From: Jett, Leila <<u>Leila.Jett@ahca.myflorida.com</u>>

Sent: Tuesday, July 20, 2021 1:48 PM

Subject: 2019 Medicaid Certified School Match (MCSM) Monitoring Updates

Hello,

In response to ongoing feedback from schools/districts and the delays COVID-19 imposed on the monitoring process, the Agency has determined it necessary to expedite the Medicaid Certified School Match (MCSM) monitoring process for calendar year 2019. The MCSM record requests for 2019 will consist of only one (1) claim per service type (PT, OT, SLP, AAC, behavioral health, nursing, and transportation) for each school/district.

With the expiration of Florida's state of emergency, we are reverting to the original monitoring time frames/deadlines for record requests, effective 07/01/2021. Please note this change also applies to districts still in the process of completing 2018 monitoring requests: we will not be able to continue offering the additional flexibility with extensions on record requests and will return to the original monitoring timeframes as stated below.

MCSM monitoring process:

- MCSM monitoring consists of claim reviews via medical record requests annually, with potential for additional ad hoc requests to ensure continued compliance. The monitoring timeframe takes place the year after the one-year-timeframe for claims submissions has ended to ensure all claims in FMMIS are final (e.g., medical services that took place in calendar year 2019 can be billed up until 12/31/2020, so the 2019 monitoring process begins the following year, in 2021).
- Typically, the Agency randomly selects two paid claims per service type (occupational therapy, physical therapy, speech therapy, augmentative and alternative communication [AAC], behavioral health, nursing, and transportation) and requests medical records from the district/school to support the sampled claims. The district/school receives the records request letter, documentation checklist, and monitoring tools (monitoring tools are not required to be completed by the district/school; they are attached as an additional checklist for the provider to gauge their compliance and to make notes). *Note: To expedite the 2019 monitoring process, only one claim per service type will be selected for 2019.
- The district/school has 30 calendar days to collect and submit the records, with a maximum of one extension granted, if deemed warranted by the Agency.
- Once the records are received by the Agency, the Agency school health quality monitor reviews each record using the corresponding monitoring tool for the service type.
- · After the initial review is conducted, the Agency quality monitor reaches out to the

district/school with quality recommendations and requests additional records, if necessary. The district/school has two weeks (14 calendar days) to submit additional documentation. There is only one opportunity for resubmission of the records. Any additional documentation sent after the resubmission deadline must be part of an official appeal of the final report results.

- Once final documentation is submitted and the draft monitoring report is complete, the
 Agency quality monitor reaches out to the district/school to review the updated results. If
 documentation is not submitted by the due date for the second submission, the draft report
 will be finalized as-is and proof of void for non-compliant claims will be requested on the
 report.
- The Agency quality monitor then submits the report to Agency management for approval and the final report is sent to the school district/school. The school district/school has two weeks (14 calendar days) to appeal the results of the report and must include any supplemental documentation necessary for reconsideration.
 - Appeals are reviewed and considered by Agency management and additional documentation submissions are re-reviewed by the Agency quality monitor as necessary.
 The Agency notifies the district/school of the appeal results and an updated MCSM monitoring report is sent if results changed due to appeal.
- Quality results are determined as "met" or "not met" based on documentation requirements and provider credentials. If a district/school's records compliance is considered "not met" for the year, the Agency may make additional ad hoc requests related to the non-compliant documentation/service types to ensure the district/school has remediated any issues.

Thank you,

Leíla Jett

Medical/Health Care Program Analyst

Agency for Health Care Administration Bureau of Medicaid Quality Clinical Compliance Monitoring Unit Office: (850) 412-4220

Leila.Jett@ahca.myflorida.com







Privacy Statement: This e-mail may include confidential and/or proprietary information, and may be used only by the person or entity to which it is addressed. If the reader of this e-mail is not the intended recipient or his or her authorized agent, the reader is hereby notified that any dissemination, distribution, or copying of this e-mail is strictly prohibited. If you have received this in error, please reply to the sender and delete it immediately.