

2018-19 Time Survey Training Questions
Training Dates February 8, 2018 and March 8, 2018

- 1. CMAA: Code 19 is identified in the approved CMS MAA/TCM Manual as Coordination & Claims administration for MAA/TCM not just CMAA. Therefore, why did the training slide state that it was only for CMAA?**

The CMS-approved manual is titled the "Time Survey Methodology for the County Based Medi-Cal Administrative Activities and Targeted Case Management Programs and County Based Medi-Cal Administrative Activities Program Operational Plan." References to "MAA" in the CMAA/TCM Time Survey Methodology and CMAA Operational Plan are to CMAA only. Code 19 is only reimbursed through CMAA for CMAA and TCM programs only.

- 2. CMAA/TCM: Can you please provide a written explanation of Comp Time? It was verbally stated but not in the slides.**

- A. Per slide 11 of the Train the Trainers Training, Compensatory Time Off, also known as (CTO):
- i. Participants should include all hours worked during the work day on the time survey; regardless of the number of hours worked.
 - ii. Any time **not** spent working must **not** be included on the time survey.
 - iii. If a participant works 10 hours in a day, they should time survey for the entire 10 hours.
 - iv. If a participant works 6 hours in a day, they should time survey for only those 6 hours.
 - v. Whenever (earned or used) CTO creates a discrepancy between the Time Card and Time Survey, the participant must include an explanation for the discrepancy.
- B. Per page 21 of the CMAA/TCM Time Survey Methodology, code 22 Paid Time Off:
- i. Paid Time Off includes vacation, sick leave, paid holiday time, paid jury duty, and any other paid employee time off. This does not include breaks, unpaid or off-payroll time (dock), or the taking of compensatory time off (CTO).

- 3. CMAA/TCM: I have a staff who "meet and confer" with the union, sometimes for several hours and sometimes for the whole day. Should I code the activity to code 1? Similar question but relates to workers comp.**

- A. If a CMAA/TCM time survey participant meets and confers with the Union that activity would be coded to Code 1. Per page 10 of the CMAA/TCM

Time Survey Methodology, Code 1 is an unallowable activity designed for activities such as this.

4. CMAA/TCM: Is there a specific format for a Duty Statement that needs to be followed?

- A. **CMAA** – DHCS does not have a specific format or layout requirement for the duty statements. For CMAA, the required elements of the duty statement is specified on Page 43, Section 4 of the CMAA Program Operational Plan:

The Duty Statements are specific to staff member job classifications designated to perform MAA on behalf of the claiming unit. The duty statement must include a description of all of the job functions, duties, tasks, and responsibilities the staff members in the specific classification must perform. However, the functions, duties, tasks, and responsibilities that are specific to the performance of MAA must be clearly identified. The MAA must be identified by placing the designated activity code number next to each activity that it is related to. The duty statement must also be signed by the employee to ensure the employee understands the MAA specific performance expectations.

*Please note: MAA in the quote above references CMAA only.

- B. **TCM** – Each LGA can develop their own format for duty statements; DHCS does not have a standard layout. Per the CMAA/TCM Time Survey Methodology, duty statements for active participants must be signed and kept in the LGA audit file.

5. CMAA: Just to clarify, if we have an electronic signature policy in place in our county, we are allowed to use it for Duty Statements, correct?

- A. The CMAA Program Operational Plan specifies that the employee must sign the Duty Statement, acknowledging their understanding of their specific performance expectations. The CMAA Program Operational Plan does not specify how the signature has to be obtained. If it is the county's policy to receive and electronic signature, that would be acceptable. However, when submitting the Duty Statement to DHCS, the LGAs have to provide DHCS with verification of the employee's acceptance of their duties if a "wet signature" is not present on the duty statement.

6. CMAA: When providing training to new staff who are only performing MAA activities, do they need to also be trained in TCM?

- A. If an LGA has employees that are program specific i.e. CMAA or TCM, The training needs only to encompass the codes that will be used.

7. TCM: Is there a website listing all programs within the 1915 (c) waiver?

- A. For Information on the 1915 (c) Waiver click on the below link:

<https://www.cms.gov/Outreach-and-Education/American-Indian-Alaska-Native/AIAN/LTSS-TA-Center/info/1915-c-waivers-by-state.html#california>

8. CMAA/TCM: Does the term "contract" include "memoranda of understanding" or "memoranda of agreement" for which no compensation is paid to the service provider?

- A. **TCM:** For TCM purposes, each LGA is required to have a Provider Participation Agreement (PPA) with the Department of Health Care Services (DHCS). If the LGA has any subcontractors performing TCM, they must have a contract that contains language requiring the subcontractor to comply with the conditions and responsibilities outlined in the TCM PPA prior to the LGA's subcontractor providing TCM services. Additionally, a Memorandum of Understanding is required to be in place for LGAs and their Managed Care Plans to prove how care coordination and prevention of duplication will take place between the LGA and their Managed Care Plans. The Memorandum of Understanding is not a contract.
- B. **CMAA:** For an LGA to participate in the CMAA program they must have a contract with DHCS. According to page 42 of the CMAA Program Operational Plan, a CBO may have a contract, lateral agreement, or memorandum of understanding between the CBO and LGA in order to participate in the CMAA program.

9. CMAA/TCM: Since this training is an on-line training, would DHCS allow for an online training to time survey participants as well? If you do, what would be your requirements and would you issue a PPL to authorize such online training?

- A. DHCS requires that all time survey participants must be properly trained prior to participating in the time survey process. The CMAA/TCM Coordinators are responsible for training their time survey participants. DHCS does not issue guidelines on the method of training but instead requires that the information presented in the training is based on the CMAA/TCM Time Survey Methodology. For additional information please refer to PPL 15-008 at the link below.

http://www.dhcs.ca.gov/formsandpubs/Documents/ACLSS%20PPLs/2015/PPL_15-008.pdf

10. CMAA: We are a CBO, but it looks like Code 19 can only be used by an LGA. Is that correct?

- A. CBOs are allowed to claim code 19 by use of direct charge or time survey per the guidelines provided in the CMAA/TCM Time Survey Methodology. In addition, the guidelines to follow for code 19 are on pages 19 and 20 of the CMAA/TCM Time Survey Methodology.

11. CMAA/TCM: Where do we find the document that has the PPLs?

- A. All CMAA and/or TCM PPLs can be found at the DHCS website at the link provided:
<http://www.dhcs.ca.gov/formsandpubs/Pages/MAATCMPPLs.aspx>.

12. TCM: I had a question about code 30. I am an analyst (not an LGA) and I do the chart auditing for our nursing programs. Can I use Code 30 or is this limited to supervisors/licensed providers?

- A. The only restriction to Code 30, is that the activity cannot be performed by a case manager. Analysts within an LGA are approved to use code 30 to provide quality assurance/performance monitoring. On page 23 of the CMAA/TCM Time Survey Methodology it states:

TCM provider monitors Medi-Cal services providers to insure quality, capacity, and availability of services. TCM provider develops and maintains a TCM Performance Monitoring Plan to prevent countywide duplication of services. This activity cannot be performed by a Case Manager.

13. TCM: Can time spent in TCM Budget unit activities before Time Survey training be applied to General Administration time?

- A. No, staff would need to be trained before coding any time to any of the time survey codes for either the CMAA and/or TCM Programs. In the CMAA/TCM Time Survey Methodology, page 36, it states:

To prevent inaccuracies within the CMAA/TCM Time Survey Methodology, each participant must be properly trained prior to participating in the Worker Log Time Survey process.

14. CMAA/TCM: I would like clarity on the frequency required to time study. I do not think I really understand.

- A. Per page 30 of the CMAA/TCM Time Survey Methodology, the frequency in which a participating staff member must time survey is dependent on the total number of participating staff within each individual LGA budget

unit. The following table (**Table 4**) summarizes the time survey frequency requirements depending on the number of participants in each LGA budget unit (detailed explanations of the information in **Table 4** are included subsequent to the table).

Table 4

Number of Participants in Budget Unit	Time Survey Frequency Per Quarter
1 to 99	Each Work Day
100 to 199	20 Consecutive Work Days
200 to 399	10 Consecutive Work Days
400+	5 Consecutive Work Days

15.CMAA: San Diego County does not participate in Code 12 and 15, we only participate in Code 13 and 17, do we need to train staff on those codes too?

- A. The CMAA/TCM Time Survey Methodology states, "...participants must have a clear and accurate understanding of the proper procedures for coding time to the approved CMAA and/or TCM Medi-Cal eligible services and/or activities..." As long as the training follows the requirements of the CMAA/TCM Time survey Methodology, it is acceptable. In addition, the training materials, such as time survey training presentation and sign-in sheets, must be kept in the LGA audit file (CMAA/TCM Time Survey Methodology page 37 and page 60 of the CMAA Program Operational Plan).

16.CMAA: Why would this only be non-SPMP training? Assessment, especially of medical issues, is a SPMP training. Please define what you mean by SPMP training?

- A. At this time DHCS does not require additional training for a SPMP staff member to participate in the CMAA program. The CMAA/TCM Time Survey training does not differentiate between SPMP and Non-SPMP in regards to actual time reported. For the CMAA program, the only additional requirements for a SPMP staff member is the required SPMP questionnaire that is part of the CMAA Claiming Plan. This questionnaire is unique and specific to each qualified SPMP staff member within a claiming unit. Please refer to page 44 of the CMAA Program Operational Plan for additional information.

17.CMAA: Can time spent in CMAA budget unit activities before time survey training be applied to General Administration time?

- A. Time spent in CMAA budget unit activities prior to time survey training cannot be applied to General Administration time. If an employee has not completed their time survey training they may not time survey and therefore should be included in Cost Pool 3 "Non-Claimable". According to page 37 of the CMAA/TCM Time Survey Methodology:

Budget unit participants are not allowed to time survey until they have completed the prescribed and approved Worker Log Time Survey training. If a participant fails to complete the required Worker Log Time Survey training prior to the appropriate time survey period, all reported participant time and associated personnel costs must be excluded from the entire claiming period.

18. CMAA/TCM: Could the exact time survey training PPT presentation, including questions, be made available as a base to training LGA CMAA/TCM staff?

- A. Yes. DHCS will make the Time Survey Training Power Point Presentation available on the following website:
 - i. <http://www.dhcs.ca.gov/provgovpart/Pages/TimeSurveys2016.aspx>

19. CMAA: Can we claim code 21 and 22 if they are not on the Claiming Unit Functions Grid?

- A. Yes. When an individual is participating in the time survey they can claim code 21 and 22 even though the Claiming Unit Function Grid (CUFG) does not list those specific codes. Page 20 of the CMAA/TCM Time Survey Methodology outlines the requirements for the codes, but any time survey participant can use code 21 and 22 when they are performing the activities.

20. CMAA/TCM: Does the alternate time study trainer have to be the authorized signer?

- A. No, the LGA Coordinator and Authorized Alternates may be different staff who can also be the authorized signors. They do not have to be the same employees.

20a. CMAA/TCM: What if the LGA Coordinator leaves/changes, then what?

- A. If, during the year, the LGA Coordinator leaves or changes their position then the authorized alternate or acting LGA Coordinator would perform any necessary trainings. If the prior LGA Coordinator attended the training for that fiscal year and ensured all participants received training, then the LGA is in compliance. It is each LGA's Coordinators' responsibility to ensure all CMAA/TCM participants receive Time Survey Training to remain in compliance. Please see PPL 15-008 and pages 36 and 37 of the CMAA/TCM Time Survey Methodology for more information.

21. CMAA/TCM: Do the LGAs have to use the DHCS training? Not very interactive nor specific.

- A. No, the LGAs conduct their own training for their staff. It is not required to use the exact DHCS training. However, the LGA's training has to be consistent with the information provided in the DHCS train the trainer training. Which includes, the accurate and required information of the proper procedures and coding when participating in the time survey.

22. CMAA: It was said that the non-medical transport does refer to the type of vehicle used. Last they said it does not refer to the type of vehicle, but, rather to the condition of the patient. Please clarify where on the website is it?

- A. The definition of "non-medical" transportation is noted in the CMAA/TCM Time Survey Methodology page 14:

"NOTE: The term 'non-medical' transportation does not refer to the type of vehicle used, but to the condition of the transportation recipient."

23. CMAA: Will there be a change to code 10 for FY 2018-19? It was mentioned at one of our meetings that it will not cover providing transportation, only arranging. Please advise.

- A. DHCS will be releasing a PPL that pertains to code 10 and non-medical transportation reimbursement for Managed Care Medi-Cal beneficiaries soon. If there are any further changes, CMAA will notify the LGAs. For information on Managed Care Medi-Cal beneficiaries and NMT, please see All Plan Letter 17-010 at the following link.
<http://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2017/APL17-010.pdf>

24. CMAA/TCM: Does time off that is paid by disability benefits need to be coded as paid time off?

- A. Paid Time Off includes vacation, sick leave, paid holiday time, paid jury duty, and any other paid employee time off as states in the CMAA/TCM Time Survey Methodology, per page 21.

25. TCM: I have a TCM case that has had a comprehensive assessment, care plan, referrals, and a follow-up within a four month period. A periodic review was completed and all of the needs on the care plan have been met, do you still need to complete a six-month reassessment?

- A. If the case was closed because all of the needs are met, a six month re-assessment would not be required. Only, if the client's care plan and case remains open during the duration, would a six month re-assessment be required. Per the TCM Program service State Plan Amendments, Assessment and/or periodic reassessments are to be conducted at a

minimum of once every six months to determine if an individual's needs, conditions, and/or preferences have changed.

26. CMAA/TCM: Can you please define what documentation is needed to have an authorized alternate regarding LGA Coordinators training participants?

- A. An authorized alternate, per [PPL 15-008](#), is someone who submitted a Roster Change form to DHCS and is listed as the alternate Coordinator on the LGA Coordinator Roster. Per page 36 of the CMAA/TCM Time Survey Methodology LGAs that do not have a LGA MAA/TCM Coordinator, or an authorized alternate, attend the annual 'Train the Trainers' presentation must complete a DHCS approved training alternative before the LGA will be allowed to participate in the Worker Log Time Survey process for that fiscal year.

27. TCM: Has DHCS come up with a definition for "IMD" facility? Are any of the following types of facilities considered IMDs: skilled nursing facility (SNF), assisted living facility, mental health rehabilitation center, psychiatric health facility, and a SNF with a special treatment program?

- A. For more information regarding IMD facilities, please visit the following DHCS webpage:
http://www.dhcs.ca.gov/services/MH/Pages/MedCCC-IMD_List.aspx

28. CMAA: Is it possible to find out how to connect with a CMAA Administrator in the Los Angeles CA area?

- A. Please e-mail DHCS at cmaa@dhcs.ca.gov, where the analyst in charge of the County of Los Angeles can assist you.

29. CMAA: Can you clarify the usage of CMAA codes 4 & 6 with regards to making referrals? If I refer a client to an eye doctor as a new medical related service, would this be outreach code 4? As opposed to referring a client to a new doctor for a 2nd opinion when they have already accessed the service, which would be code 6?

- A. In order to determine which code is appropriate for this specific referral question, it will be important to review the examples outlined on page 11 and 12 of the CMAA/TCM Time Survey Methodology.

Code 4 is focused on Medi-Cal outreach within a community which can be campaigns or events focused on enrolling new members. Code 4 does allow for initial referral assistance for Medi-Cal services during the outreach time. Whereas Code 6 is solely for referrals, coordination, and

monitoring; which would encompass the initial referral or a follow up referral for an individual.

To determine which code is appropriate to use, one has to look at the surrounding circumstances of how the referral was made. Was it outreach and trying to enroll new eligible Medi-Cal participants, or was services an existing Medi-Cal participant.