# School Health Services (SHS) Program Department of Health Care Policy & Financing (HCPF)

**Annual Training**

**August 2023**

PUBLIC CONSULTING GROUP

Solutions that Matter

# Agenda

Introduction

SHS Organization Activity

PCG Claiming System Enhancements

Random Moment Time Study (RMTS)

Medicaid Administrative Claiming (MAC)

Annual Cost Reporting

Annual Cost Reporting Activity

Annual Cost Report Desk Reviews

Program Compliance

Program Resources and Contacts

Appendix
 - Acronyms
 - Comprehensive Review Scoring Rubric

# Introduction

# Overview – Colorado School Health Services (SHS) Program

The school-based Medicaid program is a joint federal and state program that funds allowable medical and transportation services for eligible students

- Districts/Boards of Cooperative Educational Services (BOCES) incur costs for providing services to Medicaid enrolled students
  - Medicaid reimburses a portion of district costs based on what is allowable as outlined in the Centers for Medicare & Medicaid Services (CMS) approved State Plan Amendment (SPA)

**Monthly Interim Payments**

**Medicaid Administrative Claiming (MAC)**

**Annual Cost Settlement**

# Program Roles and Responsibilities

## Colorado Department of Health Care Policy & Financing (HCPF)

- Enforce CMS guidelines
- SHS program policy expert
- Training administration
- Approve/deny cost reporting extension requests

## Colorado Department of Education (CDE)

- Local Services Plan (LSP)
- Expenditure allowability expert
- Reimbursement Spending Report
- Parental consent

## Public Consulting Group (PCG)

- Claiming System administrator
- Random Moment Time Study (RMTS), quarterly cost reporting, and annual cost reporting subject experts
- PCG Claiming System Help Desk admin

## Districts/BOCES

- Medicaid coordinator logistics
- District specific methods on cost reporting
- Monitoring random moment survey completion
- Provider specific training methods

# SHS Organization Activity

# PCG Claiming System Enhancements

# Multi-Factor Authentication

| What | Multi-Factor Authentication will be required for users of the PCG Claiming System |

| Why | Multi-Factor Authentication is an important security enhancement to protect data in the system |

RMTS participants will **NOT** be impacted by Multi-Factor Authentication

### Select an Authentication Method

Select the Multi-Factor Authentication Method that you would like to add to validate your information while logging in:

SMS Authentication ⓘ

Email Authentication ⓘ

G One Time Password via Google Authenticator ⓘ

SAVE

# Resources Dashboard

**What** — Filtering functionality on the resources tab in the PCG Claiming System

**Why** — Users can find documents and trainings by Fiscal Year (FY) and program area

# Documentation Upload

| | |
|---|---|
| **What** | Users can now upload documentation and support files directly into the PCG Claiming System |
| **Why** | To eliminate steps in downloading a File Transfer Protocol (FTP) site and allows for uploading sensitive documentation easily |

Home    Users ▾    Staff Pool ▾    Calendar    Moments    Configuration ▾    Reports    **Documentation Upload**

**Quarterly Milestone Summary**

Quarterly Start Process

Certify Staff Pool List
0%

**Message Board**

Welcome to the PCG Claiming System!
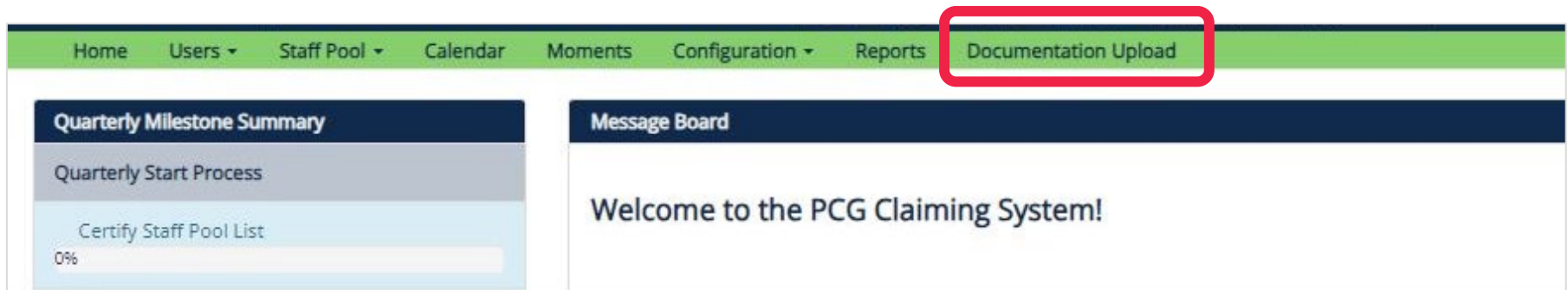
# RMTS

# Direct Medical RMTS Percentages



Statewide Direct Medical Percentages (DMPs) by Quarter

*DMP line values:* 44.1%, 43.4%, 33.7%, 34.9%, 37.3%, 38.7%, 39.4%, 34.4%, 39.2%, 39.0%, 38.4%

*Free Care DMP line values:* 3.4%, 3.9%, 4.6%, 5.3%, 4.9%, 4.9%, 4.6%, 5.5%, 4.9%

*X-axis:* JM20, AJ20*, OD20, JM21, AJ21, OD21, JM22, AJ22, OD22, JM23, AJ23**

Legend: Free Care DMP — DMP
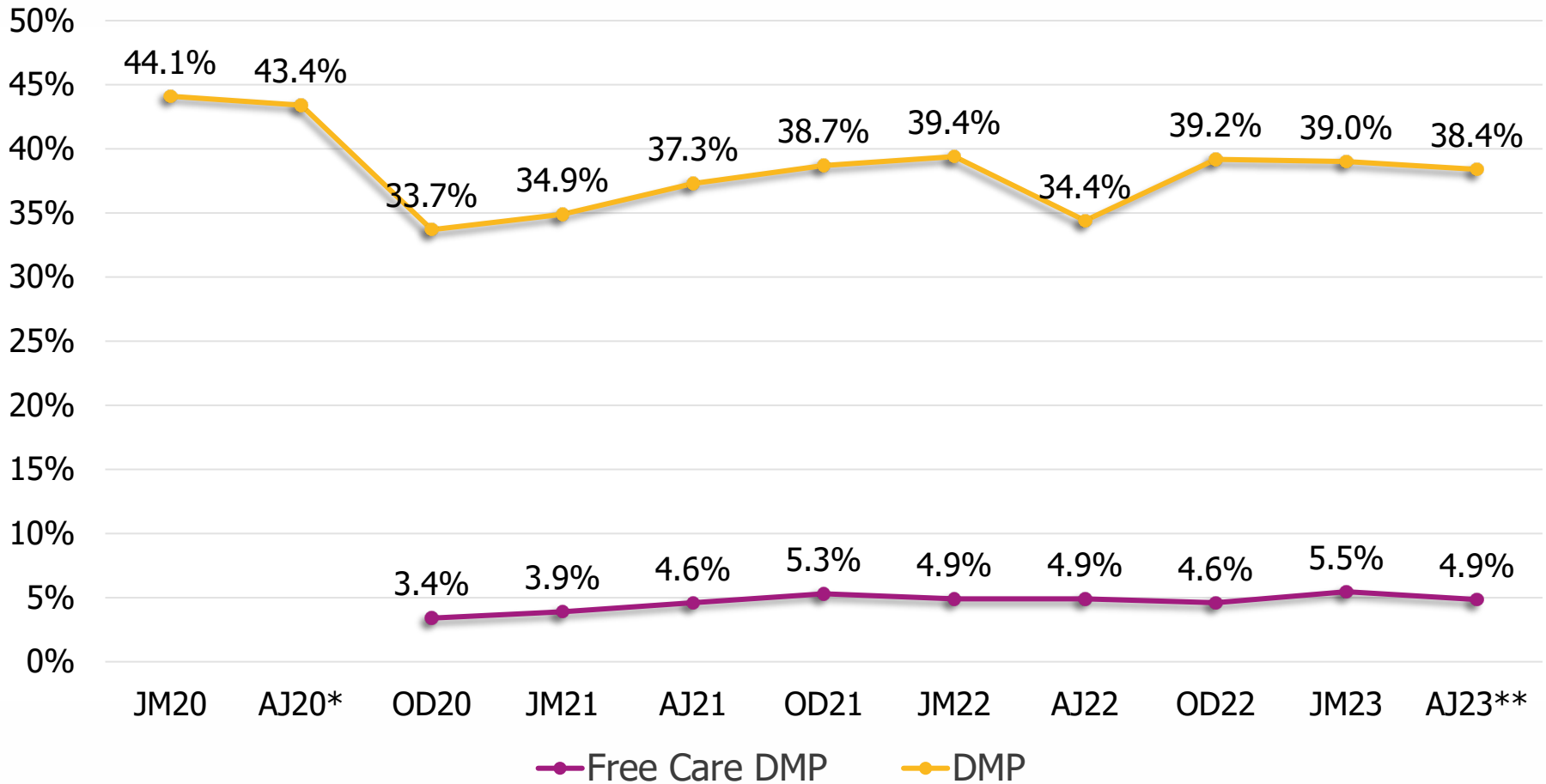
*\* AJ20 used hybrid time study results per the CMS waiver exception*
*\*\*AJ23 preliminary*

# Medicaid Administrative Claiming (MAC) RMTS Percentages

## Statewide MAC Percentages by Quarter
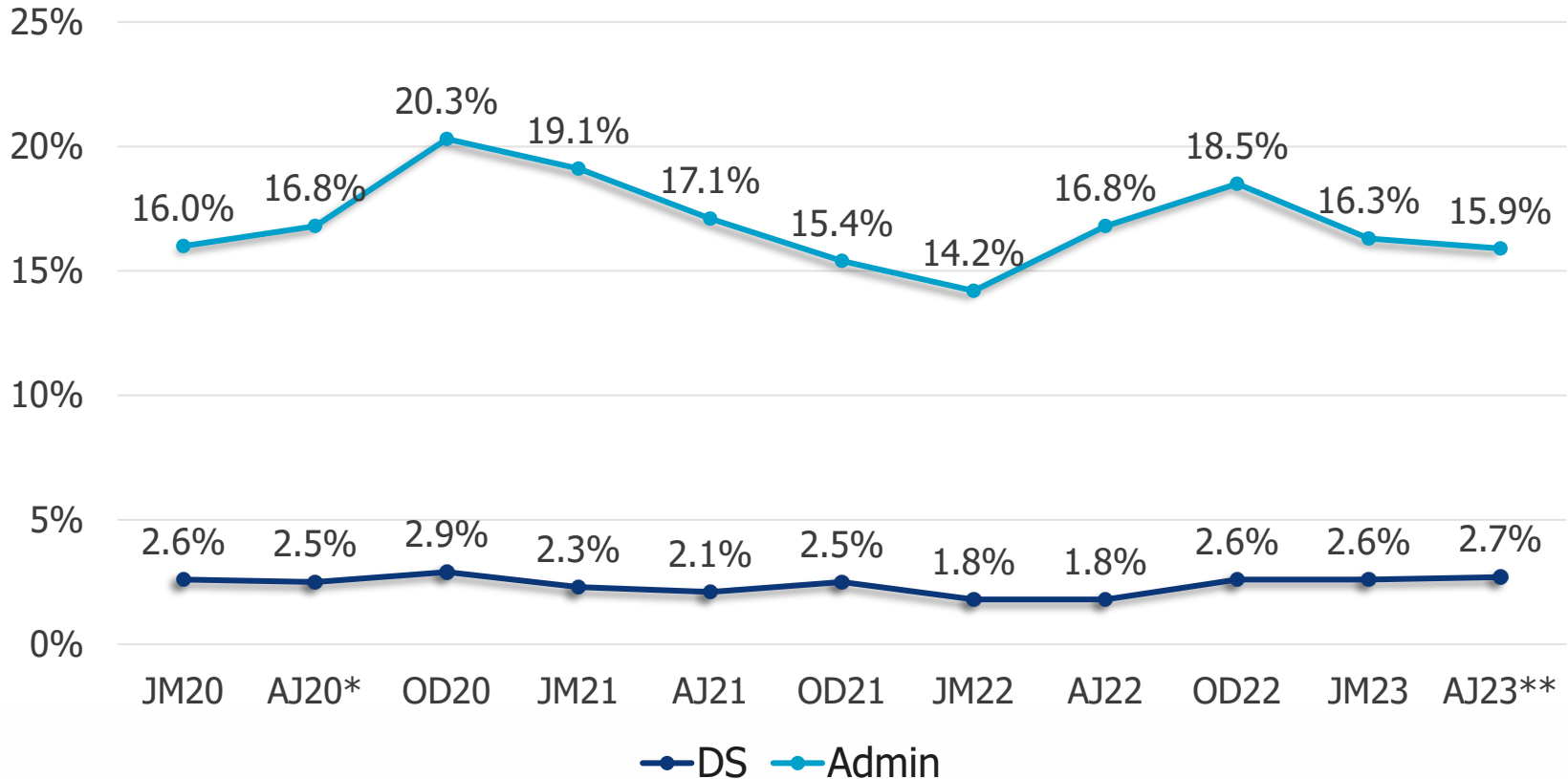


*AJ20 used hybrid time study results per the CMS waiver exception*
**AJ23 preliminary*

# Time Study Drives Cost Reporting

Shifts

Staff Pool List

Calendars

District Input

Random Moment Time Study

MAC allowable %

Direct Medical %

Quarterly MAC Cost Reporting

Annual Cost Reporting and Settlement
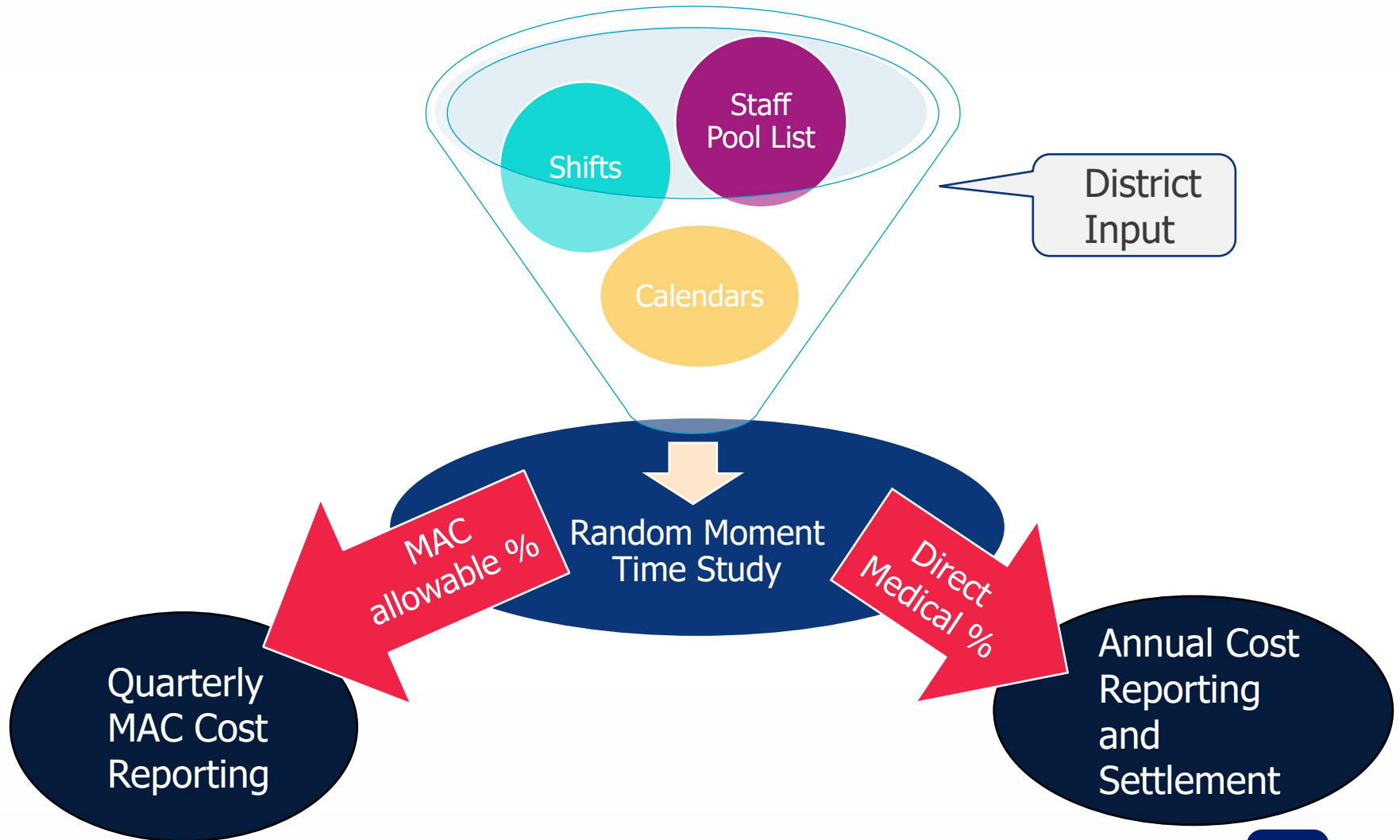
# FY23 Preliminary Direct Service Behavioral Health Results

## Behavioral Health Statewide Activities by Job Category
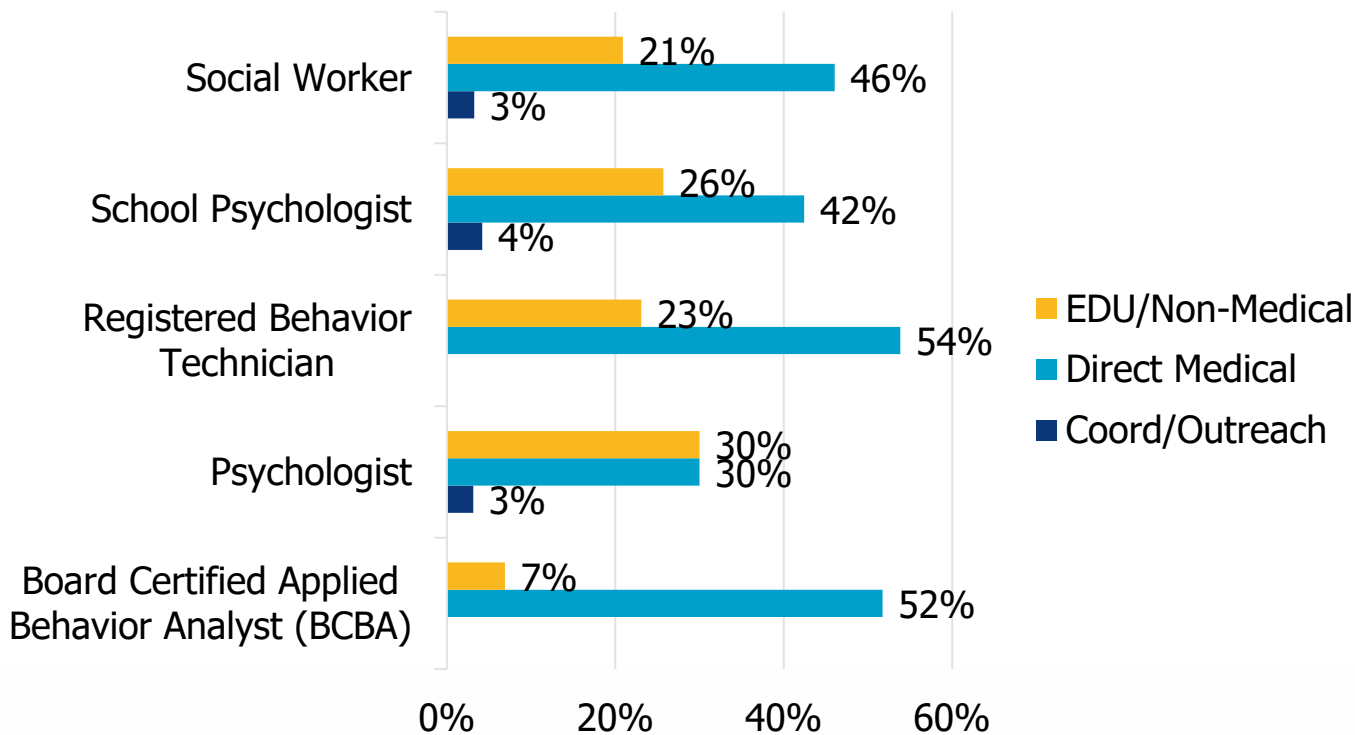


**DS Cost Pool % of Distributed Moments**

1. Social Worker, 5%
2. School Psych, 5%
3. RBT, <1%
4. Psychologist, <1%
5. BCBA, <1%

Legend:
- EDU/Non-Medical
- Direct Medical
- Coord/Outreach

Chart values:
- Social Worker: EDU/Non-Medical 21%, Direct Medical 46%, Coord/Outreach 3%
- School Psychologist: EDU/Non-Medical 26%, Direct Medical 42%, Coord/Outreach 4%
- Registered Behavior Technician: EDU/Non-Medical 23%, Direct Medical 54%
- Psychologist: EDU/Non-Medical 30%, Direct Medical 30%, Coord/Outreach 3%
- Board Certified Applied Behavior Analyst (BCBA): EDU/Non-Medical 7%, Direct Medical 52%

*Note:* the higher percentage of moments distributed in a job category means it will have a larger impact on statewide time study results

# FY23 Preliminary Direct Service High Volume Job Category Results

## Nursing and Personal Care Statewide Activities by Job Category



**Speech/Language Pathologist**
- EDU/Non-Medical: 12%
- Direct Medical: 62%
- Coord/Outreach: 2%

**Personal Care Aide/Teacher's Aide**
- EDU/Non-Medical: 45%
- Direct Medical: 21%
- Coord/Outreach: 0%

**Nurse, RN**
- EDU/Non-Medical: 13%
- Direct Medical: 48%
- Coord/Outreach: 4%

**Health Technician**
- EDU/Non-Medical: 40%
- Direct Medical: 31%
- Coord/Outreach: 1%

Legend:
- ■ EDU/Non-Medical
- ■ Direct Medical
- ■ Coord/Outreach

X-axis: 0%, 20%, 40%, 60%, 80%

### DS Cost Pool % of Distributed Moments

1. Health Technician, 35%
2. Personal Care Aide/Teacher's Aide, 25%
3. SLP, 25%
4. Nurse, 7%

*Note:* the higher percentage of moments distributed in a job category means it will have a larger impact on statewide time study results

# FY23 Preliminary Admin Personnel High Volume Job Category Results



**FY23 Preliminary Admin Personnel High Volume Job Category Results**

School Counselor
- EDU/Non-Medical: 52%
- Direct Medical: 15%
- Coord/Outreach: 6%

Program Specialist
- EDU/Non-Medical: 35%
- Direct Medical: 14%
- Coord/Outreach: 10%

Non-licensed Social Worker
- EDU/Non-Medical: 24%
- Direct Medical: 30%
- Coord/Outreach: 14%

Non-licensed Psychologist
- EDU/Non-Medical: 29%
- Direct Medical: 26%
- Coord/Outreach: 15%

Legend:
- EDU/Non-Medical
- Direct Medical
- Coord/Outreach
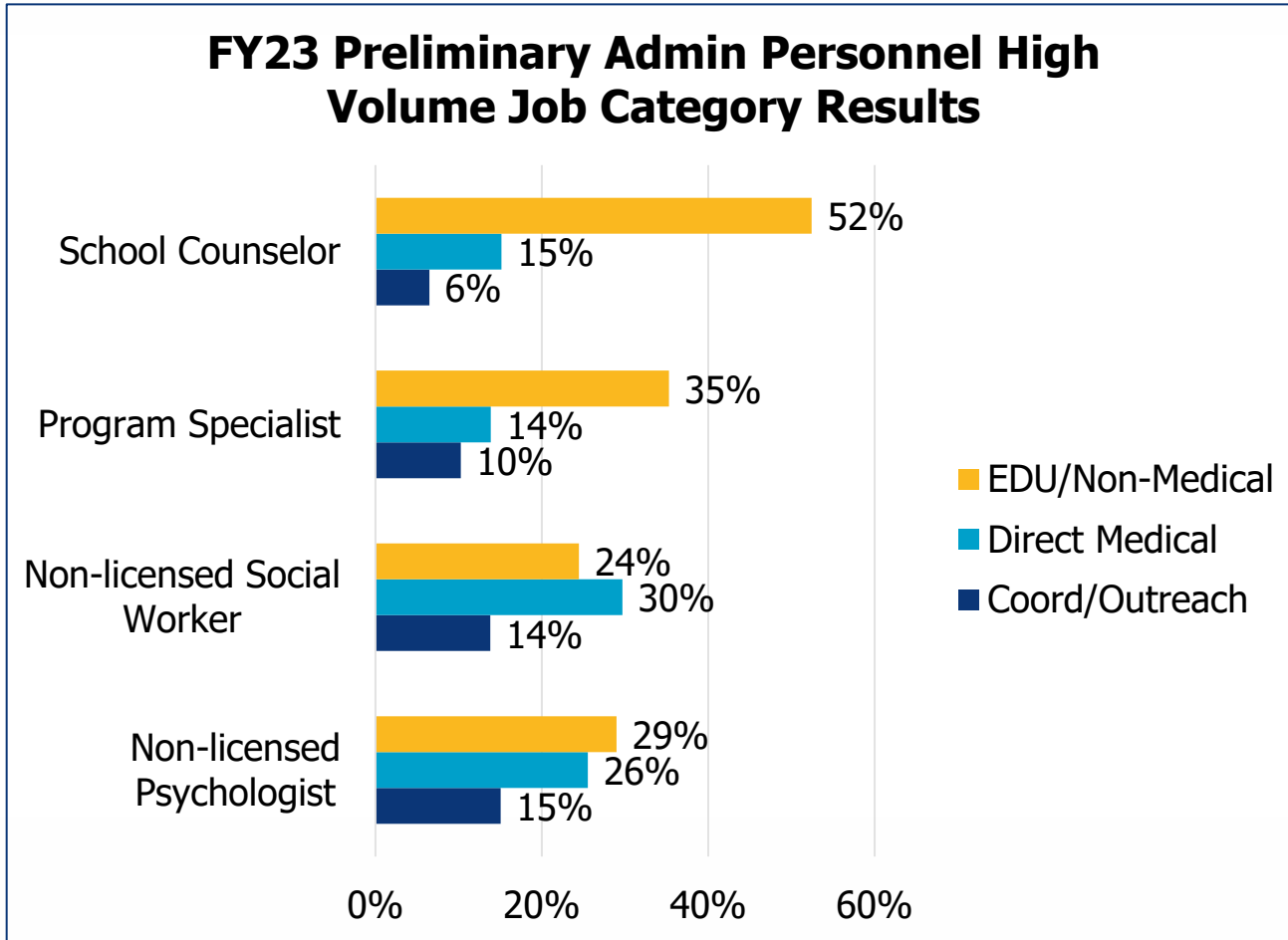
**Admin Cost Pool % of Distributed Moments**

1. School Counselor, 24%
2. Program Specialist, 21%
3. Non-licensed Social Worker, 18%
4. Non-licensed Psychologist, 13%

*Note:* the higher percentage of moments distributed in a job category means it will have a larger impact on statewide time study results

# SPL Actions

The PCG Claiming System has many functions that change as a quarter moves through time. The following are actions can be taken:

| Prior to Quarter Start | During an Active Quarter | After a Quarter |
|---|---|---|
| • Add/delete positions<br>• Job Category<br>• Email/Last name<br>• Direct Replacements<br>• Shifts<br>• Locations | • Email/Last name<br>• Vacate<br>• Direct Replacements<br>• Coordinators cc'd on overdue moments (leave blank if you want all coordinators with cc permission to receive emails) | • None – once a quarter is over no changes can be made to SPLs or calendars |

# Vacancy/Direct Replacement Activity

# SPL To-Do List

1) Obtain updated roster from Human Resources
2) Make SPL edits in PCG Claiming System
    a. Make changes to shift if needed
    b. Vacate/replace those who have left the district or will not return in the upcoming quarter
    c. Add new hires to upcoming quarter.
    d. Confirm new hires have correct qualifications and are not 100% federally funded
3) Before certifying, send out the RMTS At-A-Glance resource found on the homepage of the PCG Claiming System to all emails on the SPL
    a. Resolve any undeliverable emails by making edits in the system
    b. If email is correct, confirm with HR if they are still in the district and Vacate the provider if not
4) If you have vacancies that will not be filled in the upcoming quarter, they must be deleted in the upcoming quarter

# Calendar, Shifts and SPL Updates

The PCG Claiming System has many functional options to utilize. Some functions have a direct impact on the time study and others are informational in nature

**System actions that have a direct affect on the time study...**

- How moments are being answered

- Shifts in use

- Holiday/Non-Work Days

- Snow Day/Unplanned Closures

- Vacancies

- Job Categories and Cost Pools

- Incorrect emails

- Licensure

**Optional system functions...**

- Early Release Days (calendar)

- Teacher In-Service Days (calendar)

- Shifts not in use - can be deactivated

- Locations (SPL)

# Moment Notification Schedule

| Prior Notifications |
| --- |
| 24hr, 6hr, 1hr and time of moment |

| Overdue Reminders | |
| --- | --- |
| 12hr, 24hr, 36hr | Coordinators may be copied |

| Follow-Ups | |
| --- | --- |
| Sent as necessary up to three times per moment | Coordinator may be copied on 2-day reminders |

*Note:* Coordinators are only copied on notification emails if they have selected this option in the PCG Claiming System

# RMTS Compliance

Districts participating in the RMTS must reach at least an 85% compliance percentage every quarter (except July-September). Districts/BOCES that receive a small number of moments can be at risk for not meeting compliance if only one or two survey moments do not receive responses.

$$\frac{\text{Valid Moments} - \text{No Responses}}{\text{Valid Moments}} = \text{Compliance Percentage}$$

**Invalid moments:**

- Vacant moments
- Unpaid non-working moments

*NOTE: Failure to meet 85% compliance will result in a Corrective Action Plan (CAP)*

# Non-Work Calendar Days

**Holiday/Non-Work Day**

- There are no moments scheduled for these days
- These days are not counted as part of the response window
- Flagged **before** the sample is generated
- Do **not** use this option for tentative closures
  *Examples: snow days, fire days*

**Snow Day/Unplanned Closure**

- Moments are valid and are sent as scheduled
- Used when staff and students are excused from work/school unexpectantly (i.e., inclement weather)
- These days are not counted as part of the response window
- Flagged **after** the sample is generated

# RMTS Important Dates

**OD23 SPL and calendar**

Opens
8/1/23

Is Due
8/31/23

**JM24 SPL and calendar**

Opens
11/1/23

Is Due
11/30/23

MAC

# MAC Reimbursement



Statewide Net Reimbursement

| | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 | FY 2022-23 |
|---|---|---|---|---|---|
| Total | $5.2M | $6.3M | $7.3M | $7.6M | $6.1M |
| Apr - Jun | $1.3M | $1.7M | $1.8M | $1.9M | |
| Jan - Mar | $1.5M | $1.6M | $1.9M | $1.7M | $2.0M |
| Oct - Dec | $1.3M | $1.7M | $2.0M | $2.0M | $2.3M |
| Jul - Sep | $1.1M | $1.3M | $1.6M | $2.0M | $1.8M |

Legend: ■ Jul - Sep  ■ Oct - Dec  ■ Jan - Mar  ■ Apr - Jun
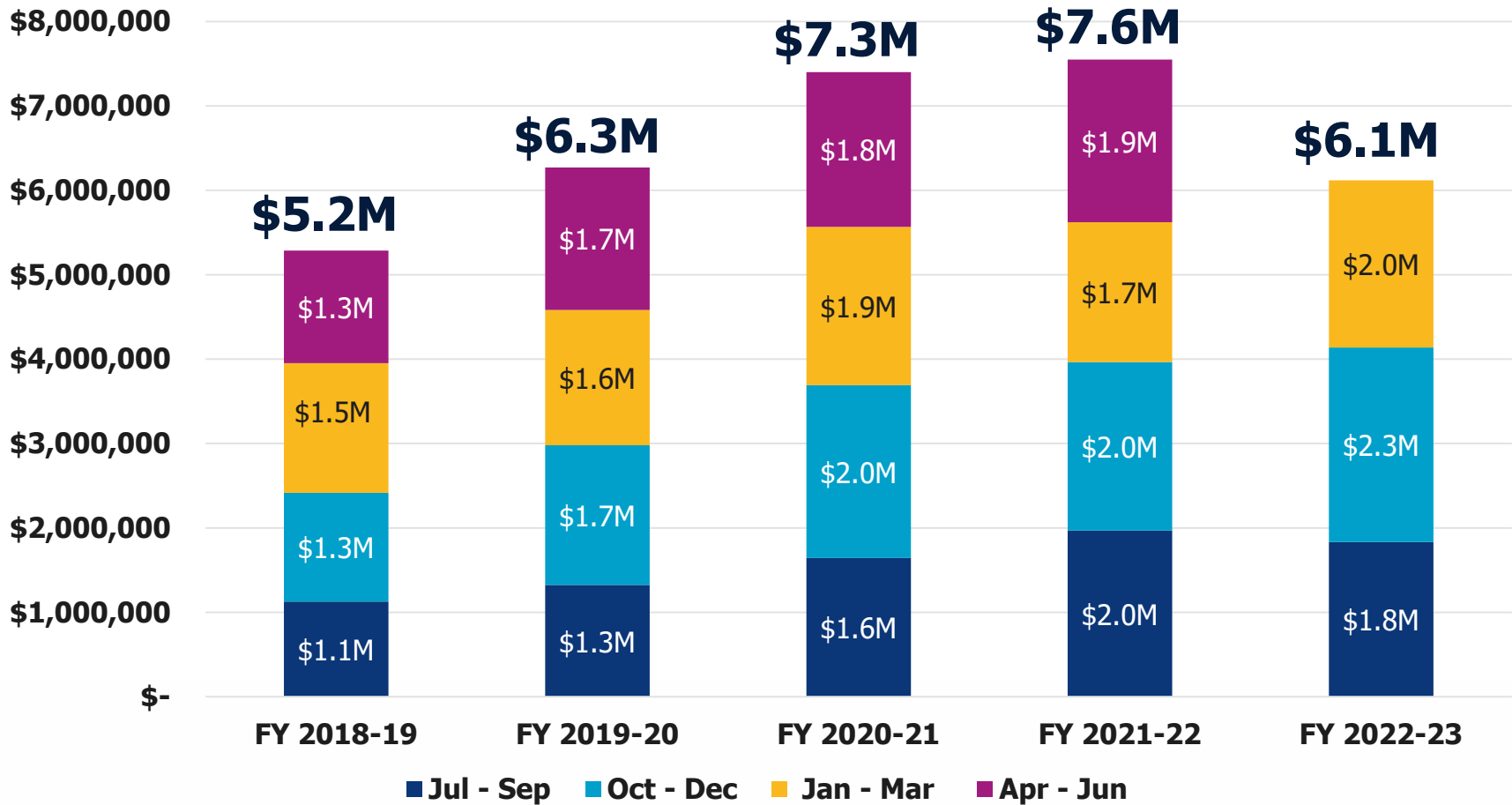
# Medicaid Enrollment Rate (MER)

This ratio has been steadily increasing since the start of the pandemic and Public Health Emergency (PHE). Rates may be negatively affected with the unwinding of the PHE.

**Statewide Average MER**

| | FY 2018-19 | FY 2019-20 | FY 2020-21 | FY 2021-22 | FY 2022-23 |
|---|---|---|---|---|---|
| MER | 39.50% | 37.80% | 42.00% | 45.60% | 47.67% |
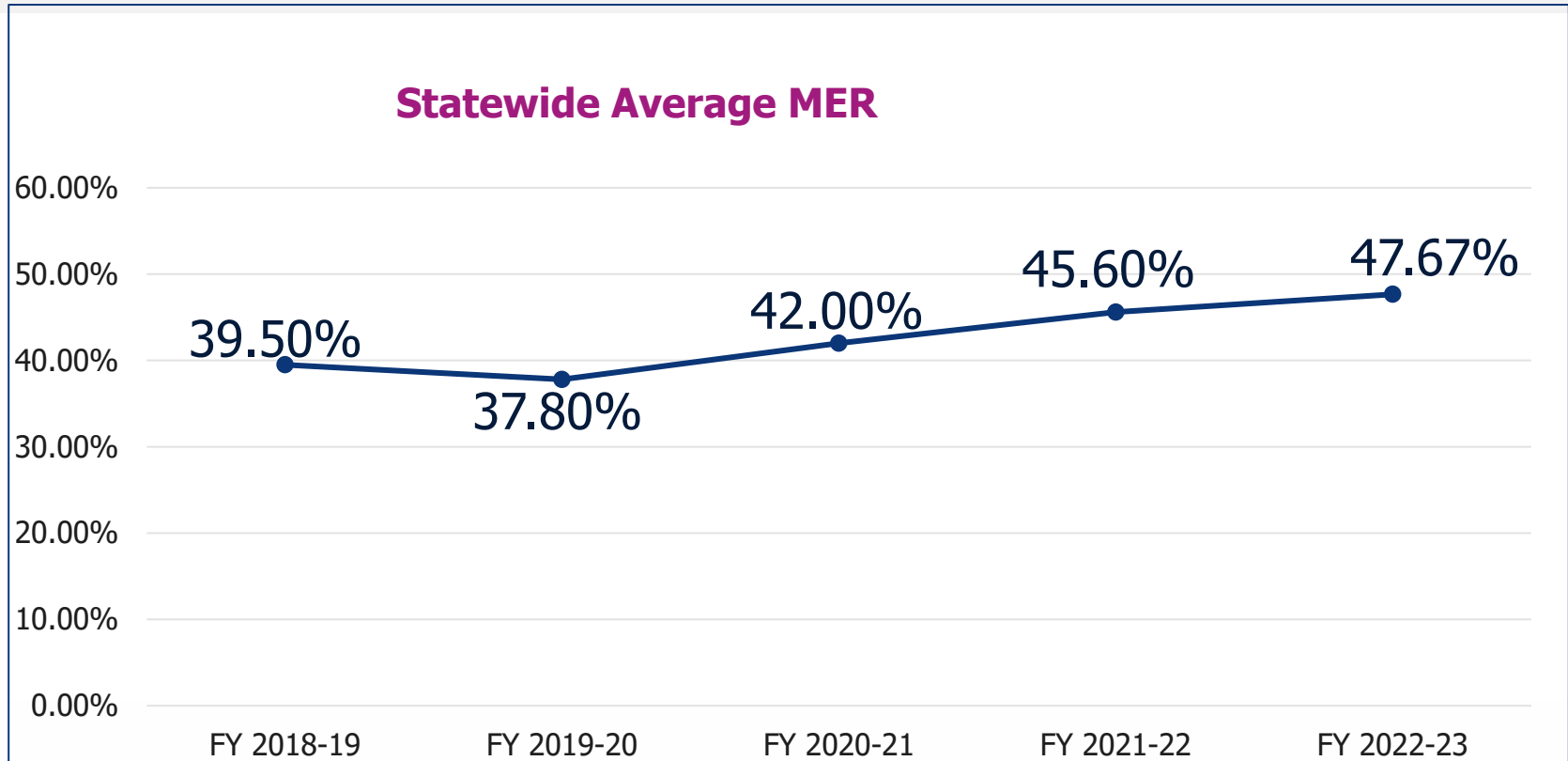
**MER Calculation** $=\dfrac{\text{Medicaid enrolled students}}{\text{Oct. 1 student count}}$

# MAC Certified Public Expenditure (CPE) Calculation
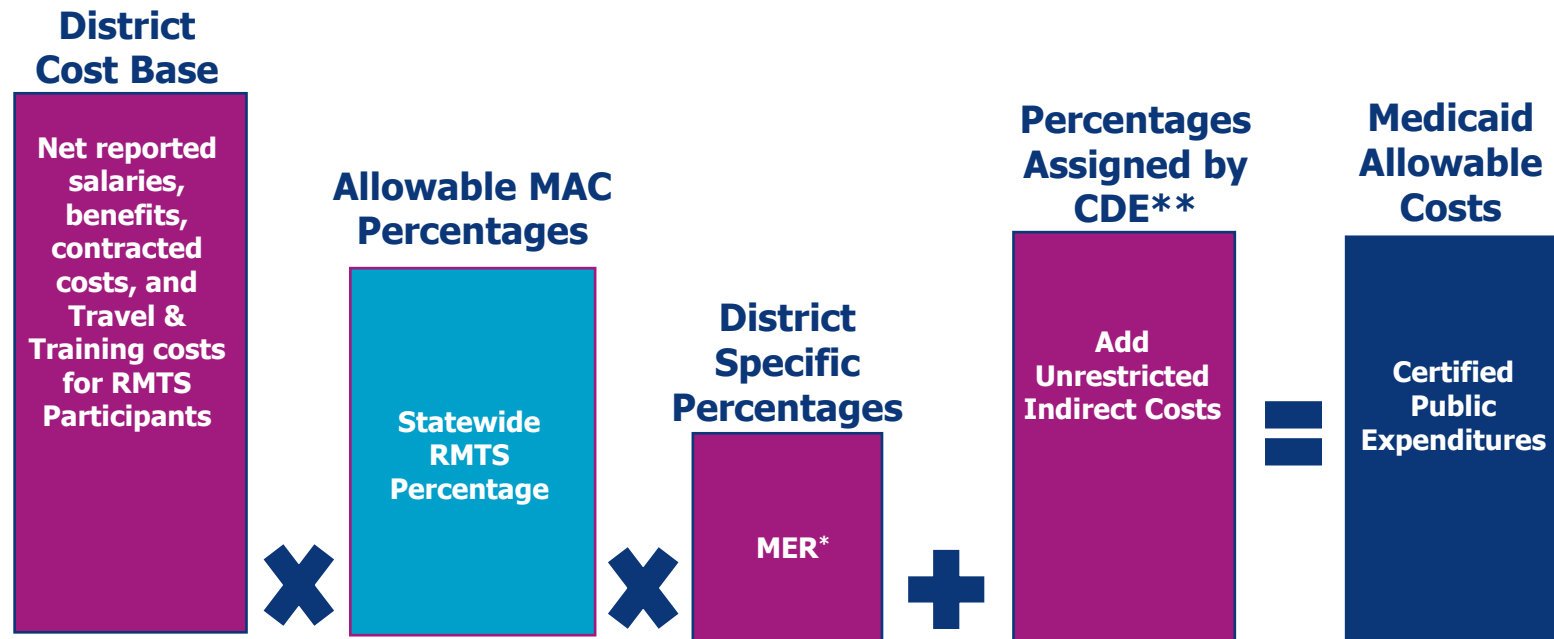
The quarterly MAC claim calculation includes several variables that are illustrated below:

**District Cost Base**

Net reported salaries, benefits, contracted costs, and Travel & Training costs for RMTS Participants

**×**

**Allowable MAC Percentages**

Statewide RMTS Percentage

**×**

**District Specific Percentages**

MER*

**+**

**Percentages Assigned by CDE\*\***

Add Unrestricted Indirect Costs

**=**

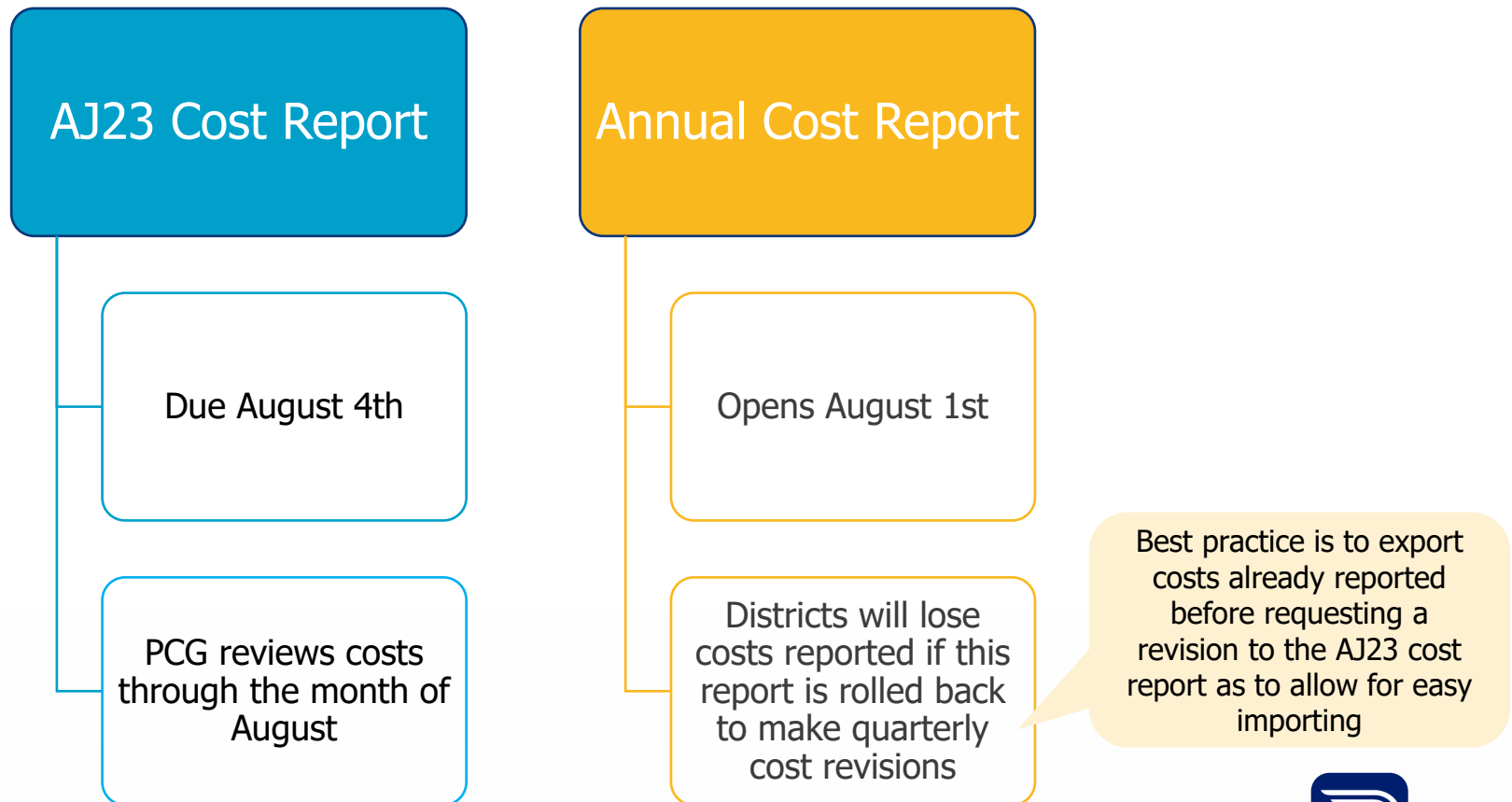**Medicaid Allowable Costs**

Certified Public Expenditures

*Medicaid Enrollment Rate (MER)
** Colorado Department of Education (CDE)

# Reminders: April – June 2023 MAC Quarterly Costs

The timing of the AJ23 cost report certification can impact your annual cost report opening, please see the following reminders:

**AJ23 Cost Report**

- Due August 4th
- PCG reviews costs through the month of August

**Annual Cost Report**

- Opens August 1st
- Districts will lose costs reported if this report is rolled back to make quarterly cost revisions

Best practice is to export costs already reported before requesting a revision to the AJ23 cost report as to allow for easy importing

# Reporting MAC Other Costs

Additional costs can be entered on a quarterly basis for 'staff travel and training'. These costs should be tied to the enhancement of the program or be used in the application of services.

**Frequently asked questions from districts...**

1. How should I enter travel costs for one of my providers? These costs will be entered by service type and are not specific to individuals.

2. Where should I enter these costs because I don't see 'other costs' in the claiming system? 'Other costs' fields will only appear once you have reported costs for that service type in that quarter.

3. Does it matter when I report these costs as long as it's in the same fiscal year? Yes it matters. Since quarterly costs are reporting on a cash basis accounting methodology costs should be reported in the quarter the district paid for the accommodations, services, etc.

Good examples of 'other costs' include expenses for the National Alliance of Medicaid in Education (NAME) and ongoing education for maintaining direct service licensure.

# MAC Other Costs

Please keep in mind the following guidance when reporting 'other costs' on MAC reports:

## These costs are NOT…

- Deferred and reported all at once
- CPR Classes
- Reported for the full amount the training costs
- For staff members traveling from school to school
- Direct medical supplies

## These costs are…

- Reported as they are incurred and paid
- Tied to a member on your quarterly Staff Pool List
- For specific trainings or conferences

# PCG Claiming System Demonstration

# Annual Cost Reporting

# Annual Cost Report

## 1 — Interim Payments

- HCPF and PCG calculate districts' interim payments prior to the start of the FY
- During the FY districts receive interim payments throughout the school year on a monthly basis

## 2 — Annual Cost Report

- After the end of the FY districts submit eligible costs via the PCG Claiming System
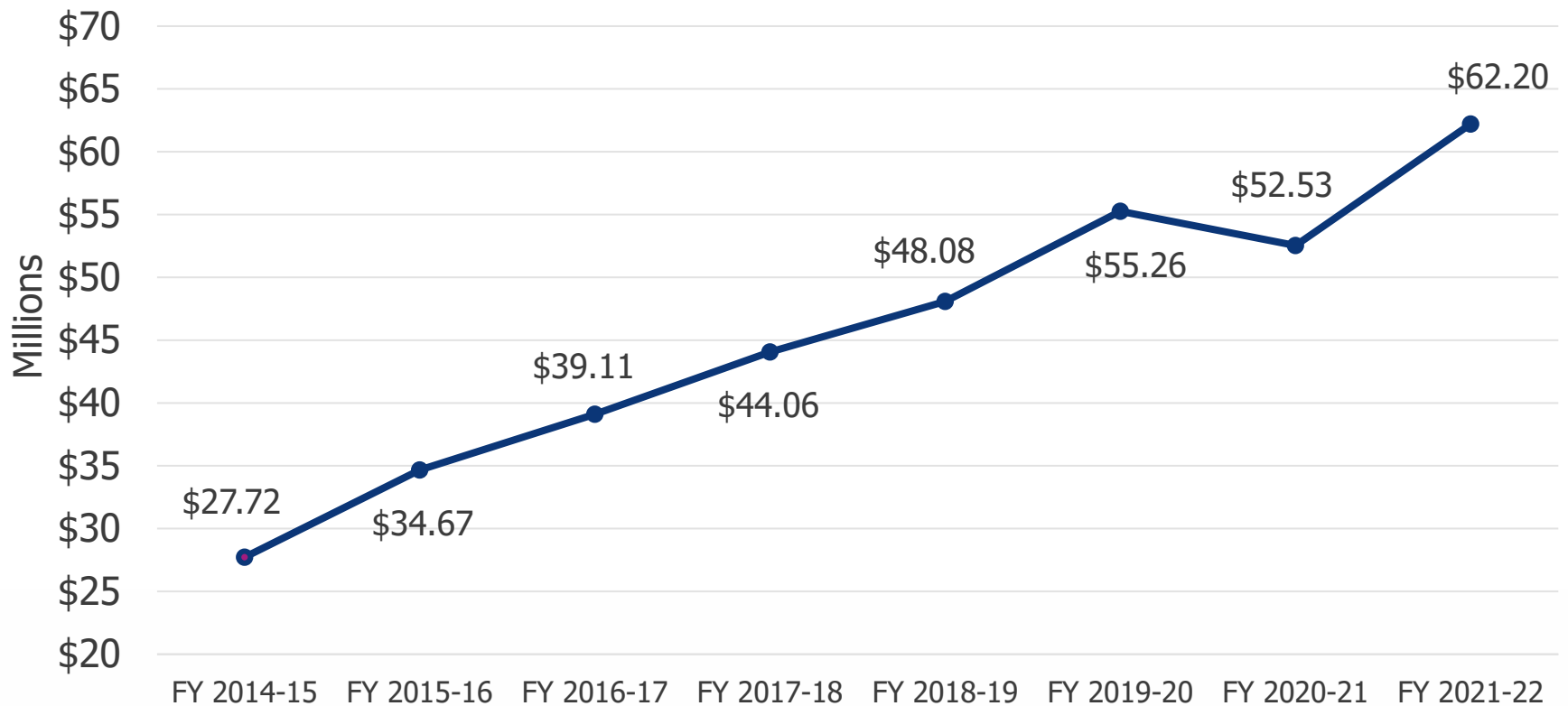- The FY 2022-23 annual cost report is due on 10/30

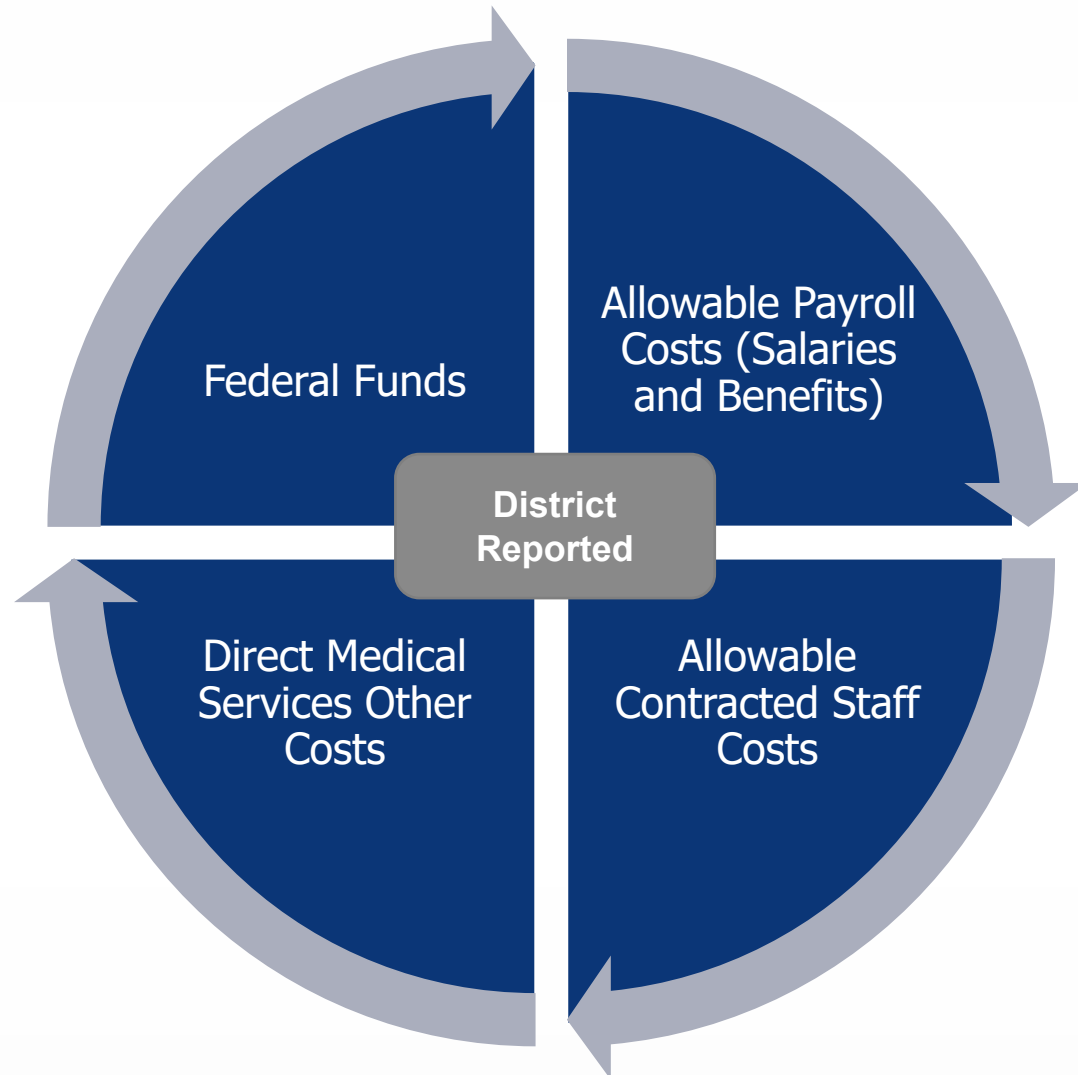## 3 — Annual Cost Settlement

- Interim payments are compared to the total Medicaid allowable costs for the previous FY, resulting in an additional payment or a recoupment of funds

# Annual Reimbursement



**Annual SHS Statewide Reimbursement
(Federal Share Less Withhold)**

# Annual Cost Report – Direct Medical Costs



Federal Funds

Allowable Payroll Costs (Salaries and Benefits)

District Reported

Direct Medical Services Other Costs

Allowable Contracted Staff Costs

# Direct Medical Salaries, Benefits and Contracted Costs

✓ Report staff costs **only** for the time period the employee was on the RMTS SPL

✓ Costs on the annual cost report are reported utilizing an **accrual accounting methodology**
- Date the service was rendered

✓ Report all allowable costs including pay and stipends associated with primary job function

## Helpful tips:

- Utilize the job span bar in the PCG Claiming System to accurately report allowable payroll costs

- Only costs associated with services provided while included on the SPL are allowable

- Work with your Human Resources (HR) department to ensure you are capturing the appropriate staff and employment status

# Direct Medical Services Other Costs

Direct medical other costs are allowable **ONLY** when used in the provision of an allowable direct medical service

✓ Cannot be 100% federally funded

✓ Items must fall under a service type in which districts have reported annual payroll costs

**Helpful tips:**

Districts must be able to answer 'Yes' to the following questions to confirm the item is allowable:

• Is the item used for a medical purpose?

• Is the item used in a direct medical service prescribed in the student's IEP or other plan of care?

• Is the desired outcome of using the item to achieve direct medical goals?

# Ratios Direct Medical

## PCG Reported

- ✓ Unrestricted Indirect Cost Rate (UICR)

- ✓ IEP Ratio

- ✓ RMTS DMP

**Helpful tips:**

- The UICR comes directly from CDE and are your program operating and overhead costs

- The IEP ratio is the percentage of Medicaid eligible students of all students with an IEP on 12/1

- The RMTS DMP is an average of all quarters within the FY's RMTS results
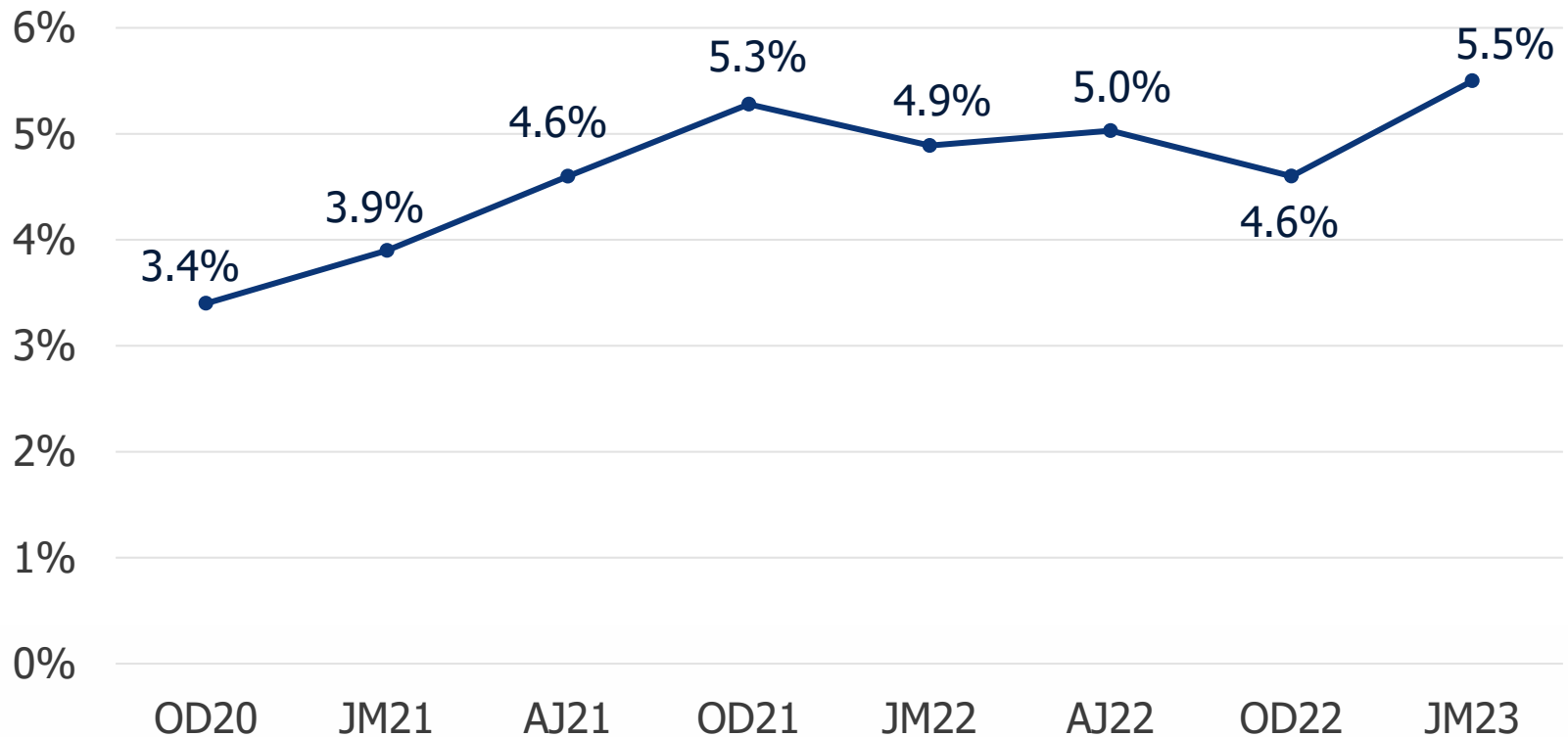
# Free Care

# Free Care RMTS Results

Free care reimbursement has continued to see an upward trend since implementation despite the OD22 quarter



**Free Care Percentages by Quarter**

# Medical Necessity

Free care services allows districts/BOCES to be reimbursed for medical services prescribed and rendered on other medical plans of care (outside of IEPs/IFSPs) **if** medical necessity has been established
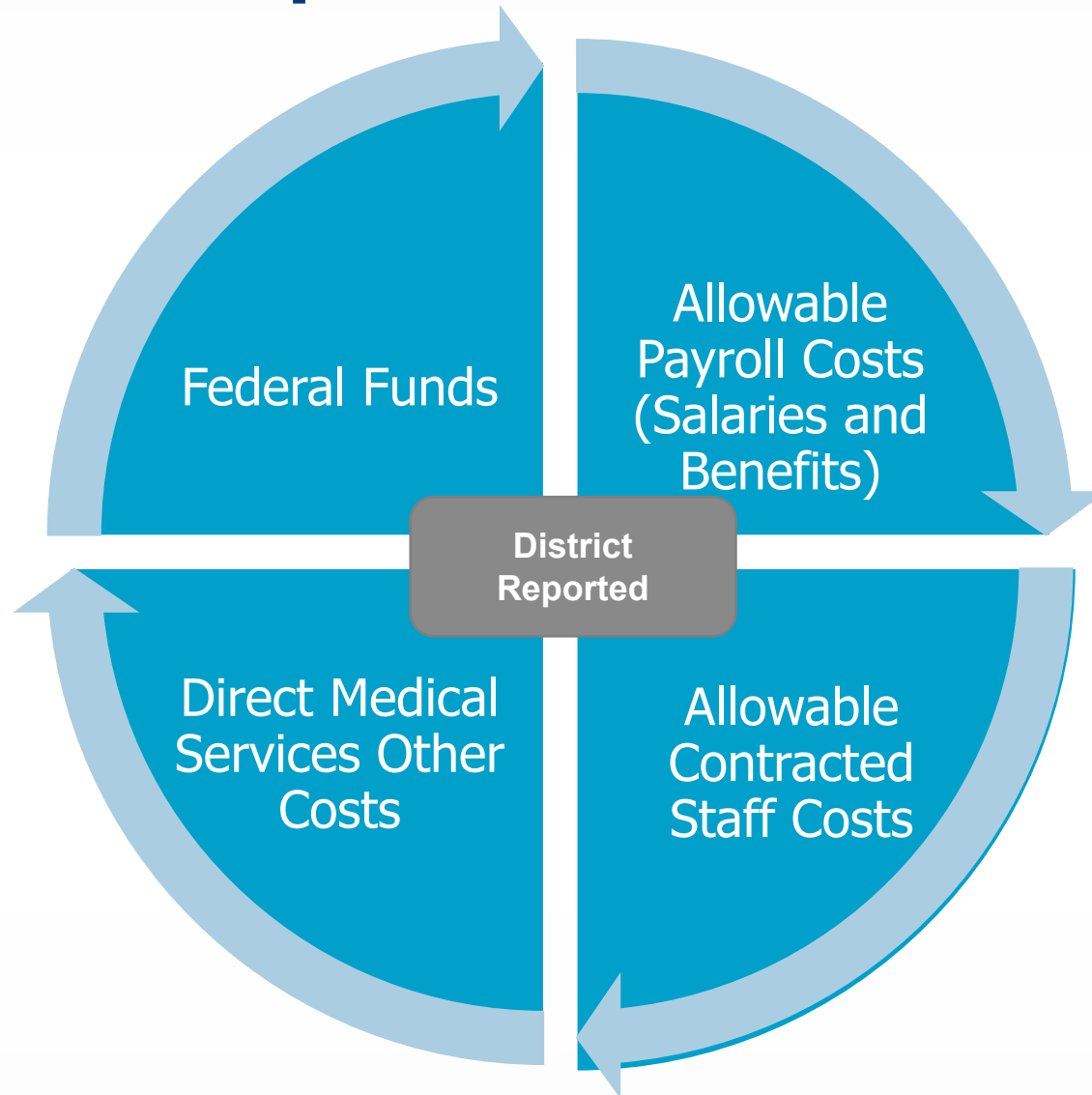
| Compliance Model | | |
|---|---|---|
| 1. Prescription by qualified provider of medical necessity | 2. Plan of care includes scope, frequency and duration | 3. Provider documents service delivery |

# Annual Cost Report – Free Care Costs



Federal Funds

Allowable Payroll Costs (Salaries and Benefits)

District Reported

Direct Medical Services Other Costs

Allowable Contracted Staff Costs
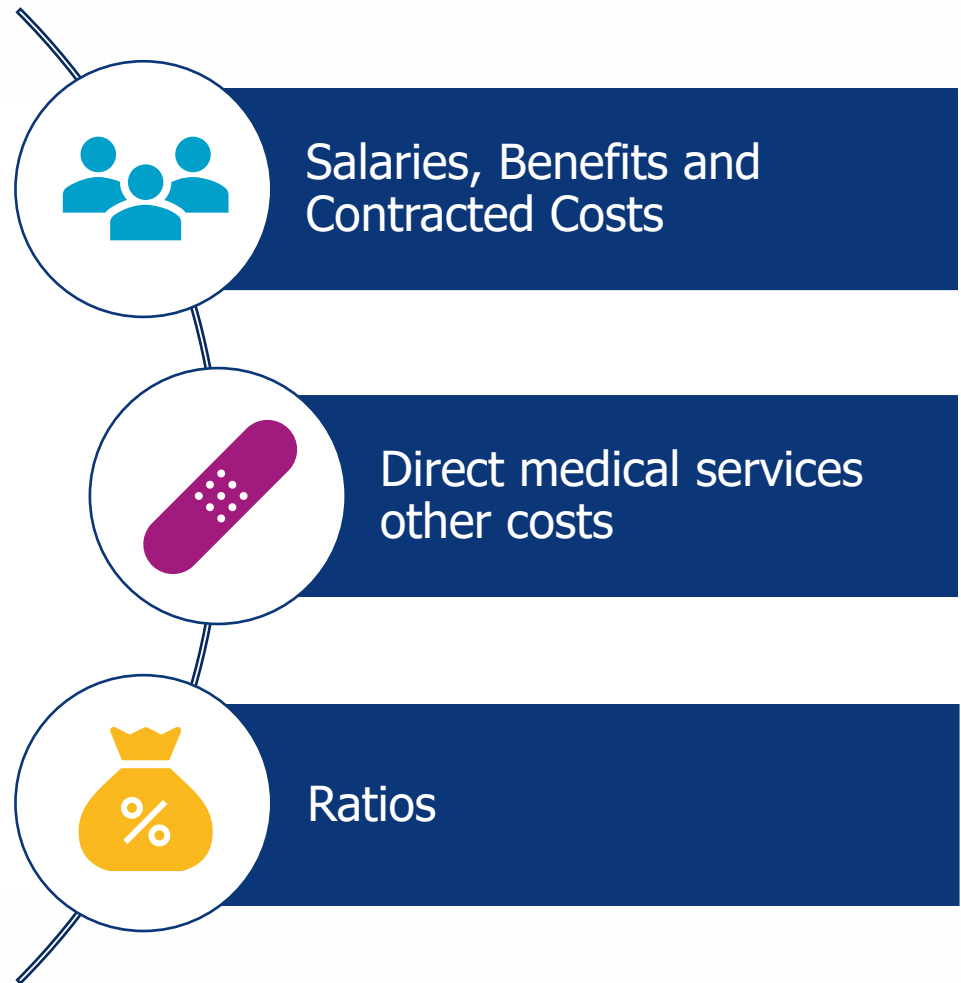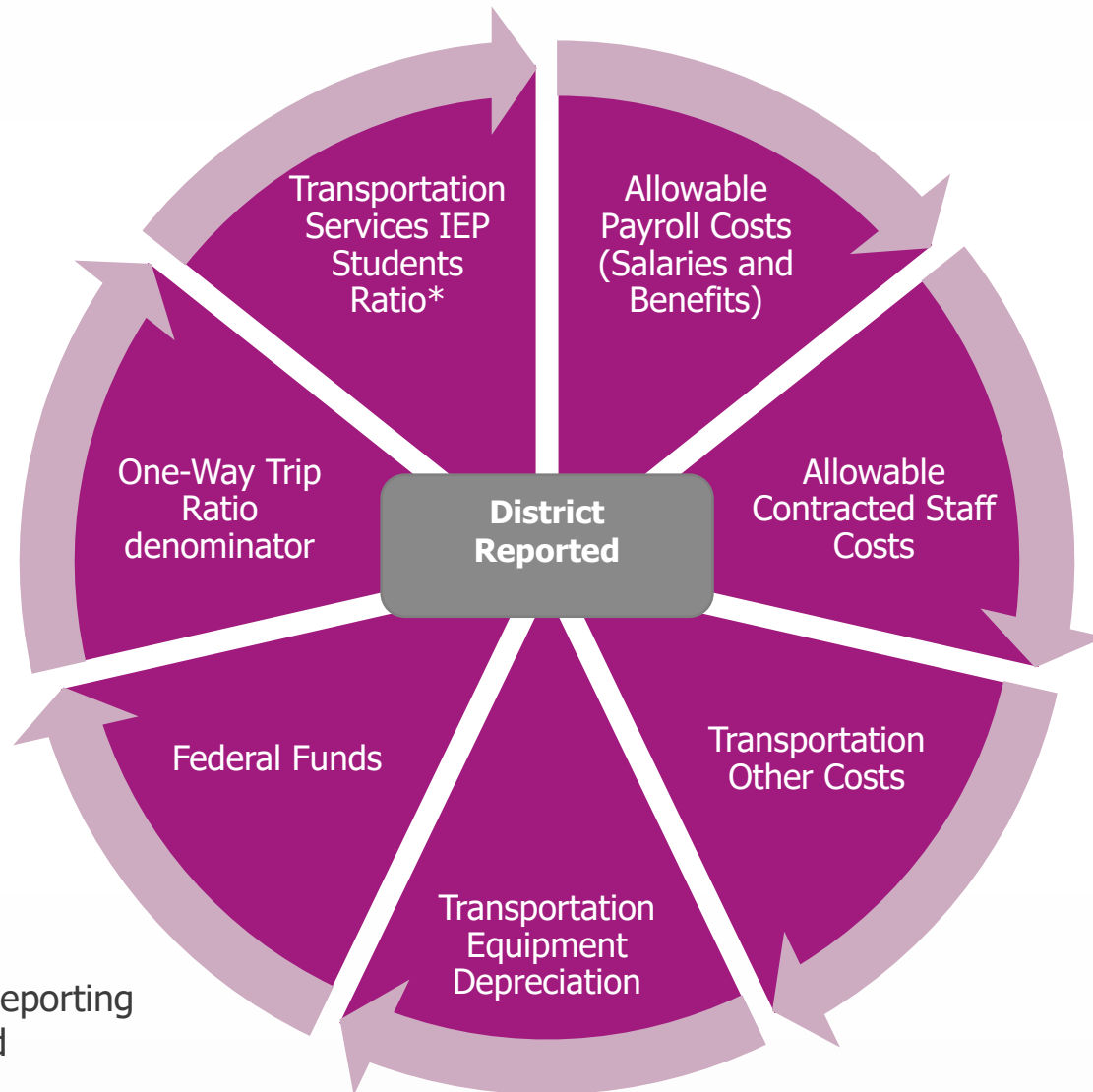
# Free Care Costs

- Free care staff costs and direct medical other costs are the same as costs used for direct medical costs

- The RMTS free care time study percentage is applied to allocate costs (PCG reported)

- The MER percentage is applied to costs (PCG reported)

Salaries, Benefits and Contracted Costs

Direct medical services other costs

Ratios

# Transportation Costs

# Annual Cost Report – Transportation Costs



- Transportation Services IEP Students Ratio*
- Allowable Payroll Costs (Salaries and Benefits)
- Allowable Contracted Staff Costs
- Transportation Other Costs
- Transportation Equipment Depreciation
- Federal Funds
- One-Way Trip Ratio denominator

**District Reported**

*Only applicable if reporting Not Only Specialized transportation costs

# Transportation Requirements

Transport requires use of physically modified vehicles

Transport occurs on the same day student receives a direct medical service

Districts must maintain bus logs of one-way trips

Vehicles must transport students to/from school in order to receive Medicaid allowable service(s)

Specialized transportation is written in the student's IEP

# 'Only' Specialized vs. 'Not Only' Specialized

## Only Specialized
- The costs exclusively pertain to a physically modified vehicle that transports students with specialized transportation in their IEP; AND
- Costs can be discretely associated to special education transportation with supporting documentation

## Not Only Specialized
- The costs CANNOT be discretely identified as specialized transportation;
- Are costs shared between general and special education transport; OR
- Costs are unidentifiable between general education and special education student services
  - Purchased in bulk
  - Associated with a 'shared' vehicle
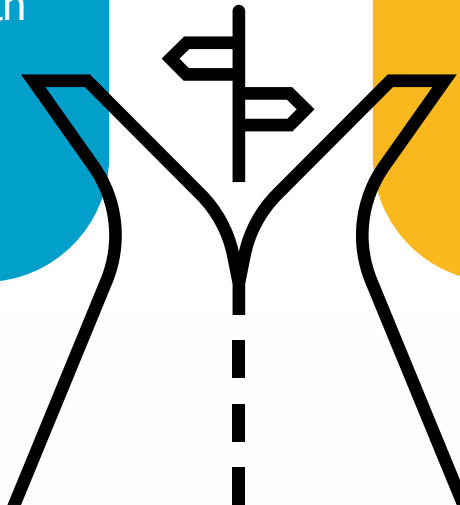
# Transportation Staff Costs

Districts/BOCES may report transportation staff costs for:

- ✓ Drivers
- ✓ Bus Aides
- ✓ Mechanics
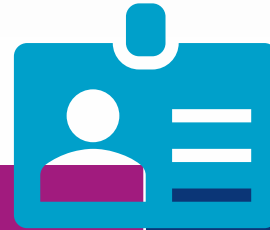
**Helpful tips:**

- Transportation staff **do not** participate in the RMTS

- Only costs associated with the employee's primary job function as a driver/mechanic are allowed

- Costs for transportation staff who *exclusively* drive/work with general education transportation are not allowable

# Transportation Other Costs

Districts may report transportation other costs for:

✓ Maintenance and repairs

✓ Insurance

✓ Fuel and Oil

✓ Lease/Rentals

✓ Contracted transportation services

✓ Contracted transportation equipment costs

**Helpful tips:**

**Does it make the bus run?**

- Examples of **non-allowable** other costs include:

  - CPR training for drivers
  - Driver's uniforms
  - Drug testing for drivers
  - Radios
  - General office supplies for the transportation department

# Transportation Equipment Depreciation

Districts/BOCES may report transportation equipment depreciation costs for:

✓ Buses

✓ Vehicles that transport students

✓ Wheelchair lifts

✓ Vehicle air conditioning

Vehicles must be physically modified and must transport students to/from school in order to receive a Medicaid allowable service

**Helpful Tips:**

- Depreciation is automatically calculated in the PCG Claiming System according to a straight-line depreciation method:

$$X = (\text{Cost} - \text{Federal Funds}) \div \text{Years of Useful Life}$$

- Transportation equipment should be assigned the appropriate transportation category and be supported by documentation before reporting

# One-Way Trip Ratio

The One-Way Trip Ratio apportions costs to the **population of students eligible for reimbursement**

✓ The numerator is initially pre-populated by PCG with the prior year's data

✓ The denominator is populated by the district

✓ Bus logs must be kept to support the trip ratio

✓ The One-Way Trip Ratio is applied to ALL transportation costs

Documentation is **KEY**

✓ Bus logs and a tracking mechanism (i.e., financial reports) must be kept to support transportation costs

Total number of one-way trips for **Medicaid eligible students** requiring **specialized transportation** and **a reimbursable service** that day per their IEP

Total number of one-way trips for **ALL students receiving specialized transportation** services per their IEP
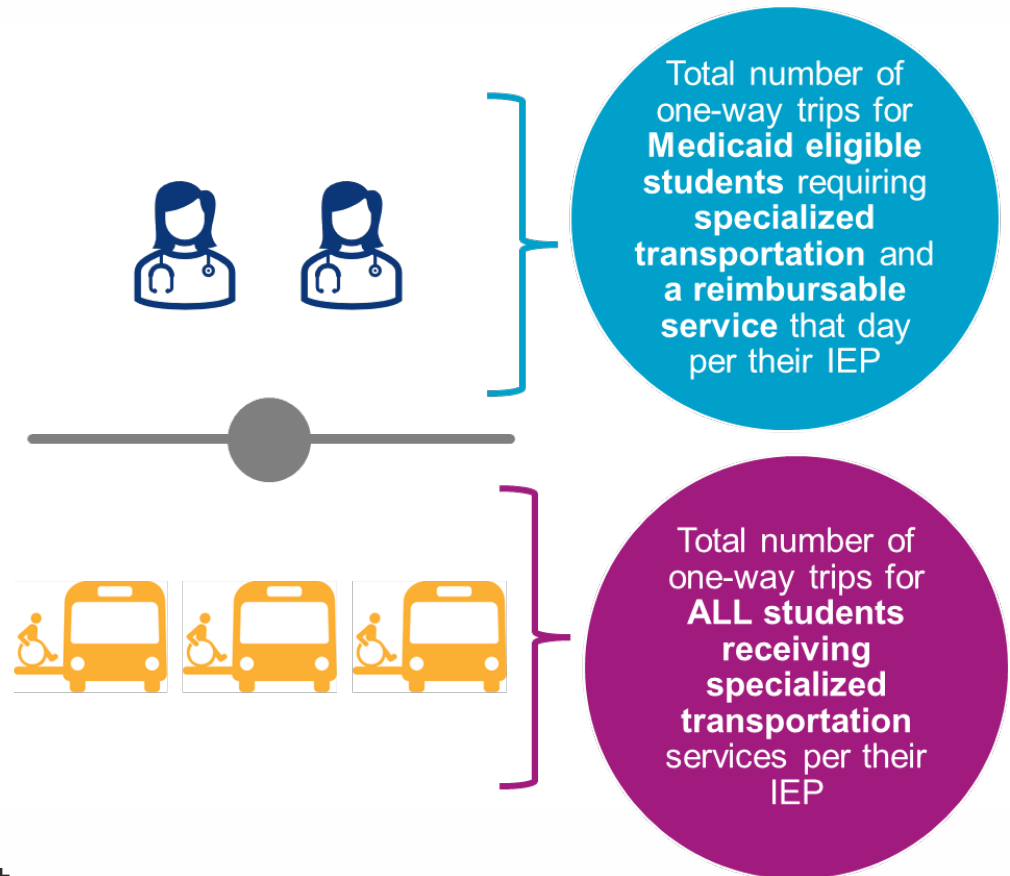
# Transportation Services IEP Students Ratio

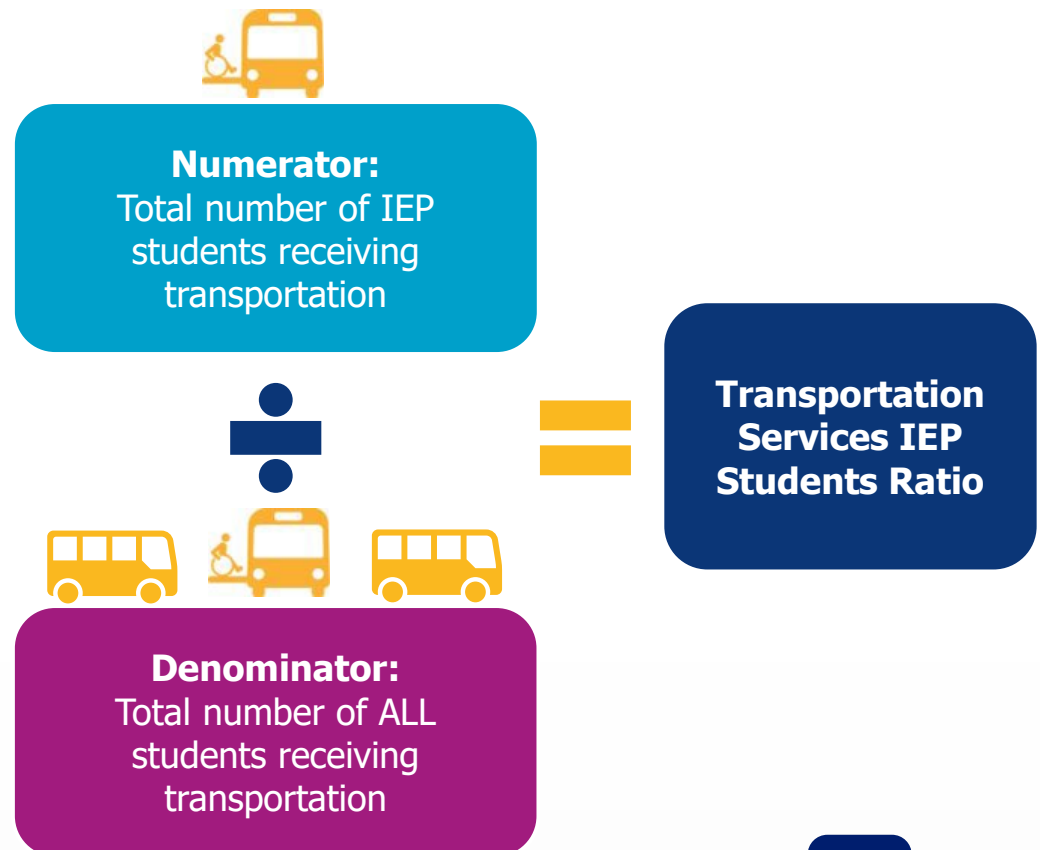The Transportation Services IEP Students Ratio allocates costs reported in the not only specialized transportation category to the portion of transportation costs associated with specialized transportation costs

✓ Numerator and denominator are both reported by the district

✓ This ratio is only applicable if your district is unable to isolate costs to the portion that is *EXCLUSIVE* to the transport of special education students

✓ This count can be taken on a snapshot date or a rolling total throughout the year

**Numerator:**
Total number of IEP students receiving transportation

÷

**Denominator:**
Total number of ALL students receiving transportation

=

**Transportation Services IEP Students Ratio**

# Factors of Reimbursement

**IEP* Direct Service Calculation**

**Cost Base**

| Net reported salaries, benefits, contracted and direct medical other costs | **+** | Add Unrestricted Indirect Costs | **×** | RMTS IEP direct medical percentage | **×** | IEP Ratio | **=** | Direct medical allowable costs |
|---|---|---|---|---|---|---|---|---|

Add transportation allowable costs here if applicable

**Free Care Direct Service Calculation**

| RMTS Free Care direct medical percentage | **×** | MER** | **=** | Free Care allowable costs |
|---|---|---|---|---|

**+** **=** Medicaid allowable costs = CPE
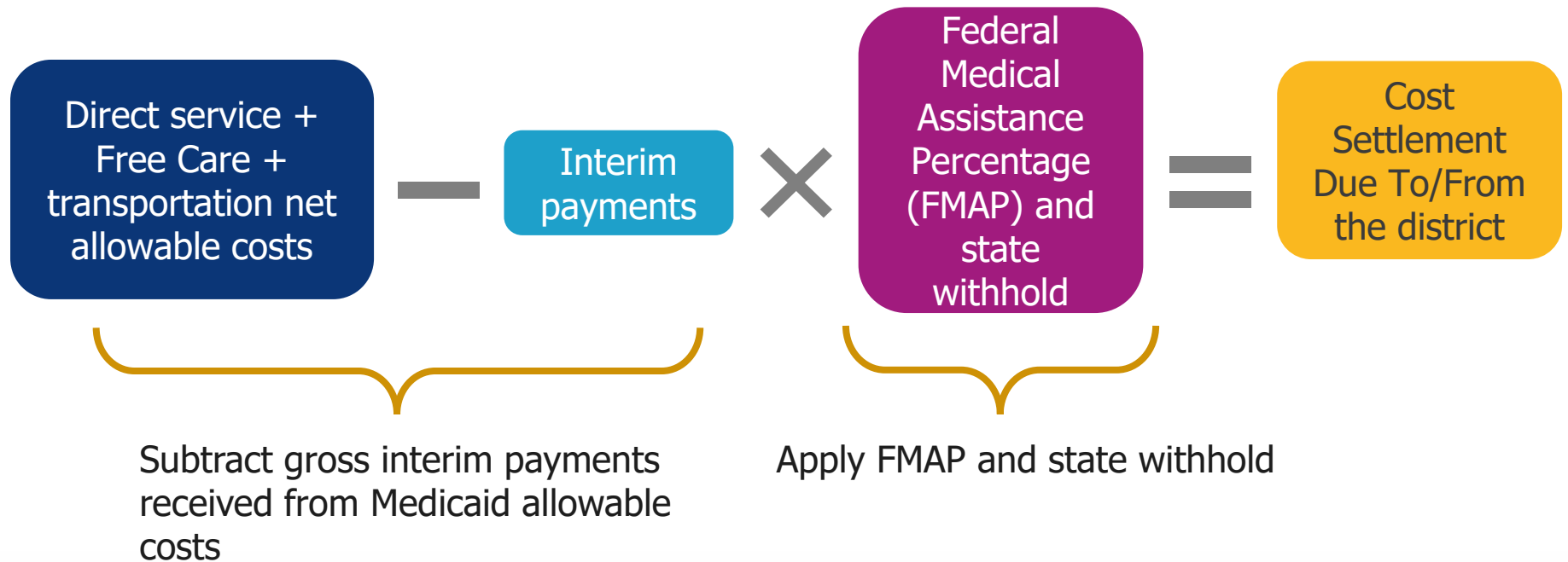
*Individualized Education Plan (IEP)
**Medicaid Enrollment Rate (MER)

# Factors of Reimbursement Continued

Annual Cost Settlement Methodology

Direct service + Free Care + transportation net allowable costs **−** Interim payments **×** Federal Medical Assistance Percentage (FMAP) and state withhold **=** Cost Settlement Due To/From the district

Subtract gross interim payments received from Medicaid allowable costs

Apply FMAP and state withhold

# Safeguards To Reduce District Recoupment

HCPF and PCG have developed safeguards in order to reduce the chance of a district falling into a recoupment

**Desk Reviews**
- Each district will undergo a desk review after certifying the annual cost report
- Desk reviews help to reduce reporting errors on the annual cost report

**Mid-Year Rate Review**
- Compares current interim payment amounts to recent direct service SPLs and the direct service costs of the most recent JS and OD MAC reports
- Recommends lowering payments if total interim payments are projected to exceed projected total allowable costs

**Interim Rate Setting**
- Calculated prior to the start of the FY by HCPF and PCG
- Calculated according to a district's Medicaid Allowable Costs for the prior three FY's
- Only 90%, 80%, or 70% of a district's Medicaid Allowable Costs are included in the calculation

# Overlapping Program Components

Multiple program functions and responsibilities overlap during the year associated with several different quarters as well as FYs

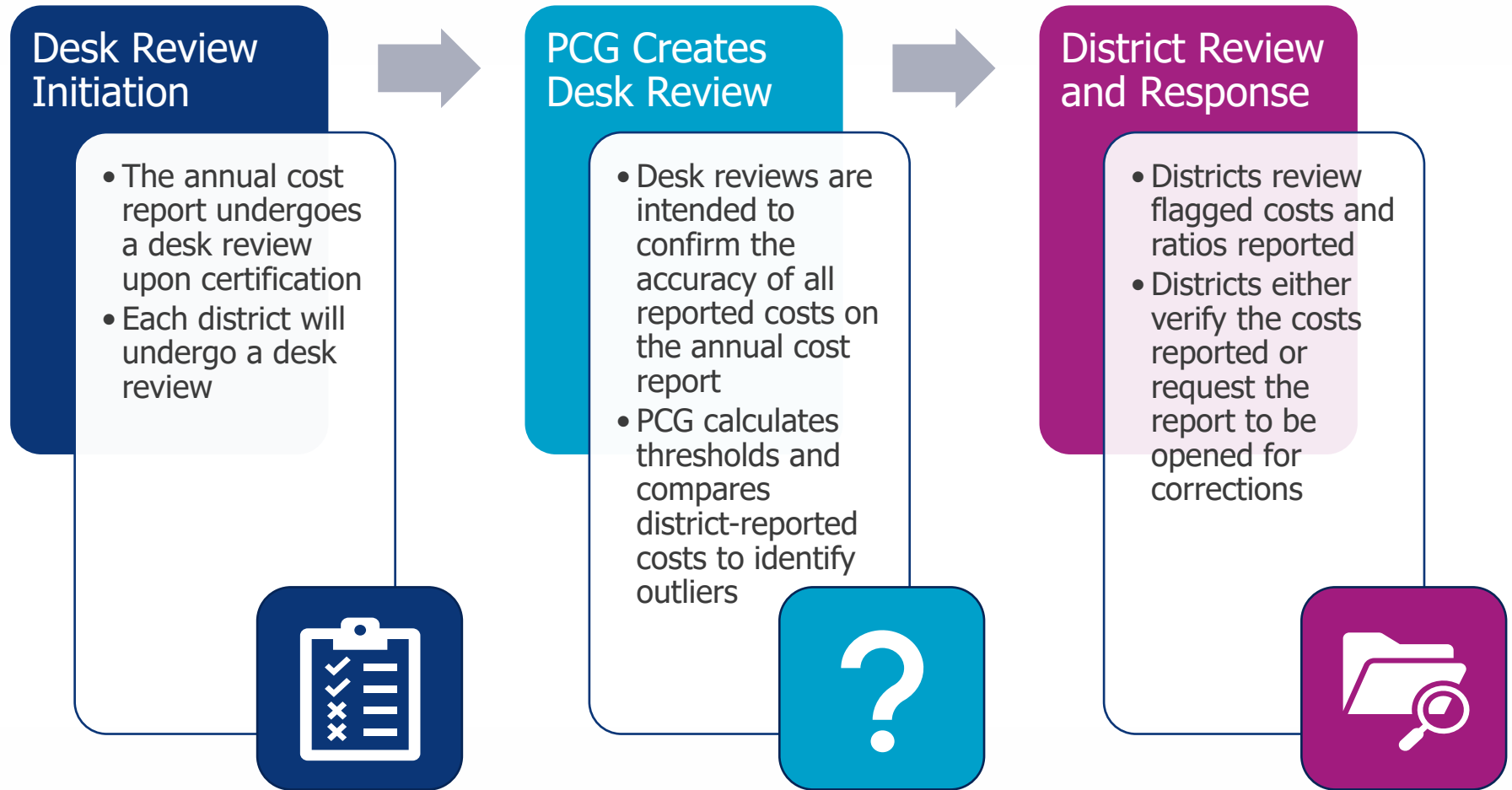| JS23 | OD23 | JM24 | AJ24 |
|---|---|---|---|
| • Report AJ23 quarterly costs<br>• Report FY 2022-23 annual costs<br>• Certify OD23 SPL and calendar<br>• Receive FY 2023-24 interim payments | • Complete FY 2022-23 desk review<br>• Participate in FY 2022-23 comprehensive review<br>• Participate in OD23 RMTS<br>• Report JS23 quarterly costs<br>• Certify JM24 SPL and calendar<br>• Receive FY 2023-24 interim payments | • Participate in FY 2022-23 comprehensive review<br>• Receive FY 2023-24 interim payments<br>• Participate in JM24 RMTS<br>• Report OD23 quarterly costs<br>• Certify AJ24 SPL & calendar | • FY 2022-23 cost settlement determination<br>• Participate in AJ24 RMTS<br>• Report JM24 quarterly costs<br>• Receive FY 2023-24 interim payments<br>• Establish FY 2024-25 interim payments |

**You are here**

# Annual Cost Reporting Activity

# Annual Cost Report Desk Review

# Desk Review Process

## Desk Review Initiation

- The annual cost report undergoes a desk review upon certification
- Each district will undergo a desk review

## PCG Creates Desk Review

- Desk reviews are intended to confirm the accuracy of all reported costs on the annual cost report
- PCG calculates thresholds and compares district-reported costs to identify outliers

## District Review and Response

- Districts review flagged costs and ratios reported
- Districts either verify the costs reported or request the report to be opened for corrections

# Desk Review Recap

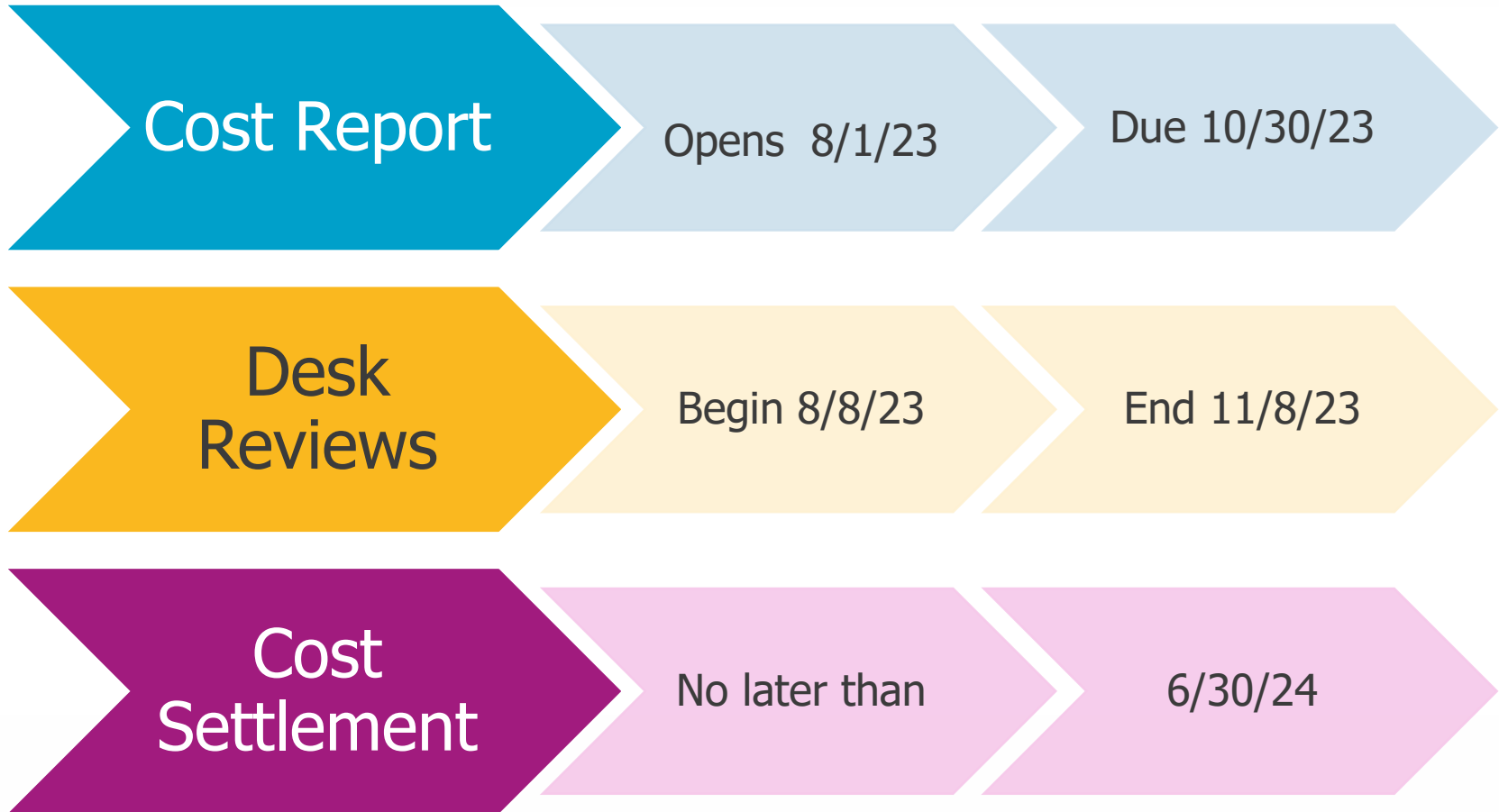PCG reviews district specific thresholds each year

- System calculated thresholds will be increasing for FY 2022-23

| Edit | FY 2020-21 | FY 2021-22 | Difference |
|------|-----------:|-----------:|-----------:|
| Benefits With Zero Salary | 33 | 7 | -26 |
| Contracted Costs Threshold | 20 | 26 | 6 |
| Salary Threshold | 1,549 | 1,542 | -7 |
| Salary With Zero Benefits | 8 | 2 | -6 |
| Transportation Staff Benefits With Zero Salary | 1 | 2 | 1 |
| Transportation Staff Salary Threshold | 190 | 660 | 470 |
| Year To Year Transportation All Other Costs | 20 | 26 | 6 |
| Year To Year Trans Other Costs | 81 | 77 | -4 |
| Year To Year Trans Staff Payroll | 19 | 19 | 0 |

# Important Dates – FY 2023-24

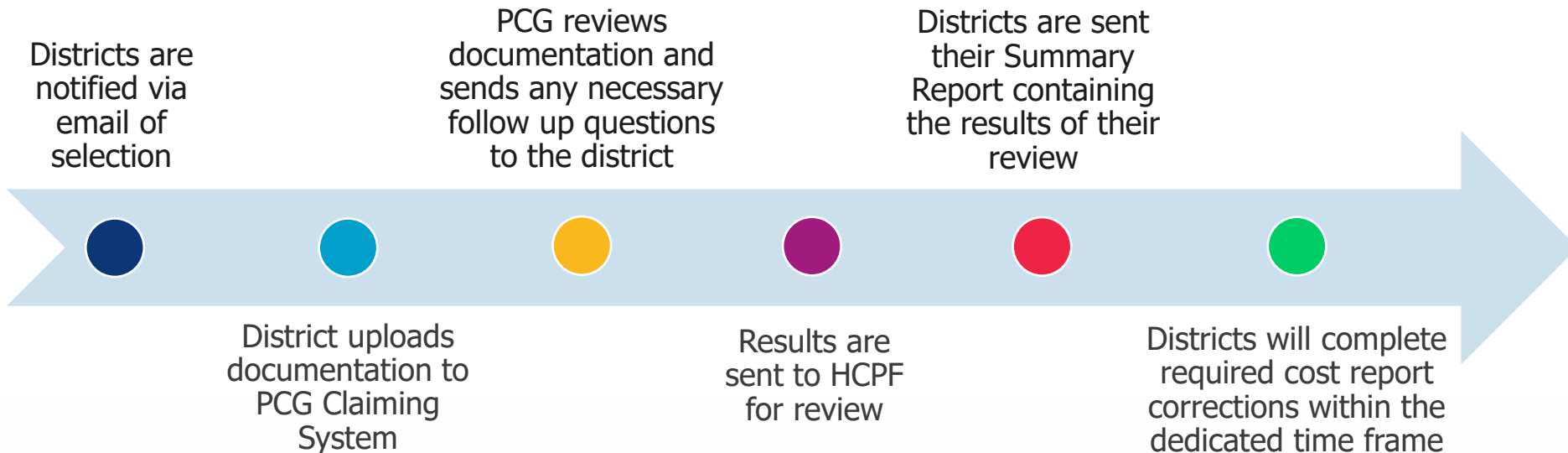| Cost Report | Opens 8/1/23 | Due 10/30/23 |
| Desk Reviews | Begin 8/8/23 | End 11/8/23 |
| Cost Settlement | No later than | 6/30/24 |

# Program Compliance

# Comprehensive Review Timeline

PCG conducts a formal comprehensive review on selected districts upon completion of desk reviews each year

- Districts will have 20 calendar days from the date on the notification email to upload the required documentation
- CDE will reach out to selected districts for parental consent forms

Districts are notified via email of selection

PCG reviews documentation and sends any necessary follow up questions to the district

Districts are sent their Summary Report containing the results of their review

District uploads documentation to PCG Claiming System

Results are sent to HCPF for review

Districts will complete required cost report corrections within the dedicated time frame

# Comprehensive Review Overview

The Comprehensive Review examines all areas of the SHS Program

- As a result of the Comprehensive Review, additional steps and/or training may be required

| | |
|---|---|
| **Payroll Costs** | Payroll reports to support salaries, benefits, and contracted costs reported for staff on SPL by pay period or work dates |
| **Other Costs** | Invoices/receipts and pay history to support all transportation and direct medical or administrative other costs reported |
| **Service logs** | Service and/or trip logs to support delivery of reimbursable services |
| **IEPs and/or other medical plans of care** | Prescription by qualified provider of medical necessity and recommendation of scope, frequency, and duration of service provision |
| **Licensure** | Certification and/or licensure to cover rendering and prescribing provider for date of service |
| **General and Statistical Data** | Reports or other documentation to support any reported data used to allocate costs |

# Documentation Reminders

| Category | Requirements |
|---|---|
| Payroll Costs | • Fund/account codes<br>• Cash-basis (pay dates) for MAC and accrual-basis (dates of service) for annual<br>• Salary and benefits broken out separately |
| Other Costs | • Fund/account codes<br>• Name of the item<br>• Purchase price |
| IEPs/Other Plans of Care | • Covers selected dates of services<br>• Valid for the time period being reviewed |
| Provider Licensure | • Review licensure dates prior to placing an individual on the SPL<br>• Pay attention to licensure when adding staff to the SPL and select the correct job category according to credentials |
| Transportation Costs | • Fund/account codes<br>• Break out all costs by category<br>• Use system-generated reports |

# Final Performance Standard Scores

Each standard is graded as either a Pass/Fail

- For example, if one of the sampled individual's payroll documentation does not match costs reported in the PCG Claiming System it would be marked as a "Fail"

The overall score and resulting next steps for each district will be based on the costs reported

**Performance Standards:**

## 12
### If transportation costs are reported

## 8
### If no transportation costs are reported

# FY 2022-23 Comprehensive Review Findings

There were 20 districts who participated in the comprehensive review in FY 2022-23

| Standard | Review Topic | Number of Districts with Findings | Percent of Districts with Findings |
|---|---|---|---|
| **1a** | **Annual Salaried and Contracted Costs** | 11 | 55% |
| 1b | Direct Medical Other Costs | 2 | 10% |
| 1c | Licensure | 2 | 10% |
| **1d** | **Transportation Payroll Costs** | 7 | 35% |
| 1e | Transportation Other Costs | 1 | 5% |
| 1f | Transportation Equipment Depreciation Costs | 0 | 0% |
| 1g | General and Statistical Information | 3 | 15% |
| 2a | Service logs | 2 | 10% |
| 2b | Attendance logs | 1 | 5% |
| 2c | IEPs and/or Other Plans of Care | 0 | 0% |
| **3** | **Quarterly Payroll/Salaried and Contract** | 9 | 45% |
| 4 | Documentation Due Date | 0 | 0% |

# Payroll Cost Reminders
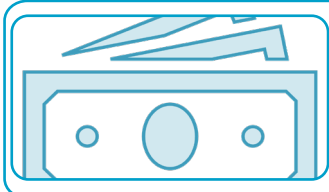
**Standard 1a** – Annual Salaried and Contracted Costs

**Standard 3** – Quarterly Payroll/Salaried and Contracted Costs

Annual

- Accrual accounting methodology (dates of service)

Quarterly

- Cash basis methodology (pay dates)

Only costs associated with services provided while on the SPL are allowable on your annual cost report

- Hover over the job span bar for exact dates eligible for annual/quarterly cost reporting

Salaries and benefits must be separated out on a system-generated payroll report/journal

- Documentation for formulas and percentages used to compute salaries and benefits must be provided

- Districts should use the 'Compensation Federal Revenues/Non-Allowable' field to report the portion of costs that were paid with federal funds or are non-allowable

# Program Compliance Training (PCT)

Districts that receive a "Fail" on **ANY** performance standard will be required to attend a Program Compliance Training (PCT)

- PCTs provide additional targeted training on the specific failed performance standard(s)

- It is required that the appropriate district staff attend the PCT and complete the completion form

**PCTs are valuable resources for all coordinators even outside Comprehensive Review findings!**

- PCTs are available to all district coordinators throughout the year
    - Only those required to attend a PCT need to complete the attendance form

| Scoring Category | Name of Training | Video Link |
|---|---|---|
| 1A – 1B | Annual Direct Medical Costs | Play Recording |
| 1C | Provider Licensure | Play Recording |
| 1D – 1G | Annual Transportation Costs | Play Recording |
| 2A – 2C | Billing and Service Documentation | Play Recording |
| 3 | Quarterly MAC Financials | Play Recording |

# Corrective Action Plan (CAP)

Districts who receive a score of 8/12 (5/8 if they do not report transportation) or lower will be issued a CAP

- Districts will receive formal notification of a CAP from HCPF

- The CAP will include a required PCT for each failed performance standard in addition to a district self-review that is submitted to HCPF

- It is up to the discretion of HCPF if districts may be selected again for another comprehensive review sooner

Achieve → Review → Plan → Act → Achieve

# Program Resources and Contacts

# Program Resources

School Health Services Program:
https://hcpf.colorado.gov/school-health-services

PCG Claiming System: claimingsystem.pcgus.com/co

- Free Care recorded Webinars
- Free Care FAQs
- User Guides
- Stakeholder information
- Program Manual
- Program Calendar

- Training schedule
- Newsletters
- Fact Page
- Annual training PowerPoint presentations
- Staff Pool List Decision Tree

# Contact Information

If you have any questions, please feel free to contact us!

**Department**

Olga Gintchin

Email: olga.gintchin@state.co.us

Phone: 303-866-4234

**CDE**

Omar Estrada

Email: Estrada_O@cde.state.co.us

Phone: 303-866-6455

**PCG**

Annual Help Desk

Email: cocostreport@pcgus.com

Phone: 866-317-0223

RMTS/MAC Help Desk

Email: cormts@pcgus.com

Phone: 866-766-9015

Public Consulting Group

Solutions that Matter

# Appendix

Acronyms

Comprehensive Review Scoring Rubric

# Acronyms A-E

| Acronym | Full Names |
|---------|------------|
| *AJ* | April-June |
| *BCBA* | Board Certified Behavior Analyst |
| *BOCES* | Board of Cooperative Educational Services |
| *CAP* | Corrective Action Plan |
| *CDE* | Colorado Department of Education |
| *CPE* | Certified Public Expenditure |
| *CMS* | Centers for Medicare and Medicaid Services |
| *DMP* | Direct Medical Percentage |
| *DS* | Direct Service |
| *EDU* | Education |
| *FFS* | Fee-for-Service |
| *FMAP* | Federal Medical Assistance Percentage |

# Acronyms F-O

| Acronym | Full Names |
|---------|-----------|
| *FTP* | File Transfer Protocol |
| *FY* | Fiscal Year |
| *HCPF* | Colorado Department of Health Care Policy & Financing |
| *HR* | Human Resources |
| *IEP* | Individualized Education Program |
| *JM* | January - March |
| *JS* | July - September |
| *LSP* | Local Services Plan |
| *MAC* | Medicaid Administrative Claiming |
| *MER* | Medicaid Enrollment Rate |
| *NAME* | National Alliance for Medicaid in Education |

# Acronyms P-U

| Acronym | Full Names |
|---------|------------|
| OD | October-December |
| PCG | Public Consulting Group |
| PCT | Program Compliance Training |
| PHE | Public Health Emergency |
| RMTS | Random Moment Time Study |
| RN | Registered Nurse |
| SHS | School Health Services |
| SPA | State Plan Amendment |
| SPL | Staff Pool List |
| UICR | Unrestricted Indirect Cost Rate |

# Comprehensive Review Scoring Rubric

| Scoring Category | Performance Standard Description | Required Documentation | Performance Rating |
|---|---|---|---|
| 1a | No variance in salaried and contracted documentation provided and annual cost report | Annual Salaried and Contracted Costs | Pass/Fail |
| 1b | No variance in direct medical other costs documentation provided and annual cost report | Direct Medical Costs | Pass/Fail |
| 1c | Licensure provided covers all time periods individual was listed on staff pool list and reported costs | Licensure | Pass/Fail |
| 1d | No variance in salaried documentation provided and annual cost report | Transportation Payroll Costs | Pass/Fail |
| 1e | No variance in transportation documentation provided and annual cost report | Transportation Other Costs | Pass/Fail |
| 1f | No variance in transportation documentation provided and annual cost report | Transportation Equipment Depreciation Costs | Pass/Fail |

# Scoring Rubric Continued

| Scoring Category | Performance Standard Description | Required Documentation | Performance Rating |
|---|---|---|---|
| 1g | Documentation provided supports one-way trip ratio denominator and transportation services IEP student's ratio | General and Statistical Information | Pass/Fail |
| 2a | Documentation provided support claims billed. This includes service logs | Service logs | Pass/Fail |
| 2b | Documentation provided support claims billed. This includes attendance logs | Attendance logs | Pass/Fail |
| 2c | Documentation provided support claims billed. This includes the IEP Ratio | IEP/Other Plans of Care | Pass/Fail |
| 3 | Contracted/salaried employee costs provided by the district show no variance in the claiming system cost report | Quarterly Direct Service & Admin. Payroll/Salaried and Contracted Costs | Pass/Fail |
| 4 | District met the timeline in which documentation was due | N/A | Pass/Fail |