



COLORADO
School Health Services Program

SCHOOL HEALTH SERVICES PROGRAM PROGRAM MANUAL

Section 3

Random Moment Time Study

The School Health Services Program is a joint effort between the Colorado Department of Education and Department of Health Care Policy and Financing.
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Section 3: Random Moment Time Study

The Random Moment Time Study (RMTS) is a federally accepted method for tracking participant time and activities within school districts. The RMTS is useful because:

- It uses a verifiable, statistically valid random sampling technique that produces accurate labor distribution results.
- It greatly reduces the amount of staff time needed to record an individual time study participant's activities.

The RMTS method samples participants on an individual basis at random time intervals over a quarterly (three month) time period and totals the results to determine work effort for the entire population of eligible participants over that same period. The RMTS method provides a statistically valid means of determining what portion of the selected group of participants' workload is spent performing activities that are reimbursable by Medicaid.

Districts enrolled in the [School Health Services \(SHS\) Program](#) must identify staff to participate in the time study for direct medical or health-related services (Direct Services), Targeted Case Management (TCM) and/or Administrative Services staff cost pool. Staff members who perform the applicable services or activities are required to participate in the quarterly time study. Districts must certify that staff providing services or participating in the time study meet the educational, experiential and regulatory requirements. Staff cost pool lists must be updated quarterly to reflect staffing changes at the district level (refer to **Appendix A.8**). If a staff person leaves the district and the position is then filled, the district must notify the RMTS vendor to update the contact information associated with that position.

Although some staff may perform any combination of Direct Services, TCM and Administrative Services related activities, depending on their qualifications and role, they will only be allowed to participate in one of the three following staff cost pools:

- The first staff cost pool is comprised of direct services staff, including those who conduct only direct services, and those staff who conduct direct services in conjunction with TCM and/or administrative services.
- The second staff cost pool is comprised of TCM staff, including those staff who may also perform additional administrative services.
- The third cost pool is comprised of administrative services staff only.

3.1 Time Study Participants

The purpose of the statewide time study is to identify the proportion of direct services, TCM and administrative services time allowable and reimbursable under Medicaid. The RMTS information is used in the direct services and TCM cost reporting process at the end of each fiscal year to conduct a final cost settlement. In addition, the Medicaid

Administrative Claiming (MAC) program time study results for Administrative Services are applied to the allowable administrative costs of the participating districts to calculate a quarterly claim. Staff members performing Medicaid related activities in a district seeking reimbursement are required to participate in the statewide time study using the approved RMTS methodology.

Three staff cost pools

Direct Service Providers	Targeted Case Management Providers	Administrative Providers
<ul style="list-style-type: none">•Those qualified to bill direct services to Medicaid (can also bill TCM, if qualified)•Time study results for Administrative Services are applied to the quarterly MAC claim•Time study results for Direct Services are applied to annual cost settlement	<ul style="list-style-type: none">•Those qualified to bill Medicaid for TCM services only•Time study results for Administrative Services are applied to the quarterly MAC claim•Time study results for Direct Services are applied to annual cost settlement	<ul style="list-style-type: none">•Participants that routinely provide administrative, outreach, and program planning activities, and do not bill Medicaid for direct service or TCM•Time study results for Administrative Services are applied to the quarterly MAC claim

The following staff categories have been approved to participate in the Colorado time study and are identified in Colorado’s State Plan Amendment 05-006 (**Appendix A.6**) and the Time Study Implementation Guide (**Appendix A.7**). Additions to the list may be made depending on job duties. The decision to approve additional staff categories will be made on a case-by-case basis by the Department of Health Care Policy and Financing (the Department) and subsequently approved by the Centers for Medicare and Medicaid Services (CMS).

Direct Services Cost Pool

- Colorado - licensed Physician (MD or DO);
- Colorado - licensed Psychiatrist;
- Colorado - licensed Registered Nurse (RN);
- Colorado - licensed Practical Nurse (LPN);
- Colorado - qualified Nurse Aide;
- Health Technician;
- Special Education Teacher;
- Special Education Teacher’s Aide;
- Child Care/Group Leader;
- Teaching Assistant;
- Bus Aide;
- Colorado - licensed Psychologist (Doctoral level);
- Colorado - licensed Professional Counselor (LPC);
- Colorado - licensed Social Worker (Master’s level);
- Colorado - licensed Clinical Social Worker (Master’s level);

- Colorado - licensed Marriage and Family Therapist (LMFT);
- Academy for Certification of Vision Rehabilitation and Education Professionals (ACVREP) Orientation and Mobility Specialist;
- Speech Language Pathologist (SLP) possessing a current Certificate of Clinical Competence (CCC) from the American Speech Language Hearing Association (ASHA);
- Audiologist with a Master's or Doctoral degree in audiology and possessing a current CCC certification from the ASHA or licensure from the Colorado Department of Regulatory Agencies (DORA);
- Supervised SLP and/or Audiology candidate in a clinical fellowship year or having completed all requirements but has not yet obtained a CCC. Services may only be delivered by these providers under the direction of a qualified therapist in accordance with 42 CFR § 440.110. All documentation must be reviewed and signed by the appropriately credentialed supervising SLP or Audiologist;
- Teacher of students with speech and language impairment with current [Colorado Department of Education \(CDE\)](#) specialty certificate of endorsement for speech and language impairments when acting under the direction of a qualified SLP in accordance with 42 CFR § 440.110 and other applicable state and federal law;
- Occupational Therapist Registered (OTR/L) licensed in Colorado and certified by the National Board for Certification in Occupational Therapy (NBCOT);
- Certified Occupational Therapy Assistant (COTA/L) DORA licensed (as of June 1, 2014) in Colorado and under the direction of a qualified therapist in accordance with 42 CFR § 440.110. COTA's services must follow the evaluation and treatment plan developed by an OTR and the OTR must supervise and monitor the COTA's performance with continuous assessment of the beneficiary's progress. All documentation must be reviewed and signed by the appropriate supervising OTR;
- Colorado - licensed Physical Therapist (PT); and
- Colorado - qualified Physical Therapist Assistant (PTA) when the assistant is acting under the direction of a currently Colorado-licensed PT. The PT supervises and monitors the PTA's performance with continuous assessment of the student's progress in accordance with 42 CFR § 440.110. All documentation must be reviewed and signed by the appropriately licensed supervising PT.

TCM Cost Pool

A TCM provider is required to meet state or national licensure, registration or certification requirements of the profession in which they practice and must act within the profession's scope of practice. Additionally, only those TCM providers who hold a CDE License for Special Services and who bill TCM throughout the school year can be included on the cost reporting forms to ensure the appropriate cost allocation for reimbursement purposes.

A provider that meets the qualifications established by the State's licensure act for educators as a special service provider who develops and/or implements individualized plans for services under the Individuals with Disabilities Education Act (IDEA) may also provide TCM. State education agency providers must hold a CDE Professional, Provisional or Alternative Teacher License with an appropriate endorsement in special education. Individuals providing special education services through Temporary Teacher Eligibility (TTE) under 3.04(2) of the Rules for the Administration of the Exceptional Children's Education Act (ECEA) are also considered qualified to provide Medicaid TCM services.

Administrative Services Only Cost Pool

- Administrator
- Counselor
- Interpreter and Interpreter Assistant
- Pupil Support Services Administrator
- Pupil Support Services Technician
- Psychologist Intern
- Special Education Administrator
- Special Education Support Technician
- Program Specialist
- Non-licensed Psychologist
- Non-licensed Social Worker
- Non-licensed Orientation and Mobility Specialist
- Resource Specialist/Family Liaison
- School Bilingual Assistant
- Nurse – that does not provide direct medical or health-related services or TCM
- Special Education Teacher - that does not provide TCM or personal care services
- Special Education Teacher's Aide - that does not provide TCM or personal care services
- Other groups or individuals that may be identified by the district and approved by the Department

Only staff who perform Medicaid related administrative activities, and DO NOT perform Direct Services or TCM, should be included in the Administrative Services cost pool.

Appendix A.2 includes a Provider Qualifications Quick Reference Chart.

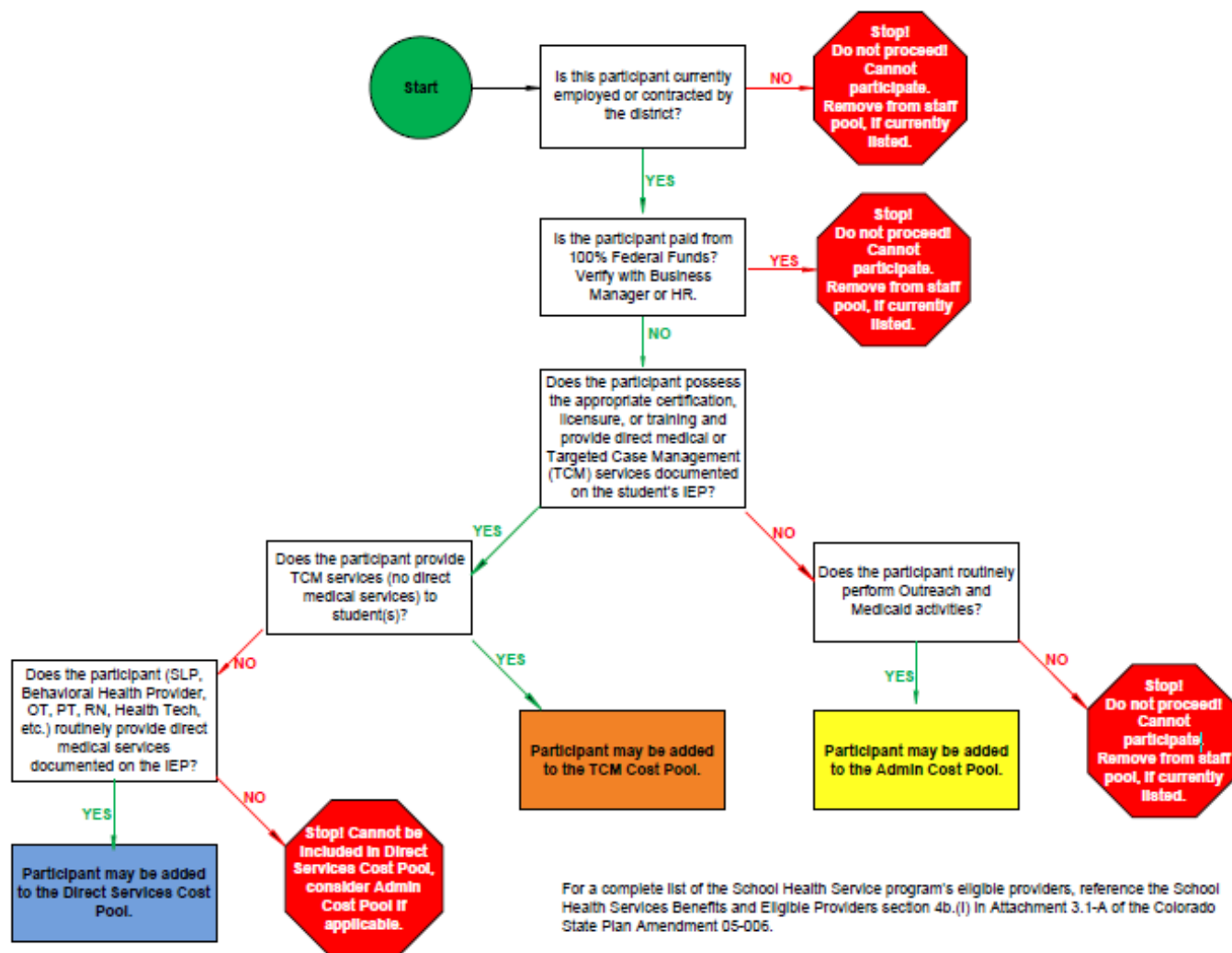
Staff Pool List

Before the statewide time study sample is generated, each district must certify that the list of staff they submit to be added to the staff cost pool are appropriate for inclusion in the time study, subsequent claims and the cost report. Staff deemed inappropriate during review of time study quarters will be removed from the time study and excluded from claims and the cost report. All allowable staff must be listed on an approved staff pool list prior to the start of the time study quarter.

Each quarter, the district-assigned RMTS Coordinator is required to review, update changes (new staff assignments or vacancies) and certify the roster containing the staff cost pool list. In the middle of a quarter, if a staff person leaves the district and the position is then filled, the district must notify the RMTS vendor to update the contact information associated with that position. In the event that a new position is created or a district does not include that position on the staff cost pool list created at the beginning of the quarter, the district must wait until the next quarter to add that staff person/position. Costs cannot be claimed or reimbursed for a position unless that position is included in the staff cost pool list.

The RMTS Coordinator must assign staff to a specific job category in one of the three cost pools. As mentioned in **Section 3.1**, staff may only be listed in one cost pool. The RMTS Coordinator will determine the cost pool and position, and the RMTS vendor will use the district's certified staff list for each cost pool to generate the statewide sample for each cost pool. The RMTS vendor cannot add staff, delete vacancies or create the staff cost pool list for any district. The cost pools and staff within those pools are completed directly by the districts RMTS Coordinator. The Staff Pool List Decision Tree is available to aid RMTS Coordinators in assigning participants to the appropriate cost pool and job category. The RMTS vendor only summarizes the individual district cost pool lists into a statewide cost pool that is used to generate the sample for the given sample period.

District staff members who participate in the time study must be assigned to a job position or category that best describes their job function. If a category includes a limited mix of job functions and titles, the functional (or working) job title must be listed beside each staff person's name.



Staff Pool List Decision Tree

For additional information refer to Appendix A.8 the RMTS District Coordinator’s Guide.

3.2 Responding to Time Study Moments

Staff included in the RMTS staff cost pool list and chosen as a participant in the sample will receive the following e-mail notifications regarding the RMTS moment they must respond to:

- Colorado Random Moment Time Study Notification – Pre-Participation Notice
- Colorado Random Moment Time Study Notification – Moment in Time is in 1 Hour
- Colorado Random Moment Time Study Notification – 24 Hour Late Notice
- Colorado Random Moment Time Study Notification – 3 Day Late Notice

A sampled participant receives the first e-mail notification five days prior to the selected moment in time. This initial email provides the web address to access the electronic

RMTS form, and the participant's assigned user name and password. The RMTS District Coordinator's Guide (**Appendix A.8**) contains step-by-step instructions for completing the form.

A participant will receive two follow-up e-mails if the RMTS form is not completed on the day of the sampled moment in time. The district's RMTS Coordinator will be copied on the follow-up e-mails sent to the participant. However, the participant's user name and password will not be included in the late notification e-mails. All documentation for a sampled moment must be returned within five days after the sampled date.

Documentation of moments not received within the required time frame cannot be used in the calculation of the necessary number of moments needed for statistical validity to satisfy the level of precision of +/- 2% with a 95% confidence interval. RMTS compliance means that at minimum 85% of all district moments, state-wide, in each cost pool are completed and submitted timely, thus 'valid' moments. Valid moments include those that are completed accurately and submitted within the allowable 5 school day window. Districts that do not meet the minimum 85% compliance rate could jeopardize the state from meeting statistical validity.

For coding purposes, documentation provided by the participant for the sampled moment must sufficiently answer the five questions:

1. Were you working?
2. What were you doing?
3. Why were you performing this activity?
4. Who were you working with at the sampled moment?
5. Was the service you performed listed on the child's IEP/IFSP?

Each sampled participant must complete the five (5) questions for each moment in which they were selected. To respond to the first (1) question the participant selects the yes or no option. Responses to questions two (2) and three (3) are completed by the participant in free form text. Participants choose a response of yes, no or N/A for questions four (4) and five (5). After answering the five (5) questions, the sampled participant certifies the accuracy of their responses prior to submission.

The RMTS Coordinator is responsible for monitoring staff participating in the RMTS to ensure that moments are responded to within the required timeframe of five (5) school days. The district must maintain an eight-five percent (85%) or higher compliance rate for time study responses attributed to their staff as set forth in the [Colorado School Health Services Program Time Study Implementation Guide](#) Services Program Time Study Implementation Guide. Districts that do not meet the minimum 85% compliance rate are subject to the RMTS non-compliance process.

RMTS non-compliance process is comprised of two steps:

Step 1: After the first quarter of non-compliance

- The district will receive a warning letter from the Department outlining the consequences for non-compliance.
- The district will be required to submit Corrective Action Plan (CAP) to the Department outlining their plan to meet compliance.

Step 2: After two consecutive quarters of non-compliance

- The district may be removed from participation in the SHS program for failure to comply with the program requirement.

3.3 Oversight and Monitoring

Coding Quality Assurance

An intensive quality assurance process is performed by the Department to ensure that coding related to each RMTS participant's sampled moment is accurate. Initially, all coding is conducted centrally by the RMTS vendor. Every valid response is coded by one coder and then verified by a second coder. This provides a check on the accuracy of each code before it is finalized. If there is insufficient information to determine the appropriate code for the activity description provided by the time study participant, the coder will contact the participant for additional information. If the participant does not respond to the coder's request then the coded response will default to non-Medicaid and be included in the overall quarterly time study results. If a discrepancy is encountered, the coders will discuss the code before coming to a final decision.

Each quarter, the Department audits a 5% sub-sample of coded moments to ensure coding completeness, accuracy and consistency. The RMTS vendor generates a random 5% sample of moments and produces a report identifying the sampled staff's name, position, district, moment due date, moment submitted date, all narrative responses and any follow-up communications with the participant. The Department reviews the participants' response to each question completed for the sampled moment to determine the correct code. The Department refers to the time study codes and activity descriptions outlined in the Time Study Implementation Guide (**Appendix A.7**). The Department's coding is then compared with the vendor's coding. If there is a discrepancy between the Department's coding and the vendor's coding, it is summarized by the Department in writing for the vendor to review and discussed verbally during a quarterly coding meeting. The vendor may also contact the participant if additional information is necessary to resolve the discrepancy. The centralized coder reviews moments identified to have discrepancies and adjusts those, and any similar moments, to the coding decision identified by the Department. Necessary changes are to be made and reflected in the final time study results for that sample period. Based on discussions with the Department, additional guidance and training for centralized coding may occur. Additionally, the Department may choose to broaden the sub-sample based on results of the review. The RMTS results are finalized on completion of the Department's sub-sample review and approval.

Additional RMTS Documentation and Recordkeeping Requirements

All participating districts are required to maintain documentation supporting the RMTS results. Districts are required to maintain the following documents:

- A direct services staff cost pool list of eligible individuals, including job categories and applicable provider licenses and certifications.
- A TCM staff cost pool list of eligible individuals, including job categories.
- An administrative services only staff cost pool list of eligible individuals, including job categories.

Districts must maintain and have available on request by state or federal entities their contract with the Department to participate in the SHS Program. The contract requires districts to comply with all state and federal regulations regarding the SHS Program.