LEA BOP and the Time Survey Participant (TSP) List

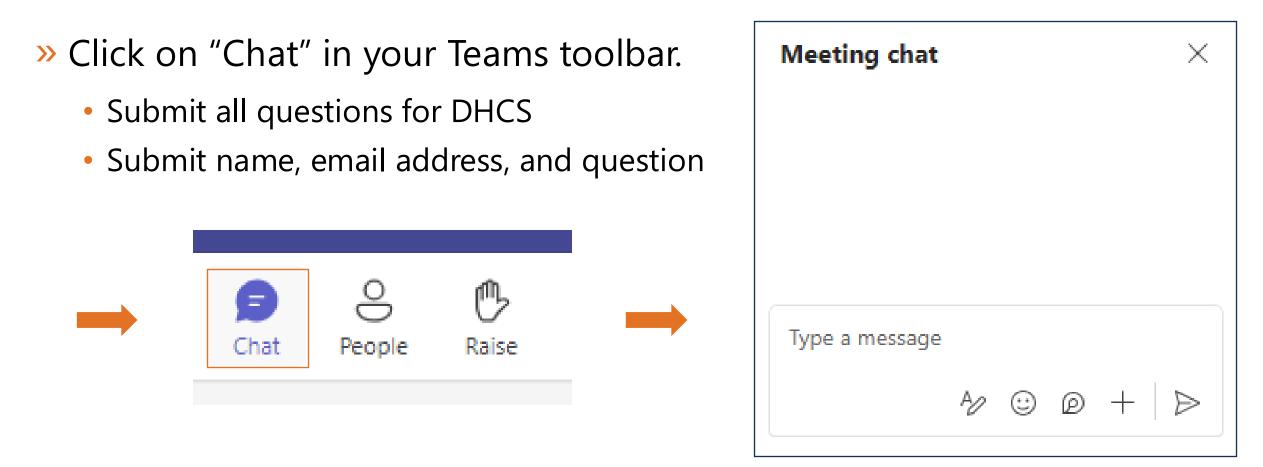
Hosted by: Department of Health Care Services (DHCS) Wednesday, October 9, 2024 10:00 a.m. - 11:15 a.m.

WE WILL BEGIN THE WEBINAR SHORTLY



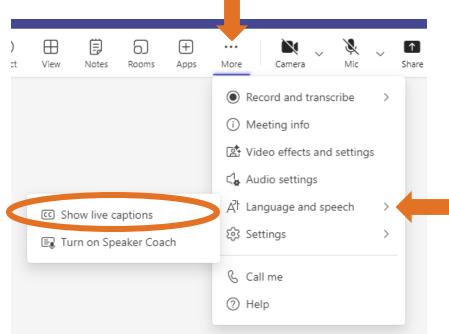
October 2024

Submit Your Questions



Live Captions Available

- » Click on "More" in your Teams toolbar.
- » Click "Language and Speech" and "**CC** Show Live Captions."
 - You will be able to view the live captions in the bottom panel of the meeting.





Introductions

- » California Department of Health Care Services (DHCS)
 - The Local Educational Agency Medi-Cal Billing Option Program (LEA BOP)
- » Guidehouse
 - Contractor to DHCS, providing guidance and support to DHCS as a subjectmatter expert



Agenda

- >> LEA BOP and the Random Moment Time Survey (RMTS)
- » Direct Service Practitioners Participant Pool 1
- » Time Survey Participant (TSP) List and Direct Medical Service Percentage (DMSP)
- » Best Practices & Special Circumstances
- » Resources
- » Q&A

Workshop Goals

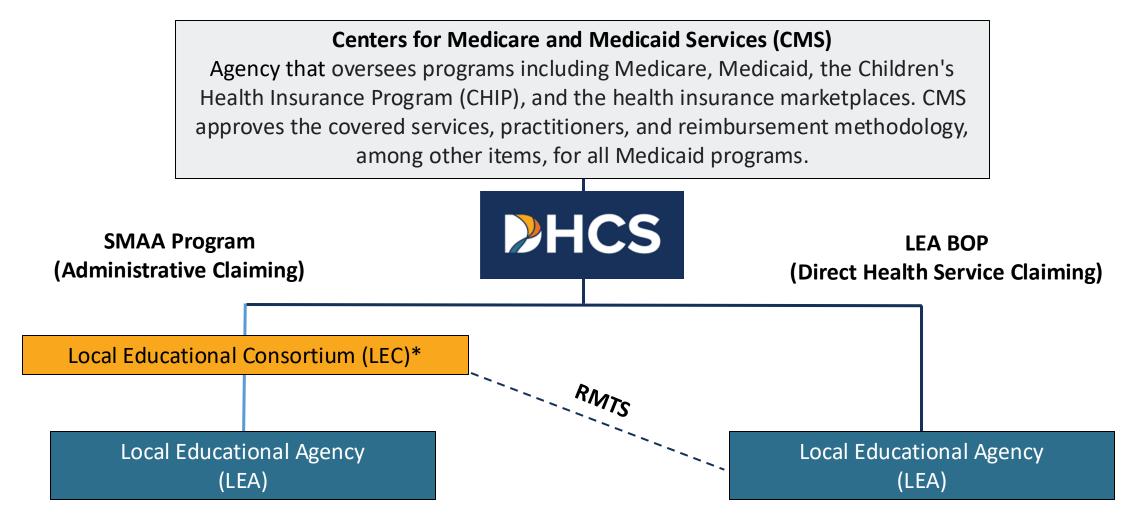
Following today's webinar, participants will understand:

- 1. LEA BOP and RMTS connection.
- 2. The primary purpose of and requirements for an LEA's TSP list,
- 3. Who to include in a TSP list?
- 4. Why an accurate TSP list is so vital for LEA BOP,
- 5. Best practices for maintaining an accurate TSP list, and
- 6. Why is it essential for TSPs to respond to moments?

LEA BOP and the RMTS



LEA BOP Administration Oversight



* In California, the SMAA Program is locally administered by the LECs. The LECs are responsible for day-to-day administration of the RMTS. The LECs still administer RMTS even if the LEA only participates in LEA BOP.

LEA BOP Overview

- >> The LEA BOP was established in 1993, in collaboration with the California Department of Education (CDE), to fund Healthy Start Programs.
- » LEA BOP is authorized under California's Welfare and Institutions Code and reimburses for direct medical services rendered to the target population.
- The services are delivered through the LEAs. The LEAs either employ practitioners who provide the services on site, or use practitioners under contract with the LEA.
- >> LEA BOP is a Certified Public Expenditure (CPE) Program.
- >> LEAs are reimbursed up to their Medi-Cal allowable costs.

Adoption of the RMTS Methodology

- Beginning July 1, 2020, California incorporated the RMTS into the LEA BOP cost settlement process.
- » RMTS is a statistically valid means of determining what portion of a group of participants' workload is spent performing Medicaid-reimbursable activities.
- » RMTS is administrated in California by Local Educational Consortia (LEC).
- » All LEAs participating in LEA BOP **<u>must</u>** participate in RMTS.
 - Exception Model 2 100% of the direct medical service practitioners are contracted out from a third party

The Payment and Certification Cycle



Submit claim Medi-Cal **LEA submits** Final Provide covered Audit to Settlement services for to Medi-Cal sends interim verify costs on cost report the CRCS students reimbursements for covered (CRCS*) to certify costs services based on claims

RMTS methodology is used for the allocation of cost for Direct Medical Services Percentage (DMSP) and validation of practitioners (TSP List).

*CRCS = Cost and Reimbursement Comparison Schedule

Essential Functions of an LEA in RMTS Participation

- » Contract and coordinate with LEC in their region for the administration of RMTS.
- >> Identify staff that will bill for LEA BOP reimbursable services.
- » Build a quarterly TSP List.
- Train TSPs about RMTS and importance of responding to assigned random moments.
- >> Maintain documentation required to support RMTS moments.
- » Reviewing the Quarterly Coding Reports.

Direct Service Practitioners -Participant Pool 1



Identifying Participant Pool 1 TSPs

» LEAs must clearly identify practitioners by their job functions and activities performed.



This figure illustrates the various staff roles, job titles, and activities they potentially perform

Participant Pool 1 Options

- Direct Service Practitioners : these are direct service practitioners that are billing LEA BOP for services and are included on Participant Pool 1 TSP list.
 - This will **include** staff in LEA BOP and claim costs on the CRCS.
- Direct service practitioners that are not providing direct billable health services: these are direct service practitioners that are in Participant Pool 2 (administrative) because they are not billing eligible LEA BOP (medical) services.
 - This will **exclude** staff from LEA BOP and claiming costs on the CRCS.

Participant Pool Examples

Direct Service – Pool 1	Administrative Activity – Pool 2	
Nursing and Nursing Services, including assistance with Activities of Daily Living.	Referral and Coordination Services.	
Psychology and Counseling Services.	Translation services.	
Therapist: Physical Therapy, Occupational Therapy, Speech–Language Pathology.	Medi-Cal Enrollment and Outreach.	
Respiratory Care; Hearing Services; Nutrition, Vision, Orientation and Mobility.	Program planning, policy development, interagency coordination.	

Considerations When Defining Participant Pools

Consideration	Examples
Personnel cannot be counted in more than one pool; the pools must be mutually exclusive.	A School Nurse cannot be identified in Participant Pool 1 and Pool 2, they need to be in one or the other.
LEAs must ensure all intended staff are captured in cost pools, including allowances for vacant positions.	All Medi-Cal reimbursable roles must be included in the participant pool.
Consider the day-to day job activity of each clinician.	If a registered nurse primarily handles care coordination and referrals, rather than providing direct services, they may be more suited for administrative activities and should be placed in Pool 2 instead of Pool 1.
Staff not meeting the license / credential or supervision requirements must not be included in Pool 1.	An unsupervised Speech Language Pathology Assistant cannot be included in Pool 1 because they do not meet the requirements to bill under LEA BOP.

Approved Job Classifications - I

1. Associate Marriage and Family Therapist	9. Licensed Clinical Social Worker		
2. Credentialed Audiologist	10. Licensed Educational Psychologist		
3. Certified Nurse Practitioner	11. Licensed Marriage and Family Therapist		
4. Certified Public Health Nurse	12. Licensed Occupational Therapist		
5. Credentialed School Counselor	13. Licensed Optometrist		
6. Credentialed School Psychologist	14. Licensed Physical Therapist		
7. Credentialed School Social Worker	15. Licensed Physician		
8. Licensed Audiologist	16. Licensed Physician Assistant		

Approved Job Classifications - II

17. Licensed Psychiatrist	25. Licensed Physical Therapist Assistant		
18. Licensed Psychologist	26. Program Specialist		
19. Licensed Registered Nurse	27. Registered Associate Clinical Social Worker		
20. Licensed Respiratory Care Practitioner	28. Registered Credentialed School Nurse		
21. Licensed Vocational Nurse	29. Registered Dietician		
22. Licensed Speech and Language Pathologist	30. Registered School Audiometrist		
23. Occupational Therapy Assistant	31. Speech-Language Pathology Assistant		
24. Orientation and Mobility Specialist	32. Trained Health Care Aide		

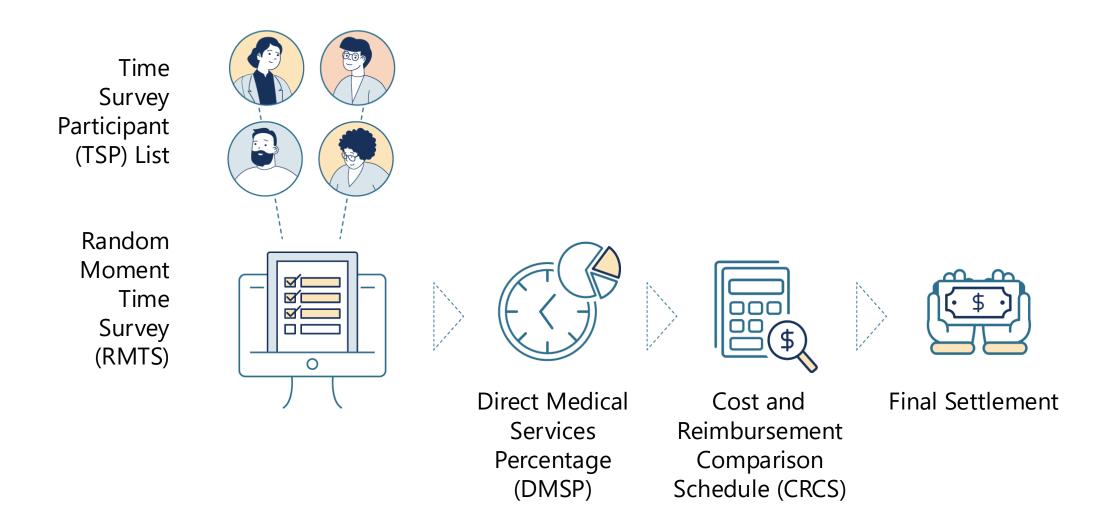
TSP List and the Direct Medical Services Percentage (DMSP)



What is the TSP List?

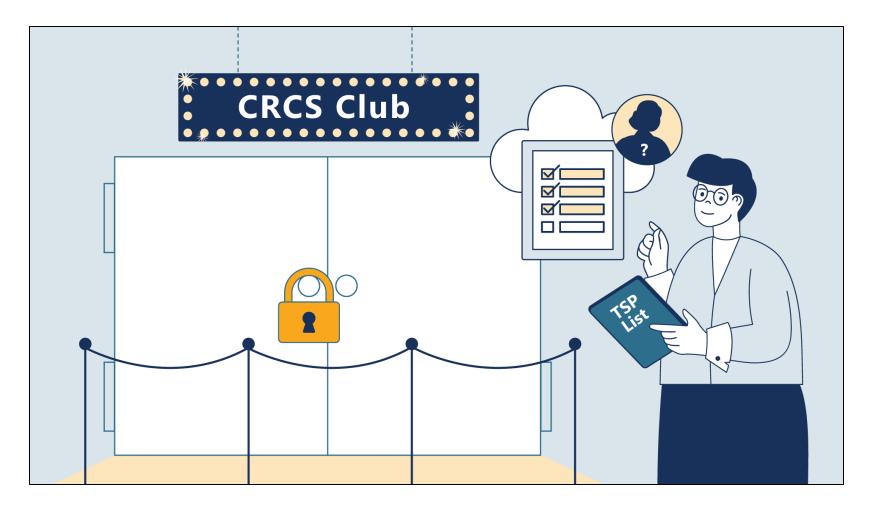
- » TSP = Time Survey Participant.
- The TSP List includes all eligible practitioners that are expected to deliver covered services to students in the upcoming quarter.
 - Exception:
 - LEAs that are Model 2 (100% contracted practitioners)
 - 100% federal-funded staff
- Individuals listed in Participant Pool 1 must meet the qualifications necessary for reimbursement through the LEA BOP.
 - See <u>LEA BOP Provider Manual</u>
- Individuals listed in Participant Pool 2 (SMAA) are administrative activity claiming staff and perform allowable Medicaid administrative activities on a regular basis.
- » A TSP **cannot** be listed in both Participant Pools.

Purpose and Impact of the TSP List



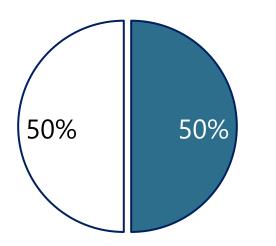
Why an Accurate TSP List is Important

 You can't get into the CRCS unless you're on the TSP Participant Pool 1 list.

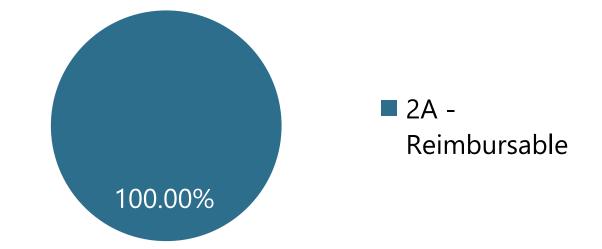


Example : School Counselors

Scenario 1 Total of 10 counselors : Only 5 of the counselors' time is spent on LEA BOP Scenario 2 Total of 5 counselors : All of the 5 of the counselors' time is spent on LEA BOP



 2A -Reimbursable
1 - Non reimbursable



Requirements for an Accurate TSP List

- » Review and update the Quarterly TSP list for Participant Pool 1.
- » Verify credentialing and licensing requirements.
- » Submit Participant Pool 1 Time Survey Participant (TSP) Equivalency Request Form.
- » Confirm important deadlines: check with your LEC!

TSP Equivalency Request Form

- » The primary purpose is to include all eligible staff.
- » Use the <u>Rendering Practitioner Qualifications</u> list
- » Qualified staff may use other job titles for example:
 - » Health Technician = Trained Health Care Aide
 - » Mental Health Counselor = Licensed Marriage and Family Therapist
 - » Behavior Intervention Specialist = Licensed Clinical Social Worker
- » E-mail with the subject line "Pool 1 TSP Equivalency Request form" to your Region LEC, who will submit it to DHCS on your behalf.

TSP List and Targeted Case Management (TCM) Staff

- >> Identify staff who provide eligible services: <u>LEA BOP -TCM practitioners</u>
- » Flag LEA BOP TCM practitioners under "Job Title" with a "-TCM" suffix on their name.
 - Example: Jane Smith-TCM
- » TCM Certification Form: Review, submit to your LEC, and update quarterly.
- » All TCM practitioners intending to bill TCM through LEA BOP are eligible for inclusion on the TSP list and the TCM Certification Form.

Best Practices & Special Circumstances



- >> Update Your TSP List Quarterly.
- >> Tips: Work with HR and/or Finance to confirm:
 - » New hires and recent exits
 - » Federal Funding information
 - » Timeframe of filling vacancies

- » Quality versus Quantity: Assess the time TSP List practitioners spend on eligible student services
- » Tips: Review TSP daily activities to ensure most are LEA BOPcovered services.

- » Only submit interim claims for practitioners on your TSP List.
- » Tip: A helpful tool is making sure to coordinate your TSP List with your billing software.

- » Review Quarterly Coding Report for accuracy and documentation.
- » Tip: Work closely with your LEC to ensure that all changes, updates, and correct participant pools are assigned, and the moments coded are correct and have supporting documentation.

Special Circumstance: Staff Turnover

- » Certify TSP list at quarter close.
- » Practitioner leaves LEA during the quarter.
- >> Submit vacancy to the LEC for the next quarter.
- » Someone new is hired.
 - Replace the vacancy (see <u>PPL 19-030</u>).
 - Wait until the next TSP list certification.

Centers for Medicare and Medicaid Services (CMS) : New Guidance



CMS New Guidance: Implementation Date July 2026

- » Required Changes
 - RMTS: Summer Period
 - RMTS Calendar: Working Days vs. Student Attendance Days
 - Moment: Notification and Response Period
 - RMTS: Time Study Training Documentation
 - De-identified Protected Health Information (PHI)
 - TSPs Universe to include all staff who potentially provide services
 - RMTS: 85% Response Rate

CMS New Guidance: Implementation Date July 2026 (continued)

- » Optional Changes
 - >> Increasing the Error Rate from 2% to 5%
 - » Flexibility of reducing the RMTS sample size for moments from 2401 to 443
 - >> Exclusion of unpaid lunches and in-service days
- » Delivering Services in School-Based Settings: A Comprehensive Guide to Medicaid Services and Administrative Claiming

Resources



Resources for Reference

- » <u>LEA BOP Provider Manual</u>
- » <u>SMAA Manual Section 6 : Time Survey</u>
- » <u>SMAA Manual Section 5 : Activity Codes</u>
- » <u>Random Moment Time Survey:</u>
 - » <u>RMTS Fact Sheet</u>
 - » <u>RMTS Quick Reference Guide</u>
- Delivering Services in School-Based Settings: A Comprehensive Guide to Medicaid Services and Administrative Claiming

Resources from the Workshop

- » Policy & Procedure Letters (PPLs) on the following topics:
 - RMTS participation requirements, contractors, and Model 2 (PPL 20-022R)
 - Model 2 <u>Certification form</u>
 - Quarter 1 TSP list requirements (PPL 20-046)
 - Equivalency Forms process and requests (PPL 20-031)
 - Quarterly certification of TSP lists (<u>PPL 20-008</u>)
 - TSP list replacements and vacancies (PPL 19-030)
 - Submission requirement related to the CRCS (PPL 22-002)
- » Provider Manual, section on <u>Rendering Practitioner Qualifications</u>
- » Provider Manual, section on <u>Targeted Case Management</u>

Resources for Support

- >> LEA BOP website: <u>https://www.dhcs.ca.gov/ProvGovPart/Pages/LEA.aspx</u>
 - Onboarding Handbook
 - LEA Program Toolbox
 - Policy & Procedure Letters
 - LEA Program Guide
 - Quarterly Meetings
 - E-mail Subscription Service
 - TA Visit Request Form

Resource: Service Regions Contact Information

» <u>Service Region Map and RMTS Administrative Unit contact information</u>

Region	RMTS Administrative Unit	Contact	Phone	E-mail
1	Sonoma	Greg Medici	(707) 524-2628	<u>gmedici@scoe.org</u>
2	Glenn	Coreen Deleon	(530) 934-6575	<u>cdeleon@glenncoe.org</u>
3	Sutter	Caitlin Kinney	(530) 822-2946	caitlink@sutter.k12.ca.us
4	Contra Costa	Michelle Cowart	(925) 942-5391	mcowart@cccoe.k12.ca.us
5	Santa Cruz	Tina Reger	(831) 466-5634	treger@santacruzcoe.org
6	Stanislaus	Janice Holden	(209) 238-8820	jholden@stancoe.org
7	Madera	Rhonda Yohman	(559) 662-6227	ryohman@mcsos.org
8	Kern	Jennifer Hill	(661) 636-4144	jhill@kern.org_
9	Orange	Patti McIntyre	(714) 708-4982	pmcintyre@ocde.us
10	San Bernardino	Rebekah Smith	(909) 387-8518	rebekah.smith@sbcss.net
11	Los Angeles	Jessica Jacobs	(562) 922-6521	jacobs jessica@lacoe.edu

Reminder: New Tools Available!

- Accelerating the Expansion of Quality School-Based Health: A Primer on Available State Resources for LEAs and Health Partners
- » LEA BOP Enrollment Steps and Timeline
- » <u>Tips for Identifying Allowable Costs and Avoiding Common Pitfalls in the LEA BOP</u>
- » LEA BOP Administration Checklist for Providers
- » <u>Tips for Identifying Allowable Cost and Calculating Total Program Reimbursement</u>
- » <u>Tips for Using Contractors as LEA BOP Practitioners</u>
- » (Revised) LEA BOP Onboarding Handbook





Thank You

If you have any remaining questions, please email <u>LEA@dhcs.ca.gov</u>



