State Of California - Health and Welfare Agency

Pete Wilson, *Governor*

**DEPARTMENT OF HEALTH SERVICES**
714/744 P Street
P. O. Box 942732
Sacramento, California 94234-7320
(916) 657-1460

August 19, 1997

**PPL No.** 97-15

To All County Medi-Cal Administrative Activities (MAA)/
Targeted Case Management (TCM) Coordinators and
Advisory Committee Members

**MEDI-CAL ADMINISTRATIVE ACTIVITIES AND TARGETED CASE MANAGEMENT PROGRAM, FISCAL YEAR 1997-98 TIME SURVEYS**

The purpose of this transmittal is to advise all local governmental agencies (LGAs) participating in MAA and/or TCM, that the fiscal year (FY) 1997-98 time survey shall take place during the month of September, 1997. Time survey training will be provided during the month of August, 1997. Additional information relative to the training dates and locations will be provided under separate cover.

The time surveys are to be conducted using only form(s) DHS 7093 and DHS 7094 with a revision date of (7/97). All other versions of the forms are to be discarded. The time survey forms have been revised to:

1. Allow eligible staff to time survey to Medi-Cal Outreach B1, using actual Medi-Cal client counts, or other DHS approved methodologies, for deriving the discount percentage;

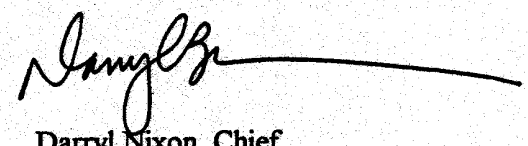
2. Allow eligible staff to time survey to Medi-Cal Outreach B2, deriving the Medi-Cal discount percentage using the DHS published countywide Medi-Cal averages;

3. Allow for the capturing of program planning and policy development activities by staff who perform this MAA less than full-time (Form DHS 7094, only.)

4. Clarify that for all programs administered by DHS' Childhood Lead Poisoning Prevention Branch, all TCM services and related MAA must be time surveyed as "Other Program/Activities." This applies only to LGAs which do ***NOT*** segregate their Lead staff from other staff performing TCM and MAA, i.e., they wear "multiple hats." Lead staff whose costs are segregated from other staff performing TCM and MAA, shall not participate in the time survey.

If you have any questions, please contact the Administrative Claiming Unit analyst assigned to your LGA.

Sincerely,



Darryl Nixon, Chief
Medi-Cal Benefits Branch

Enclosures

| | |
|---|---|
| Medi-Cal Administrative Activities: | X |
| Targeted Case Management: | X |
| Policy Effective Date: | 7/ 1/97 |
| Policy Reference: | |

cc: Bill Lasowski, Technical Director
Office of Financial Services
Health Care Financing Administration
7500 Security Blvd., MS-C4-17-27
Baltimore, MD 21244-1850

Richard Chambers
Associate Regional Administrator
Health Care Financing Administration
75 Hawthorne Street, Suite 401
San Francisco, CA 94105

Larry Lee, Accountant
Division of Medicaid
801 I Street, Room 210
Sacramento, CA 95814

Cathleen Gentry
MAA/TCM Host County Liaison
455 Pine Avenue
Half Moon Bay, CA 94019

# PROGRAM TIME SURVEY FOR CASE MANAGER

☐ Case manager ☐ Supervisor ☐ Support person to case manager

Month and year ____/19 ____

| Name (Last, first, middle initial) | Civil service classification | Employee number | Program and claiming unit | Claiming unit location |
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| TYPE OF SERVICE | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Other Programs/Activities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Direct Patient Care | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medi-Cal Outreach (A) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medi-Cal Outreach (B1) (Actual Count/Other) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medi-Cal Outreach (B2) (County-wide Average) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Facilitating Medi-Cal Application | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Targeted Case Management | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MAA/TCM Coordination and Claims Administration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MAA Implementation Training | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| General Administration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Paid Time Off | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TOTAL HOURS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| Employee's signature | Employee's telephone number | Date | Supervisor's signature | Date |
|---|---|---|---|---|
| | (  ) | | | |

**INSTRUCTIONS:**

- See reverse of form for definitions of "TYPE OF SERVICE."
- Survey must be completed on a daily basis for the entire survey month. Enter the amount of time spent performing each type of service during your regular work hours in the column for that day (OT and the earning of CTO are coded to General Administration).
- Draw a vertical line through all columns representing days that are unpaid days (regular days off and unpaid leave).
- Record all of your time in 15 minute increments. If using fractions, use 1/4, 2/4, and 3/4 to record partial-hour increments. If using decimals, use .25, .50, and .75 to record partial-hour increments.
- At the end of each day, total each column in the "TOTAL HOURS" box at the bottom of the column. Each day's total must equal hours worked per day.
- At the end of the month, total all boxes in each row and record the sum in the "TOTAL" box at the right margin. Total amounts and record the sum in the box at the bottom-right corner.
- The sum in the bottom-right corner must equal the sum of the bottom row. Sign and date your survey on the last working day of the month and give it to your supervisor.

# TYPE OF SERVICE DESCRIPTIONS

**Other Programs/Activities**
Time spent on activities unrelated to the administration of the Medi-Cal program, e.g., community service; education programs; program planning and policy development for non-Medi-Cal programs; and/or Childhood Lead Poisoning Prevention Program administrative activities and case management. Include time spent giving or receiving training not related to the Medi-Cal program.

**Direct Patient Care**
Time spent providing direct physical or mental health services to patients. Include time spent giving or receiving training related to the provision of a Medi-Cal service.

**Medi-Cal Outreach (A) (Not Discounted)**
A campaign, program, or ongoing activity that is ***targeted to***: (1) bringing potential eligibles into the Medi-Cal system for the purpose of determining Medi-Cal eligibility; or (2) bringing Medi-Cal eligible people into Medi-Cal services. This includes the giving or receiving of training related to "Medi-Cal Outreach (A)." Outreach A activities are campaigns, programs, or ongoing activities that are ***directed toward***: (1) the general population for the purpose of providing information about the Medi-Cal program in order to encourage those individuals who may be eligible for Medi-Cal to apply for Medi-Cal; or (2) bringing Medi-Cal eligibles into specific Medi-Cal covered services.

**Medi-Cal Outreach (B1) and (B2) (Discounted)**
Outreach B activities are campaigns, programs, or ongoing activities that are ***directed toward*** bringing both Medi-Cal and non-Medi-Cal persons into health care services. This includes the giving or receiving of training related to "Medi-Cal Outreach (B)." Costs must be reduced or ***discounted*** by the appropriate Medi-Cal percent since the activity benefits or involves both Medi-Cal and non-Medi-Cal populations. Examples include: (1) campaigns directed toward bringing high-risk populations into health care services covered by Medi-Cal; (2) telephone, walk-in, or drop-in services for the purpose of informing or referring persons to services covered by Medi-Cal; and (3) the Medi-Cal health education component that is included as part of a broader general health education program.

NOTE: ***Medi-Cal Outreach B1***: Used when the Medi-Cal discount percentage methodology is the actual Medi-Cal client count or a Department of Health Services (DHS) approved methodology other than the county-wide average. The method must be described in the approved claiming plan.

***Medi-Cal Outreach B2***: Used when the approved discounting methodology is the county-wide Medi-Cal average, published by the State DHS.

**Facilitating Medi-Cal Application (Eligibility Intake)**
Time spent: (1) explaining Medi-Cal eligibility rules and the Medi-Cal eligibility process to prospective applicants; (2) assisting an applicant with filling out a Medi-Cal eligibility application; (3) gathering information related to the application and eligibility determination/redetermination from a client; (4) providing/packaging necessary forms in preparation for the Medi-Cal eligibility determination; and/or (5) giving or receiving training related to "Facilitating Medi-Cal Application." This activity ***does not*** include the eligibility determination itself.

**Targeted Case Management (TCM)**
Time spent providing one or more components of TCM services, such as assessment, plan development, referral, follow-up, crisis intervention planning, re-evaluation, or on other activities that are directly related to the provision of TCM services. Include time spent giving or receiving training related to the provision of one or more TCM service components.

**Medi-Cal Administrative Activities (MAA) and/or TCM Coordination and Local Governmental Agency (LGA) Claims Administration**
Time spent: (1) drafting, revising, and submitting MAA claiming plans, and TCM performance monitoring plans; (2) serving as a liaison with claiming programs within the LGA and with the state and federal governments on MAA/TCM; (3) monitoring the performance of claiming programs; (4) administering LGA claiming, including compiling, preparing, submitting, revising, and overseeing TCM and MAA claims on an LGA-wide basis to the State; (5) attending training sessions, meetings, and conferences on TCM and/or MAA; (6) training LGA program and subcontractor staff on state, federal, and local requirements for MAA/TCM claiming performed by "MAA/TCM Coordinator and Claims Administration" staff, ***only***; (7) ensuring that MAA and TCM claims do not duplicate Medi-Cal claims for the same activities from other providers (this includes ensuring that services are ***not*** duplicated when a Medi-Cal beneficiary receives TCM services from more than one case manager or program); and (8) any other reasonable activities directly related to the LGA's administration of TCM and MAA.

**MAA Implementation Training**
Time spent by persons, other than MAA/TCM Coordination and Claims Administration staff, giving or receiving training related to the overall implementation of the MAA program. For example, general training on MAA and/or on completing MAA/TCM time surveys.

**General Administration**
Time spent: (1) attending or conducting general, nonmedical staff meetings; (2) developing and monitoring program budgets; (3) providing instructional leadership; (4) site management; (5) supervising staff or participating in employee performance reviews; (6) reviewing departmental or unit procedures and rules; (7) presenting or participating in in-service orientations and programs; (8) health promotion activities for county employees; (9) earning of compensatory time off (CTO) or paid overtime; (10) breaks; and (11) the giving or receiving of training ***unrelated*** to the performance of MAA/TCM, e.g., computer training or generalized supervision training.

**Paid Time Off**
Includes vacation, sick leave, paid holiday time, paid jury duty, and any other employee time off that is paid. This does ***not*** include breaks, off payroll time (dock), or the taking of CTO.

# ,GRAM TIME SURVEY FOR EMPLOYEES PERFORMING ,MEDI-CAL ADMINISTRATIVE ACTIVITIES

☐ SPMP ☐ Non-SPMP

Month and Year ____/19____

| Name (Last, first, middle initial) | Civil service classification | Employee number | Program and claiming unit | Claiming unit location |
|---|---|---|---|---|
| | | | | |

| TYPE OF ACTIVITY | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Other Programs/Activities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Direct Patient Care | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medi-Cal Outreach (A) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medi-Cal Outreach (B1) (Actual Count/Other) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medi-Cal Outreach (B2) (County-wide Average) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Facilitating Medi-Cal Application | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Arranging for and/or Providing Transportation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contract Administration (A) (Not Discounted) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contract Administration (B) (Discounted) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Program Planning and Policy Development (A) (Not Discounted) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Program Planning and Policy Development (B) (Discounted) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MAA/TCM Coordination and Claims Administration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MAA Implementation Training | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| General Administration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Paid Time Off | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL HOURS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| Employee's signature | Employee's telephone number | Date | Supervisor's signature | Date |
|---|---|---|---|---|
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**Arranging and/or Providing Transportation**
Arranging and/or providing nonemergency, nonmedical transportation of Medi-Cal eligibles to Medi-Cal services, and accompaniment by an attendant ***only*** when medically necessary. Include time spent giving or receiving training related to "Arranging and/or Providing Transportation."

**Contract Administration (A) and (B)**
Time spent on activities, performed on a ***part-time*** basis, by a unit of one or more Local Governmental Agency (LGA) employees, whose official tasks involve entering into contracts with community-based organizations (CBOs) or other providers for the provision of Medi-Cal Administrative Activities (MAA) and/or Medi-Cal services ***other*** than Targeted Case Management (TCM). Contract administration is directed toward one or more of the following: (1) identifying, recruiting, and contracting with community agencies as Medi-Cal services and/or MAA contract providers; (2) providing technical assistance to Medi-Cal subcontractors regarding county, state, and federal regulations; (3) monitoring provider agency capacity and availability; or (4) ensuring compliance with the terms of the contract. Include time spent giving or receiving training related to "Contract Administration."

NOTE: ***(A) Not Discounted*** when the contract(s) administered involves ***only*** the Medi-Cal population.

***(B) Discounted*** when the contract(s) administered involves ***both*** Medi-Cal and non-Medi-Cal populations.

**Program Planning and Policy Development**
Time spent on activities performed on a ***part-time*** basis by one or more LGA employees whose official tasks involve the following allowable MAA activities: (1) developing strategies to increase Medi-Cal system capacity and close Medi-Cal service gaps; includes analyzing Medi-Cal data related to a specific program or specific group; (2) interagency coordination to improve the delivery of Medi-Cal services; (3) developing resource directories of Medi-Cal services/providers; and (4) for ***subcontractors***, some PP&PD support services are allowable, such as: developing resource directories, preparing Medi-Cal data reports, conducting needs assessments, or preparing proposals for expansion of Medi-Cal services. Include time spent giving or receiving training related to the performance of "Medi-Cal PP&PD."

NOTE: ***(A) Not Discounted*** when PP&PD is related to programs serving ***only*** Medi-Cal clients.

***(B) Discounted*** when PP&PD is related to programs serving ***both*** Medi-Cal and non-Medi-Cal clients.

**MAA/TCM Coordination and LGA Claims Administration**
Time spent: (1) drafting, revising, and submitting MAA claiming plans, and TCM performance monitoring plans; (2) serving as a liaison with claiming programs within the LGA and with the state and federal governments on MAA/TCM; (3) monitoring the performance of claiming programs; (4) administering LGA claiming, including compiling, preparing, submitting, revising, and overseeing TCM and MAA claims on an LGA-wide basis to the State; (5) attending training sessions, meetings, and conferences on TCM and/or MAA; (6) training LGA program and subcontractor staff on state, federal, and local requirements for MAA/TCM claiming performed by "MAA/TCM Coordinator and Claims Administration" staff ***only***; (7) ensuring that MAA and TCM claims do not duplicate Medi-Cal claims for the same activities from other providers (this includes ensuring that services are ***not*** duplicated when a Medi-Cal beneficiary receives TCM services from more than one case manager or program); and (8) any other reasonable activities directly related to the LGA's administration of TCM and MAA.

**MAA Implementation Training**
Time spent by persons, other than MAA/TCM Coordination and Claims Administration staff, giving or receiving training related to the overall implementation of the MAA program. For example, general training on MAA and/or on conducting MAA/TCM time surveys.

**General Administration**
Time spent: (1) attending or conducting general, nonmedical staff meetings; (2) developing and monitoring program budgets; (3) providing instructional leadership; (4) site management; (5) supervising staff or participating in employee performance reviews; (6) reviewing departmental or unit procedures and rules; (7) presenting or participating in in-service orientations and programs; (8) health promotion activities for county employees; (9) earning of compensatory time off (CTO) or paid overtime; (10) breaks; and (11) the giving or receiving of training ***unrelated*** to the performance of MAA/TCM, e.g., computer training or generalized supervision training.

**Paid Time Off**
Includes vacation, sick leave, paid holiday time, paid jury duty, and any other employee time off that is paid. This does ***not*** include breaks, off payroll time (dock), or the taking of CTO.