels
- scans completed forms
- transfers raw data from scanned forms to MACS
- calculates activity percentages for each of the 13 activities (codes).

### **Training**

Medicaid requires all school district staff responsible for coding the activities described on the RMS form (by sampled school staff in the time study) to participate in training that ensures an adequate understanding of activities and the coding system used for data collection. The MACS training component offers school district coders several training options.

- web training
- pdf file format
- PowerPoint presentation format
- text format.

### **Cost/Claim Generation**

Results of the quarterly time samples are used in a series of calculations to determine the percentage of school district costs that can be claimed under SDAC. The MACS cost/claim generation component

- automates nine Excel spreadsheets developed by Florida's state Medicaid agency (Agency for Health Care Administration) for claim generation
- links the spreadsheets where possible.

### Hardware/Software Requirements

Following are the equipment/software requirements for school districts independently using the MACS and data management districts. School districts using the MACS as participants in a district group will not need to purchase or use specific equipment or software.

#### SOFTWARE REQUIREMENTS

#### Operating System

Windows operating system (one of the following):

- -Windows 98
- -Windows 98 Second Edition
- -Windows Me (Millennium Edition)
- -Windows NT4 SP6 or later,
  - with Microsoft Internet Explorer 4.01 SP1 or later
- -Windows 2000 Professional
- -Windows XP Professional

#### **Applications Software**

- -Microsoft Office 2000 or Microsoft Office XP (2002)
- —(Microsoft Access 2000 or Microsoft Access XP [2002] is optional; the Microsoft Access 2000, Runtime is provided with the MACS)
- —Remark Office OMR 5.5 by Principia Products (www.principiaproducts.com), approximately \$700

#### HARDWARE REQUIREMENTS

- existing PC: Pentium @ 300 MHz (minimum)
- -new PC: Pentium 4 @ 1.8GHz
- RAM (one of the following):
- -Windows 98, Windows 98SE-64 megabytes RAM (minimum),
  - 128 megabytes RAM recommended
- -Windows Me-64 megabytes RAM (minimum),
  - 128 megabytes RAM recommended
- -Windows NT 4.0 with Service Pack 6-64 megabytes RAM (minimum),
  - 128 megabytes RAM recommended
- -Windows 2000 Professional-256 megabytes RAM (minimum/recommended)
- -Windows XP Professional-256 megabytes RAM (minimum/recommended)
- hard drive space
- existing PC: at least 1 GB of free hard drive space new PC: 30 GB hard drive
- image scanner (one of the following):
- -Fujitsu ScanPartner 15C, approximately \$1000
- -Fujitsu fi-4120C, approximately \$1200
- -Fujitsu ScanPartner 620C, approximately \$1800
- —Fujitsu fi-4220C, approximately \$2100 —Fujitsu fi 4340C, approximately \$4100
- -other Remark Office OMR 5.5 compatible scanner listed at www.principiaproducts.com

# Medicaid Administrative Claiming System (MACS)

# **MACS TIMELINE**

	IMACS TIME	L <u>IINE</u>			
CALENDAR	INDIVIDUAL DISTRICT	DISTRICT GROUP			
12 weeks prior to beginning of quarter		Data management district sends MACS employee file specifications and Excel-based MACS Employees File Writer application to non-data management districts.			
6-10 weeks prior to beginning of quarter	Each district in district group ensures that any employee needing training receives it or is scheduled to receive it and that the district RMS coders receive in-depth training on SDAC activity codes.	Each district in district group ensures that any employee needing training receives it or is scheduled to receive it and that the district RMS coders receive in-depth training on SDAC activity codes.			
6 weeks prior to beginning of quarter		Each non-data management district sends its employee file to data management district.			
4-6 weeks prior to beginning of quarter	District -resolves any problems with employee file -imports employee file into MACS database -customizes (if necessary) the workday "from" and     "through" times of district's cost center in MACS     database -customizes calendar in MACS database -randomly selects moments to be sampled for the     quarter.	Data management district  -resolves any problems with each non-data management district's employee file  -imports each non-data management district's employee file into MACS database  -customizes (if necessary) the workday "from" and "through" times of each district's cost center in MACS database  -customizes each district's calendar in MACS database  -randomly selects moments to be sampled for the quarter.			
4 weeks prior to beginning of quarter	District prints RMS forms, puts them in envelopes, and places routing labels on the envelopes. The envelopes are sorted by date. The RMS envelopes are separated by week for easy handling by the district.	Data management district prints RMS forms, puts them in envelopes, and places routing labels on the envelopes. The envelopes are sorted by district, then by date. Each district's RMS envelopes are separated by week for easy handling by the district.			
3 weeks prior to beginning of quarter		Data management district mails all RMS forms to each non-data management district.			
2 weeks prior to beginning of quarter	District mails the first week's RMS form envelopes to employees and will continue mailing a new week's envelopes each week throughout the quarter.	Each district in district group mails the first week's RMS form envelopes to employees and will continue mailing a new week's envelopes each week throughout the quarter.			
Throughout the sampling quarter	District collects and codes its RMS forms. District scans coded RMS forms until the end of the quarter is reached or until 2401 forms or more correctly coded RMS forms have been received.	Each district in district group collects and codes its RMS forms. Managing district scans coded RMS forms from other districts in the group until the end of the quarter is reached or until 2401 forms or more correctly coded RMS forms have been received.			
Each week (or every other week) of the sampling quarter		Non-data management districts forward their coded RMS forms to the data management district			
Immediately following end of sampling quarter	District produces an activity count summary report for the quarter	Managing district produces an activity count summary report for the quarter containing an activity count breakdown by district and forwards to districts.			
After quarter ends	District prepares cost data and submits claiming invoice to state Medicaid agency.	Each district prepares cost data and submits claiming invoice to state Medicaid agency			

### Information Given to Staff Chosen for Sampling

# INSTRUCTIONS

### Completing the Random Moment Sample (RMS) Form

You have been selected to answer a series of simple questions to identify if you were involved in Medicaid-reimbursable activities that promote health or behavioral services for school district students. The statistics that are generated from all the sample forms collected during the quarter will be applied to a formula used to calculate a reimbursable claim to Medicaid.

Attached is a questionnaire (printed on blue paper) you will use to describe the specific activity you were performing on a predetermined date and time. This is called a random moment sample (RMS) form.

### Date/Time of Sample Section

Your RMS sample date and time (moment) are indicated on the top left portion of the form. This is the exact moment you will be asked to describe on the blue RMS form. Write this date and time on your day-planner or calendar as a reminder. Following are instructions for completing the blue form after your moment has occurred.

### **Activity Section**

#### Question #1:

In the space provided, indicate what you were doing at the moment of your sample time by writing down the specific activity in which you were involved. Refer to the example sentences on the back of the form; and be as specific as possible as to the issues, ideas or services presented.

#### Skilled Professional Medical Personnel Section

#### Question #2:

and

In the space provided, check "yes" if you have, at a minimum

- completed a two (2) year or longer program leading to an academic degree or certification in a medically related field
- possess a medical license, certificate, degree, or other document issued by a recognized national or state licensure or certifying organization.

If you do not meet the above, check "no" in the space provided. If you answer "no," skip question #5 and proceed to the signature portion of the form.

Please read the description on the bottom of the blue form to get a more thorough explanation of this question.

#### Question #3:

(Complete only if you answered "yes" to question #4.) Indicate whether you were using your medical skills, knowledge, and abilities while performing the activity during your sampled moment.

#### Question #4:

In the space provided, enter the beginning and ending times you performed the activity that required your medical skills, knowledge, and abilities.

### Signature/Date Section

Sign the form using your complete title and credentials. You should write the actual job designation for which you are employed by the school district. Examples: guidance counselor, physical therapist, EMD teacher, SLD teacher, clinic assistant. Date the form on or after the date of your random moment. Forms dated prior to this time will be returned to you. Provide a daytime work telephone number in the event you need to be reached to clarify any of your written responses. Finally, send your form back via courier to your school district Medicaid office.

Most importantly, if you still have any questions concerning the completion of your form, please call your RMS coordinator or contact:

(NOTE: Insert name and contact information for RMS coordinator or contact person.)

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SIGN/ DATE

program, my role in the program, and how to accurately complete the RMS form.

With a student for a direct therapy service visit.

Discussing the need for a mental health referral for a student with the school psychologist (or parent).

Discussing the development of a functional behavior assessment.

Providing a developmental assessment and diagnostic testing.

Providing consultation to other staff about student's medical needs.

Discussing implications for treatment of a student who has been diagnosed with a health or behavioral difficulty.

Arranging / discussing for special transportation needs with parent/staff member.

Discussing the least restrictive environment regarding a student's ESE school placement with regard to therapy/medical needs.

Assisting a family in filling out forms to refer them to a local assistance office to apply for Medicaid benefits.

Confirming if informal behavioral intervention was attempted and documented.

Consulting with other staff on a student's behavioral characteristics as it may relate to a manifestation of the student's disability.

Walking students from classroom to cafeteria.

Discussing the need for a referral for mental health services to determine if student has a behavioral disability.

Checking if individualized positive behavioral reinforcement procedures have been implemented.

Explaining extracurricular services and programs to a family that was interested in learning more about scholarships, remedial programs, and in-school child care.

Explaining to parents why the student needs therapy, i.e., speech, OT, PT, behavioral.

Participating in a training session to learn how to improve my knowledge in addressing the health/behavioral needs of district students.

Providing information to a classroom teacher so that basic knowledge of recommended classroom behavioral interventions can be implemented.

Conferring with district staff such as psychologist, social worker, guidance counselor, or behavioral specialist on a student's behavioral plan.

Explaining the O.T., P.T., or Speech needs of the student to another staff member or parent.

Discussing the need for adaptive devices for fine motor control, i.e., splints, mechanical braces.

Discussing the need for assistive technology device to enhance communications skills, i.e., Dynavox, language board.

Discussing the need for assistive devices to improve a student's mobility, i.e., cane versus walker.

Discussing with PT on how to set up exercises for student for optimal improvement of fine motor skills.

Developing strategies to improve medical/mental health services for district students.

Discussing the need to dismiss a child from speech/language services

Collaborating with other staff members and principal concerning bus duty.

Coordinating student's treatment schedule with other therapists and teachers.

Identifying therapy home needs and providing the parents information on how to carry it out.

Arranging for translation assistance at a parent teacher conference with deaf parent to discuss a student's grades.

Participating in a training session to learn how to screen and refer students with special needs for health or behavioral services.

Determining how to handle threats to other students from behavioral problem students.

Attending a health/behavioral coordinating meeting to identify the reduction of service overlaps, duplication and establishing policies and procedures to attain this goal.

Coordinating services with outside agencies to get a student to a healthcare/behavioral provider.

Talking with teacher about lack of progress for student's communication problems.

Scheduling check-ups, health evaluations or mental health diagnostic services for a student with outside agencies.

Ordering supplies and processing payroll.

Lesson planning and correcting papers.

Copying files and compiling brochures to provide information to student/family about available medical/behavioral assessments.

Not at work due to personal leave/sickday.

Not scheduled to work.

### Information Given to Staff Chosen for Sampling

### The Florida School District Administrative Claiming (SDAC) Program

## What Is the School District Administrative Claiming Program, and How Does It Involve Me?

You have been randomly selected to participate in the quarterly time sampling for the School District Administrative Claiming Program (SDAC). Our school district's participation in the SDAC Program allows us to be reimbursed for costs associated with activities performed by school district staff related to the administration of Florida's Medicaid program. These activities performed by school district staff may include Medicaid outreach, eligibility intake, information/referral, coordination/monitoring of health services, and interagency coordination. Following are some examples of outreach activities for which school districts may be reimbursed:

- designing and implementing strategies to identify individuals who may be at high risk of poor health outcomes
- designing and implementing strategies to respond to emergency health problems affecting individuals who may be at risk of poor health outcomes
- compiling brochures; obtaining services; informing families and distributing literature about the benefits and availability of health and behavioral services; child find activities; informing parents/guardians about available medical/behavioral assessments; establishing eligibility for migrant programs, targeted case management, or Medicaid-reimbursable services provided by the county health department
- attending a staff meeting to develop a plan to provide more effective outreach to students and actual plan development
- informing students and families of the benefits/medical/mental health services available through the Medicaid program
- providing information about in-school health/behavioral screenings that will help identify medical conditions that can be corrected or ameliorated
- informing families about Medicaid reimbursed equipment for physically impaired children (hearing aids, Dynavoxes, wheelchairs, etc.)
- planning for the care a student needs or participating in a student study team meeting or IEP staffing in which the need for services that affect a student's behavioral and health needs are discussed
- setting up the student with the proper care through consultations and/or getting the student to a provider
- monitoring and evaluating the medical components of the individualized plan as appropriate

- participating in meetings/discussions to coordinate or review a child's need for services covered by Medicaid
- establishing referral policies and procedures between agencies
- developing advisory or work groups of health professionals to provide consultation and advice regarding the delivery of health care services to certain Medicaid populations
- identifying gaps or duplication of medical/mental 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/mental health programs (such as developing the annual school health plan)
- monitoring the delivery of medical/mental health services in schools
- developing procedures for tracking the requests of families for assistance with Medicaid services and providers
- development and monitoring of contracts for health care, such as contracts with private providers or provider groups.

#### Random Moment Sampling/RMS Form

For our school district to receive SDAC reimbursement, we must have a way of determining the extent to which Medicaid-reimbursable activities are being performed. Our school district has opted to use a method called random moment sampling (RMS), a quick and easy process for selected school personnel to help the school district gather information to be processed for reimbursement for administrative claiming. Instead of requiring you to write down everything you do during the day in order to capture claimable activities, Medicaid allows us to determine what you have done during a specific moment in time. This is called the random moment sample. The RMS form captures the activity in which you are involved on a specific date and time during your workday.

## Importance of Accuracy When Completing the RMS Form

Completing your RMS form accurately and returning it in a timely fashion will contribute positively to our school district. Not only are you taking credit for the work you perform (that the Medicaid program is recognizing as assisting and identifying the health and behavioral needs of your students), but the money generated from this program will help augment the services you and others already provide. If you are involved in promoting, developing, coordinating, or monitoring the health and behavioral needs of a student, you may be performing an outreach activity.

### Information Given to Staff Chosen for Sampling

### The Florida Medicaid Program

#### What Is Medicaid?

Medicaid is a health care program that helps people who cannot afford medical care. These are people who have low income or limited savings accounts and other assets.

#### Income Guidelines for Medicaid

- Florida sets income and savings limits, which vary for different groups, in order for a resident to receive Medicaid, and only those who have income and resources below the limits can qualify.
- People who are "medically needy," those who have a lot of medical debt, can qualify for Medicaid even if their income and resources are above the prescribed limits.
- People who are medically needy may be required to pay a share of their monthly medical costs based on the patient's monthly income. This share must be paid before Medicaid will cover other medical bills.

#### What Does Medicaid Cover?

Medicaid covers more than 50 services. There is a Medicaid coverage booklet in each school district office that lists these services. This booklet can assist you with student referrals. There are some limits, but covered services generally include physician and nursing services; vision services; hearing services; dental services; community mental health services; durable medical equipment and supplies (ambulatory equipment such as canes, crutches, walkers); inpatient and outpatient hospital services; lab and x-ray services; services given in county health departments; prescription drugs; care in nursing facilities; physical, occupational, and speech therapy; ambulance and other transportation services; and prenatal care/family planning.

#### Child Health Check-Up Program

Medicaid's Child Health Check-Up Program covers special health services for children from birth through age 20. The program provides examinations to check children's general health, including vision, hearing, diet, growth and development, and dental health. The exams look for certain health problems, such as signs of heart and kidney disease; lead poisoning; TB; parasites; anemia and sickle-cell anemia; and eye, ear, nose, and throat problems. The program includes other child health services: immunizations to protect children against serious illnesses and finding and treating illnesses, including referrals for eyeglasses, dental care, and hearing aids, if needed.

#### Additional Medicaid Resources

#### Florida Medicaid Summary of Services—

This publication provides a brief description of services offered by the Florida Medicaid Program. Information is included on Medicaid eligibility, Medicaid services, and Medicaid's managed care programs. It can be found on the state Medicaid agency web site (AHCA) at http://myflorida.com. (Go to "health care" under the agencies list, then go to "Medicaid" when the Agency for Health Care's web page appears.) Printed copies may be obtained for a fee from the Medicaid area offices and from Medicaid Provider Services, 2308 Killearn Center, Suite 200, Tallahassee, Florida 32308 (850) 922-7344.

## Florida Medicaid Coverage and Limitations Handbooks and Provider Reimbursement Handbooks—

These handbooks provide detailed information for each service covered under Medicaid. The handbooks can be downloaded at the Medicaid fiscal agent's website at http://floridamedicaid.consultec-inc.com

#### Medicaid Area Office School Services Representatives—

A list of AHCA's area office school representatives who are available to assist school districts in interpreting the application of AHCA policy to school districts and answer questions related to Medicaid services can be found at http://ssn.usf.edu/medicaid.