

# Quarterly Financials Medicaid Administrative Claim Training

West Virginia Association of School Business Officials

*October 24, 2019*

# Agenda

Welcome	
WV Medicaid Administrative Claiming	4
RMTS and Staff Pool Lists	7
Quarterly vs. Annual Cost Reporting	12
Claiming Allowable Costs	14
Calculating the Claim	20
Claiming System	24
Important Dates and Timeline	28
Contact Information	30





# **West Virginia Medicaid Administrative Claiming**

# WV Medicaid Administrative Claiming

- The Medicaid Administrative Claiming (MAC) Program offers reimbursement for the costs of the administrative activities, such as outreach, that support the DHHR/BMS School Based Health Services program.
- These activities fall into several categories:
  - ✓ Medicaid Outreach
  - ✓ Facilitating Medicaid Eligibility Determination
  - ✓ Transportation Related to Medicaid Services
  - ✓ Translation Related to Medicaid Services
  - ✓ Program Planning, Policy Development, and Interagency Coordination Related to Medicaid Services
  - ✓ Medicaid-Related Training
  - ✓ Referral, Coordination and Monitoring of Medicaid Services



# Typical MAC Reimbursable Activities

- The following activities are examples of services which may be reimbursable under the MAC program.

**Medicaid Outreach to families regarding the WV Medicaid program and available services**

**Attending an IEP meeting and discussing health-related services**

**Observing a child as part of the process for referring students for intervention services**

**Scheduling/ coordinating medical screens or mental health diagnostic services**

**Arranging Transportation Services to Medicaid Services**

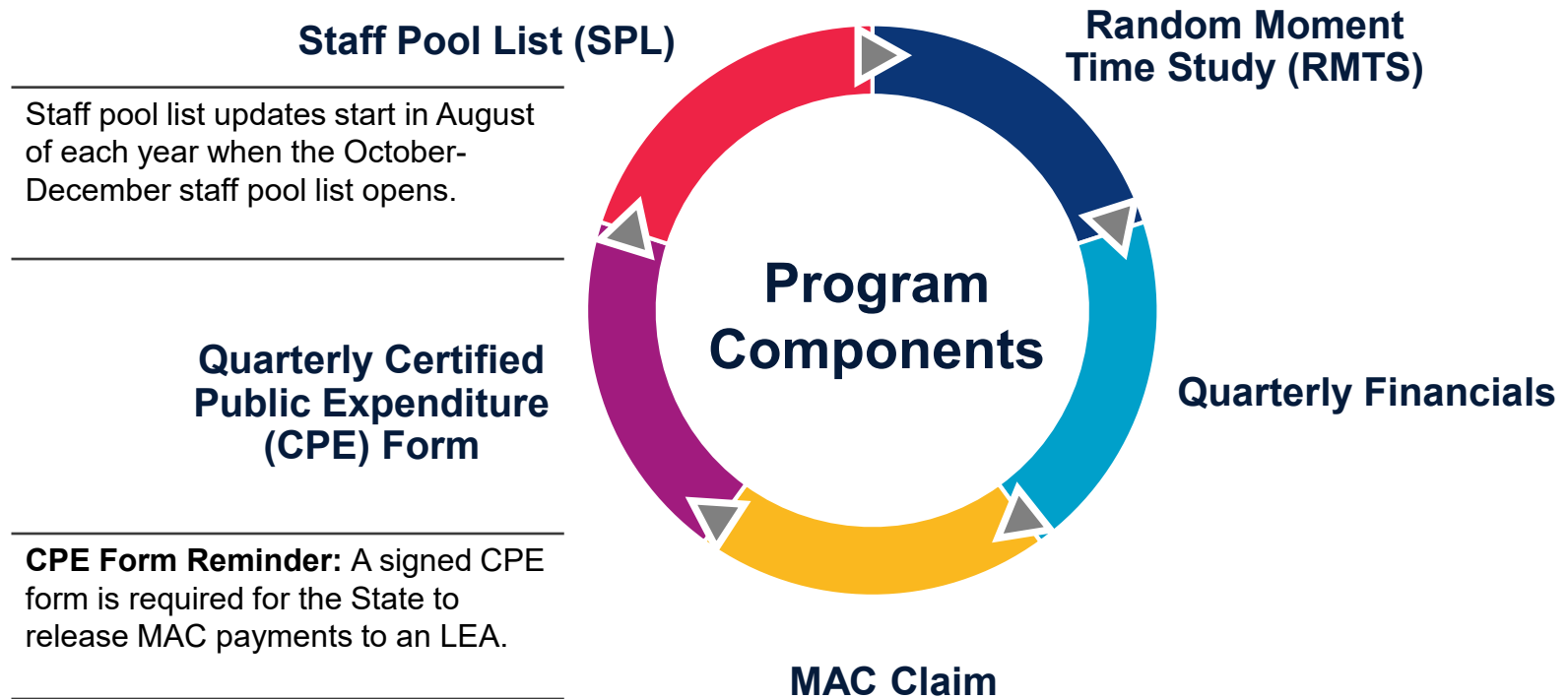
**Arranging and Providing Translation (Oral, Sign Language, Braille Transcription) Regarding Medicaid Services, Outreach and Enrollment**





# RMTS and Staff Pool Lists

# MAC Program Components



# What is the SPL and RMTS?



## Staff Pool List (SPL)

The SPL is the foundation of both the MAC and Annual Cost Settlement process, and is updated three times per year with each district's "list" of staff employees eligible for the RMTS survey.

The SPL indicates who at your district provides services on behalf of the MAC/SBHS program.

Everyone included on the SPL is eligible to receive RMTS moments.



## Random Moment Time Studies (RMTS)

The RMTS process is a federally approved technique of producing a statistically valid sampling of randomly selected moments (one moment = one minute) that are assigned to randomly selected participants. **This study determines the portion of time individuals spend doing reimbursable activities.**





# RMTS and Staff Pool Lists

## What are the four staff pools?

- Direct Service
- Targeted Case Management
- Personal Care Providers
- Administrative

## Who should be added to each staff pool?

**Reminder:** The participants certified each quarter must meet the provider credential and license requirements necessary to provide services.

### Targeted Case Management

- Special Education Teacher
- Targeted Case Management Specialist
- Special Needs Care Coordinator

### Personal Care Providers

- Personal Care Aide
- Class Room Aide
- Interpreter



# RMTS and Staff Pool Lists

## Direct Service

- Licensed Audiologist
- Audiologist Assistant
- Licensed Registered Nurse (RN)
- Licensed Occupational Therapist
- Licensed Occupational Therapy Assistant
- Licensed Physical Therapist
- Licensed Physical Therapy Assistant
- Certified Speech Language Pathologist
- Certified Speech Language Pathologist Assistant
- Licensed and State Certified Psychologist
- Licensed School Psychologist
- Licensed Psychologist Independent Practitioner

## Administrative

- School Administrators – Principals and Assistant Principals.
- State Certified Counselor
- Non-certified Psychologist/Psychologist Interns
- Non-certified Social Worker
- Psychologist Intern
- Special Education Administrator
- School Bilingual Assistant
- Speech Language Pathologist (Non-Masters Level and Non-Licensed)
- Program Specialist
- Other groups/individuals that may be identified by the LEA





# Quarterly vs. Annual Cost Reporting

# Quarterly vs. Annual Cost Reporting

## MAC (Quarterly) Medicaid Administrative Claiming

Offers reimbursement for Medicaid allowable administrative activities, such as outreach, and activities that support Annual Services.

### Components of MAC Costs

- Quarterly reporting
- Cash Based Accounting
- Medicaid Eligibility Rate (MER)
- **ALL** Staff must be included in the RMTS to report costs
- Costs for each of the four Staff Pools are reported
- Travel Costs

**Cost report provides an additional reimbursement stream *in addition to* funding for provision of direct medical services**

## Annual Cost Settlement

Supports the Delivery of Direct Medical Services and Specialized Transportation. Reimbursement is provided for medically necessary services that are provided to Medicaid eligible students.

### Components of Direct Service Costs

- Annual reporting
- Accrual Based Accounting
- IEP Ratio
- Direct Service Contract providers are **NOT** included in the RMTS
- Administrative Costs are **NOT** reported
- Direct Service Contractor Costs are reported

**Cost report tied directly to the interim reimbursement that school districts receive through Medicaid billing for direct medical services**





# Claiming Allowable Costs

# Claiming Allowable Costs

- Only costs incurred by providers are allowable
  - ✓ Report only those costs associated with specific individuals participating in the RMTS program (i.e. how much it costs to employ each staff person)



# Claiming Allowable Costs

---

## Salaries

- Include all costs paid (gross) to the participant including any additional compensation
- 

## Employee Benefits

- Include all benefits paid to staff
- Some examples include:
  - ✓ Dental Insurance
  - ✓ Health and Accident Insurance
  - ✓ Life Insurance
  - ✓ Long-term Disability Insurance
  - ✓ FICA
  - ✓ Medicare
  - ✓ Tuition Reimbursement
  - ✓ Worker's Compensation
  - ✓ Teachers Retirement or Other Retirement Payments



# Claiming Allowable Costs

---

## Materials & Supplies

- Materials & Supplies must be identified as used by the staff for which they are included
- Materials & Supplies can be identified using a “reasonable allocation method”
  - Some methods include - headcount or FTE
- Please do not include any other costs used by direct medical service providers to deliver services to each individual student. These are reported as *direct medical-other costs* on the Annual Cost Report.



# Claiming Allowable Costs

---

## Staff Travel

- Costs for specific staff related to travel for trainings
  - Examples include:
    - ✓ Mileage to trainings
    - ✓ Conference related travel expenses
- 

## Staff Professional Dues and Fees

- Report by service the total costs for professional dues and fees associated with the staff listed in the Quarterly Financial Report.
- 

## Contracted Staff Costs

- Contracted Staff are only allowable to be included on the Administrative Staff Pool.
    - ✓ Example: SBHS Admin who are billing on-behalf of other LEAs
- 



# Claiming Allowable Costs

## What Costs are Non-Allowable?

- **Federal funds**

- ✓ The Claiming System requires that total costs be reported, with a separate column for reporting costs paid with Federal funds.
- ✓ Staff who are 100% federally funded should not be included in the staff pool list

- **State flow-through funds**

- ✓ Funds received from the Federal government by the State of West Virginia and then distributed to Local Education Agencies (LEA)

- **Costs included in the Unrestricted Indirect Cost Rate calculation**

- ✓ Staff who are paid entirely from this area should not be included in the staff pool list.





## Calculating the Claim

# Calculating the Claim

- **The main components used to calculate a claim include:**
  - ✓ Random Moment Time Study Results (Statewide)
  - ✓ Quarterly Expenditure Data (District-Specific)
  - ✓ Medicaid Eligibility Rates—MER (District-Specific)
  - ✓ Unrestricted Indirect Cost Rates—ICR (District- Specific)
  - ✓ Federal Financial Participation—FFP (State)
- **The claim is calculated by distributing the allowable costs and applying the above factors.**



# Calculating the Claim

Cost Pool	Percent of Time Spent on Reimbursable Activity X	Total Costs Entered into MCRCS X	Medicaid Eligibility Rate X	General Admin Overhead Factor X	= Total Gross Claim Amount
X	0.14050%	\$1,348,515	N/A	N/A	\$1,895
X	0.00%	\$1,348,515	N/A	N/A	\$0
X	0.00%	\$1,348,515	78.76%	N/A	\$0
X	0.00%	\$1,348,515	78.76%	N/A	\$0
X	0.03512%	\$1,348,515	78.76%	N/A	\$373
X	0.21075%	\$1,348,515	78.76%	N/A	\$2,238
X	5.65508%	\$1,348,515	78.76%	N/A	\$60,064
X	17.00035%	\$1,348,515	N/A	5.77%	\$13,226

Cost Pool Total Gross Claim : \$77,796

- The MAC claim is calculated by taking the Total Costs Entered by the District into the Claiming System, and allocating them into each of the separate cost pools: **Direct Service, Targeted Case Management, Personal Care and Administrative Support.**
- Once four cost pools have been established, the total costs for each are separately multiplied through both the quarterly **Statewide** Random Moment Time Study (RMTS) percentages and the LEA's Medicaid Eligibility Rate (MER).



# Calculating the Claim

## Example LEA MAC Claim

		Total Gross Claim Amount
Direct Service Providers	\$	\$29,770
Targeted Case Management	\$	\$6,621
Personal Care	\$	\$0
Administrative	\$	\$54,376
<hr/>		
<i>Gross Claim Subtotal</i>	\$	308,192
Indirect Cost Rate (x 16.21 %)	\$	14,713
<i>Total Gross Claim Amount</i>	\$	105,481
Federal Financial Participation (FFP) Rate		x 50%
<hr/>		
<b><i>Total Net Claim Subtotal</i></b>		<b>\$52,741</b>





# The Claiming System

# The Claiming System

## Using the System for MAC Reporting

- Manage and keep contact information current in the Claiming System.
- LEAs will submit MAC Financial (Cash Basis) data quarterly:
  - ✓ July – September
  - ✓ October – November
  - ✓ January – March
  - ✓ April – June
- Each quarter is pre-populated with information from the Random Moment Time Study (RMTS) staff pool lists
  - ✓ Including Direct Replacements
  - ✓ *No Direct Service Contractors should be included*
- Data can be entered manually or exported/imported.
- Edit Checks are imbedded in the Claiming System





# The Claiming System

## Desk Reviews

- In order to ensure accuracy and completeness of each cost report, PCG conducts desk reviews after all cost reports have been certified.
- During this time, PCG will review all LEA responses to triggered warnings and thresholds.
- **Desk reviews help protect LEAs from federal audits.**

PCG conducts desk reviews in the PCG Claiming System; Communication with LEAs will take place in the system, eliminating back and forth email correspondence.

## Certified Public Expenditures (CPE) Forms

- Signing off on your Certification of Public Expenditures Form ensures the federal government that all costs and ratios are reported accurately and supported by documentation.



# The Claiming System

## Reporting Cost for the July – September Quarter

- The April – June staff pool will pre-populate the participants eligible to report costs
- Direct Replacements can be done for positions that were filled by new participants
  - This feature can only be used for existing positions where staff were replaced during the quarter
- RMTS results from the subsequent quarters are averaged for the calculation





# Important Dates and Timeline

# Important Dates and Timeline

## MAC Timelines

Quarter	Type	Deadline
July – Sept 2018	Original	November 22, 2019
April – June 2019	Original	November 22, 2019
April – June 2016	Amendment	November 2019
Jan – Mar 2018	Contractor Adjustments	November 2019
April – June 2018	Contractor Adjustments	November 2019
Jan – Mar 2019	Add Admin Contractor Costs	TBD

## Annual Cost Settlement (ACR) Timelines

ACR Opens in Claiming System	December 2, 2019
FY19 ACR Due	December 31, 2019





## Contact Information

# Contact Information

## Lauren Rodrigues

Senior Consultant

[WVSBHS@pcgus.com](mailto:WVSBHS@pcgus.com)

1-877-908-1745

## Jennifer Taylor

Senior Consultant

[WVSBHS@pcgus.com](mailto:WVSBHS@pcgus.com)

1-877-908-1745

## Patrick Cassidy

Senior Client Service  
Associate

[WVSBHS@pcgus.com](mailto:WVSBHS@pcgus.com)

1-877-908-1745





**Solutions that Matter**