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

Annual Training

August 2024

PUBLIC CONSULTING GROUP

Solutions that Matter

Agenda

- Ice Breaker

- Introduction

- Program Overview

- Random Moment Time Study (RMTS)

- Quarterly Medicaid Administrative Claiming (MAC) Financials & Claiming Procedures

- Annual Cost Reporting

- Program Compliance

- PCG Claiming System Enhancements

- Key Dates and Program Contacts

In Person Housekeeping

Cell Phones
- Place cell phones on silent

Participation
- Participate and ask questions

Business
- If you must take a call or respond to an email, please step out and return with full attention

Questions?

Please use the QR code or notecards located at your tables to submit your anonymous questions throughout today's presentation:

We look forward to discussing the answers to these questions throughout today's training session!

Interactive Mentimeter Instructions

1. Join at **menti.com** and use the access code: **4895 9247**

2. You should see a screen that displays the first question

3. You will have an opportunity to respond with the best answer

4. Your answer will be anonymous and there will be different types of question formats (multiple choice, ranking, open ended, word cloud)

5. Public Consulting Group (PCG) will refresh the Mentimeter to display all responses received and facilitate a discussion around the answers

Bingo Ice Breaker

School Health Services (SHS) Program Bingo

Find someone who...

Find people who match the items on your bingo card and mark off the squares as you meet them. Get five in a row to win!

Has sent a question to the PCG Help Desk	Wearing crocs	Certifies the annual cost report for their district	Reports financials using the Cash-Basis methodology	Has a pet
Can whistle	Is a new School-Based Medicaid program coordinator	Receives free care reimbursement	Has used a PCG Click-2-Learn resource	Reports federal funds
Has added additional users to the PCG Claiming System	Has been camping	**Free Space**	Trains staff on completing the Random Moment Time Study (RMTS)	Responds to desk reviews
A School-Based Medicaid program coordinator for 10+ years	Manages transportation costs reporting	Is left-handed	Had a comprehensive review within the last 3 years	Reports salaried or contracted staff cost data
Sets calendars and shifts in the PCG Claiming System	Has entered a vacancy on the Staff Pool List (SPL)	A School-Based Medicaid program coordinator for 5+ years	Completes the Staff Pool List (SPL)	Loves to read

Introduction

Acronyms A-F

Acronym	Full Names
AJ	April-June
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
FMAP	Federal Medical Assistance Percentage
FY	Fiscal Year

Acronyms G-P

Acronym	Full Names
HCPF	Colorado Department of Health Care Policy & Financing
IEP	Individualized Education Program
JM	January - March
JS	July - September
LSP	Local Services Plan
MAC	Medicaid Administrative Claiming
MER	Medicaid Enrollment Rate
OD	October-December
PCG	Public Consulting Group
PCT	Program Compliance Training

Acronyms R-Z

Acronym	Full Names
RMTS	Random Moment Time Study
RN	Registered Nurse
SHS	School Health Services
SPL	Staff Pool List
UICR	Unrestricted Indirect Cost Rate

SHS Program Overview

Organization Chart

US Department of Education

National Laws & Guidance

Centers for Medicare & Medicaid Services

National Laws & Guidance

Colorado Department of Education

Jointly Administers SHS Program

Colorado Department of Health Care Policy & Financing

Administers SHS Program

Districts/BOCES

Program Participants

Public Consulting Group

State Vendor

Billing Agent

Districts/BOCES Vendor

BOCES = Board of Cooperative Educational Services

Program Roles and Responsibilities

Colorado Department of Health Care Policy & Financing (HCPF)

- Enforce Centers for Medicare & Medicaid Services (CMS) guidelines
- Administer SHS Program
- 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
- Maintaining documentation as a part of program compliance

Program Overview

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

- Districts 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 CMS approved State Plan

Monthly Interim Payments

Annual Cost Settlement

Medicaid Administrative Claiming (MAC)

Direct Service & MAC Program Overview

Direct Service

Delivery of Direct Medical Services

- Reimbursement for performing Individualized Education Program (IEP)/ other medical plan of care direct medical services to Medicaid-enrolled students
- Direct Medical Services:
  - Counseling
  - Nursing Services
  - Occupational Therapy Services
  - Personal Care Services
  - Physical Therapy Services
  - Psychological Services
  - Social Work Services
  - Speech Language and Hearing Services
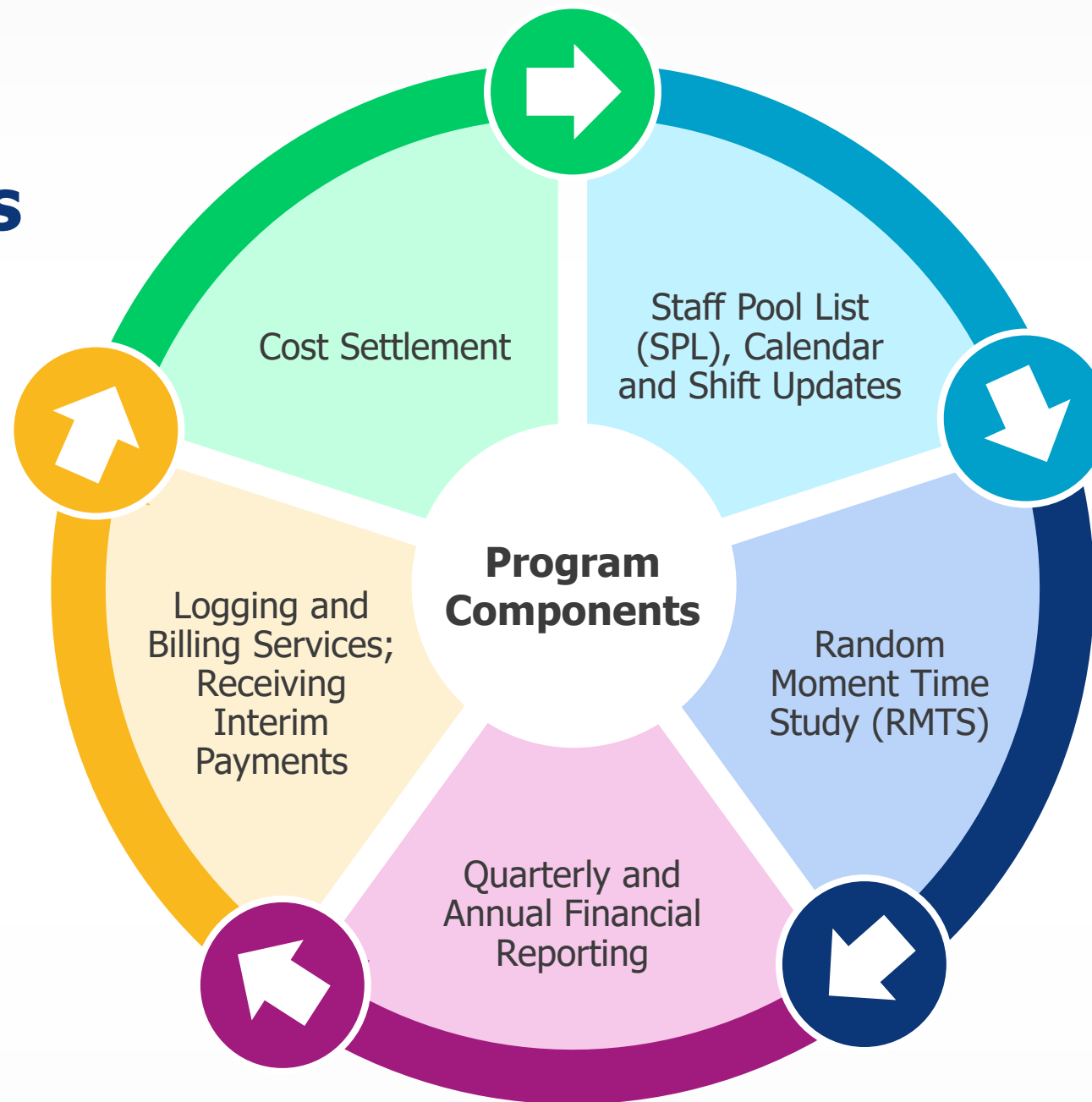 - Specialized Transportation

MAC
Medicaid Administrative Claiming

Activities that support the delivery of medical services

- Reimbursement for Medicaid allowable administrative activities
- Examples of Medicaid allowable administrative activities:
  - Attending medical/Medicaid-related training
  - Care coordination
  - Facilitating eligibility determinations
  - Medicaid outreach

Program Components

Program Components

- Staff Pool List (SPL), Calendar and Shift Updates
- Random Moment Time Study (RMTS)
- Quarterly and Annual Financial Reporting
- Logging and Billing Services; Receiving Interim Payments
- Cost Settlement

Random Moment Time Study (RMTS)

SPL Location System Feature Update

The location feature will no longer be available when creating or editing a Staff Pool List. This feature was implemented with the creation of the July – September (JS) 2024 quarter

Location: Demo LEA 1

The Location section will remain, but you will not be able to change it

Cost Pool: Cost Pool 1

Job Category: Speech Language Pathologist

Shift Type: SLP Contracted Provider

Job Position Id: 13290

Utilize this description field instead of Locations

Job Title:

Description:

Benefits and tips:

- The description field is free form text and can be used for any district need
- The description field can be updated at any time, so remember to update when vacating a position or making a direct replacement
- Descriptions can be exported from the system and updated through imports, not just one at a time

Purpose of Calendars/Shifts

Calendars

- ✓ Updating calendar days helps determine the working days and non-working days (i.e. holidays) to be considered for the RMTS
- ✓ Only holidays where both school staff and students are off should be included as non-working days
- ✓ Non-Working days (in red) signifies the specific days that random moments will not be issued

Shifts

- ✓ All Districts must have *at least one* shift (full-time shift) to match the contracted time for participants and should cover the largest window of work time
- ✓ Districts can create additional shifts for staff to allow for differences in schedules per school type, building, part time status, and/or any other pre-determined weekly schedule

Important Note: CMS encourages the use of district specific calendars and shifts. This practice helps collect the most accurate data by accounting for 100% of participants' time with the least amount of administrative burden to school districts.

Shifts

Create shifts using the 'Configuration' option on the green ribbon bar

Shifts cannot be added, removed or edited during a time study quarter. Why is this?

Monitor Time Study Moments

Coordinators provide training and/or information to staff about the program, their role in the program, and the importance of completing the sampled moments
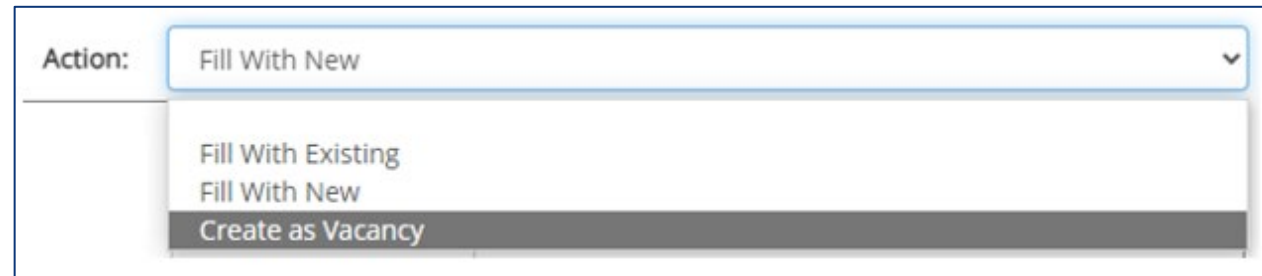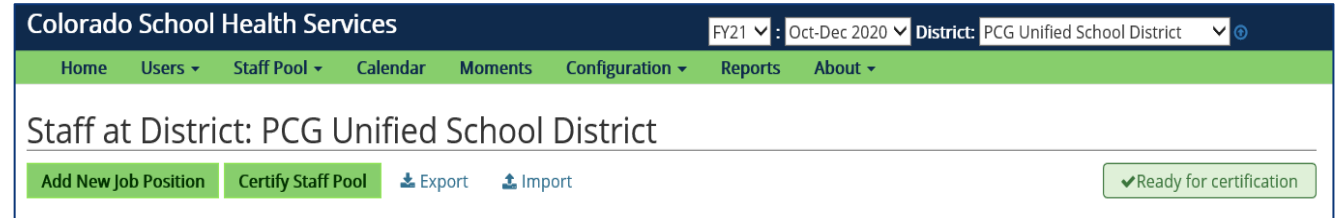
NOTE: PCG requires participants to read through program overview training screens prior to completing sampled moments

➢ Participants must respond to moments within 2 working days from the time/date of the moment. Failure to respond can impact overall Random Moment Time Study response and validity integrity

➢ Moments not completed are coded as 'No Response' and may negatively impact district compliance rate

➢ Failure to meet the 85% compliance can result in Corrective Action Plans and Program Compliance Trainings
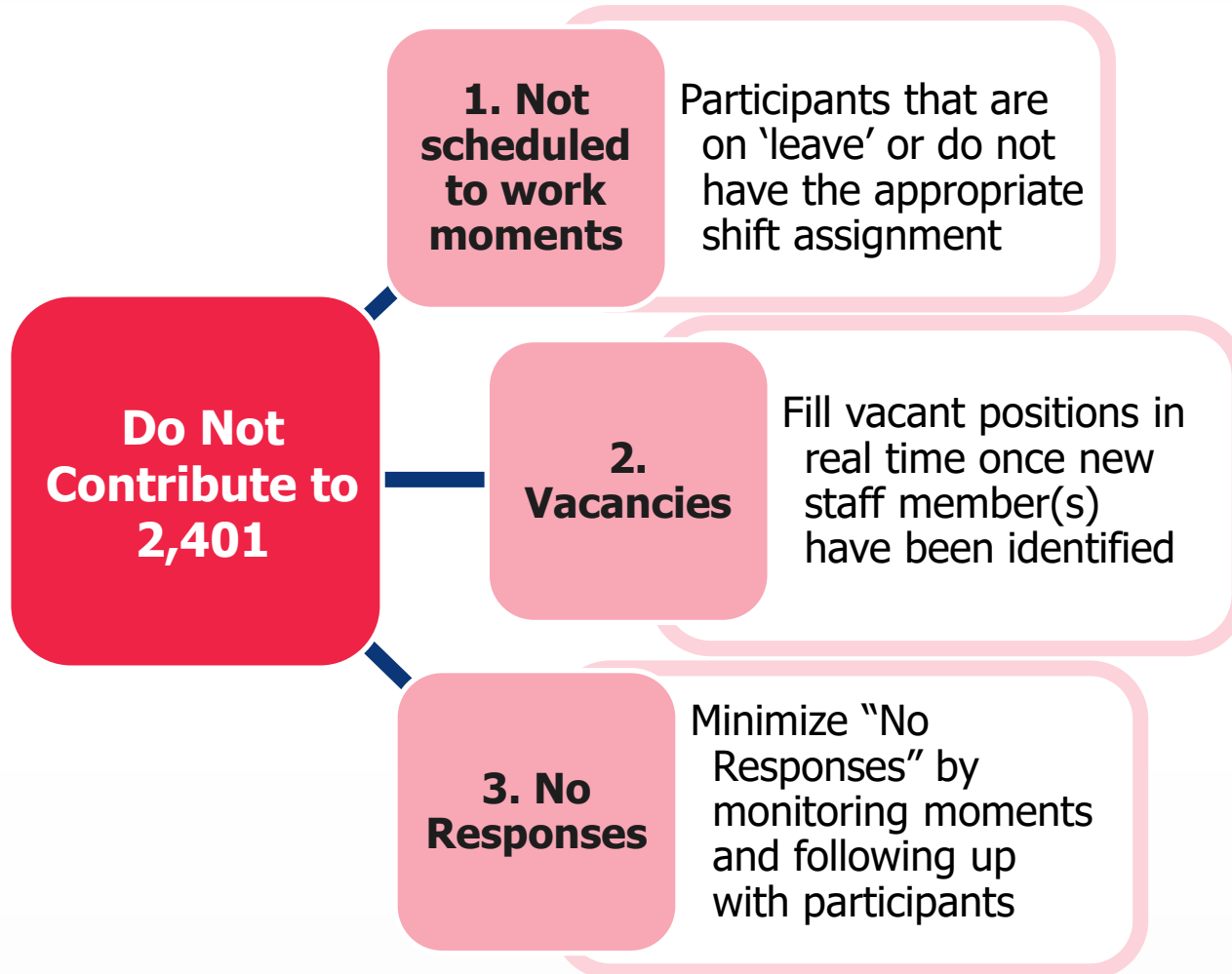
Creating and Certifying Vacancies

New vacancy actions can be used in October – December (OD) 2024. When the Staff Pool List is open for district updates, the following two actions can be executed by Coordinators:

1. Create – when adding a new position, vacancy is an option in the drop-down menu

2. SPL – when certifying your SPL, vacant positions can be included

Statistical Validity

Do Not Contribute to 2,401

1. Not scheduled to work moments — Participants that are on 'leave' or do not have the appropriate shift assignment

2. Vacancies — Fill vacant positions in real time once new staff member(s) have been identified

3. No Responses — Minimize "No Responses" by monitoring moments and following up with participants

The following types of moments contribute to the statistical valid count of **2,401** in each cost pool:

1. Survey moments with responses of activities during the hours they were **working** and,
2. Working activity responses within the 2-day response window

Which one of these three factors has a negative impact on compliance return rates?

Check for Understanding: RMTS

True or **False**?

Moments assigned to a vacant position do not affect a district's response rate.

TRUE Vacant positions that are assigned moments that do not get answered do not affect a district's response rate. However, it is important to remember positions that remain vacant do not contribute to the statistical validity requirement of 2,401 working moments per quarter.

Coordinators can update the SPL after the close of the quarter.

FALSE Once a quarter is over no changes can be made to the SPL or calendars. Changes can only be made during the SPL collection period (prior to the quarter open) and during the quarter.

**Shifts should be tailored to encompass the positions' earliest start time and latest end times and working days.**

TRUE Shifts should reflect the position's earliest start time and latest end time so the RMTS can accurately samples the person's working hours. If your shifts are tailored to the individuals schedule, non-working moments are less likely to occur and impact the results of the time study.

RMTS by the Numbers

Direct Medical and Free Care Direct Medical Percentages (DMP)

Statewide Direct Medical Percentages (DMPs) by Quarter
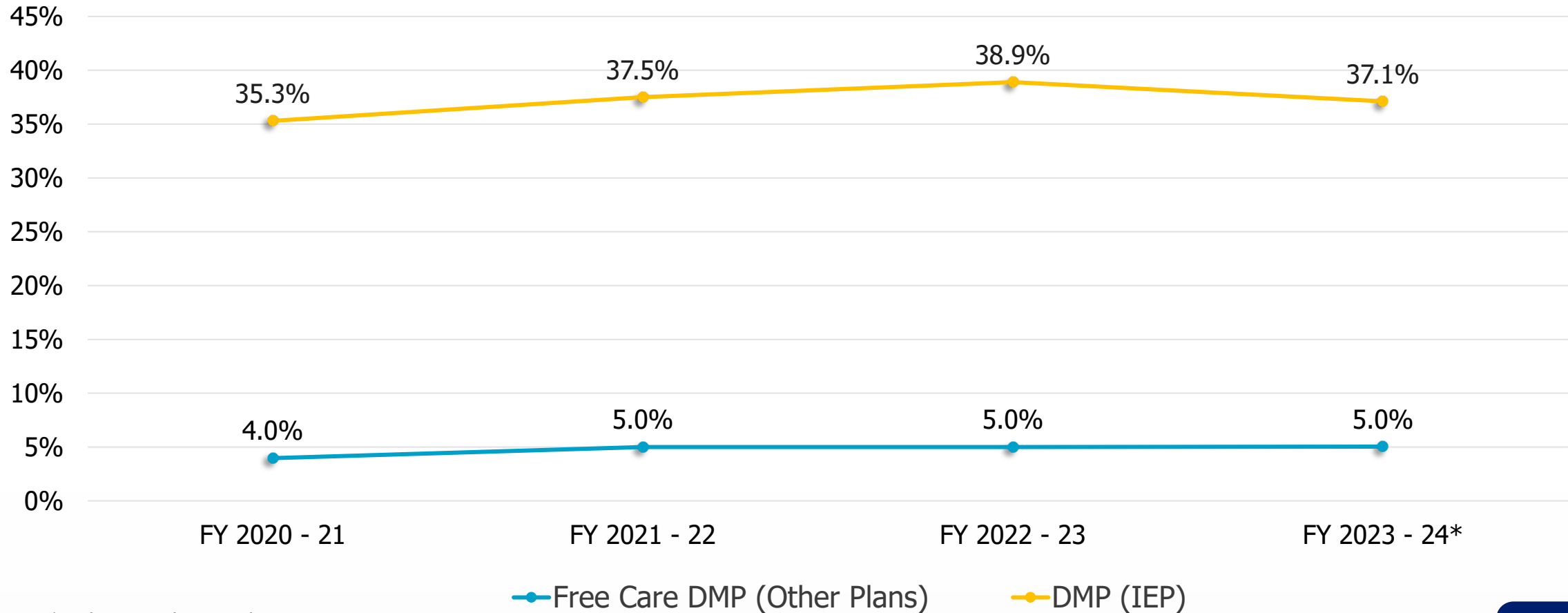
*preliminary data used

Medicaid Administrative Claiming Percentages

Statewide MAC Percentages by Cost Pool

Administrative Cost Pool values:
- OD20: 20.3%
- JM21: 19.1%
- AJ21: 17.1%
- OD21: 15.4%
- JM22: 14.2%
- AJ22: 16.8%
- OD22: 18.5%
- JM23: 16.3%
- AJ23: 15.9%
- OD23: 14.0%
- JM24: 12.2%
- AJ24*: 14.3%

Direct Service Cost Pool values:
- OD20: 2.9%
- JM21: 2.3%
- AJ21: 2.1%
- OD21: 2.5%
- JM22: 1.8%
- AJ22: 1.8%
- OD22: 2.6%
- JM23: 2.6%
- AJ23: 2.7%
- OD23: 2.7%
- JM24: 3.2%
- AJ24*: 2.2%
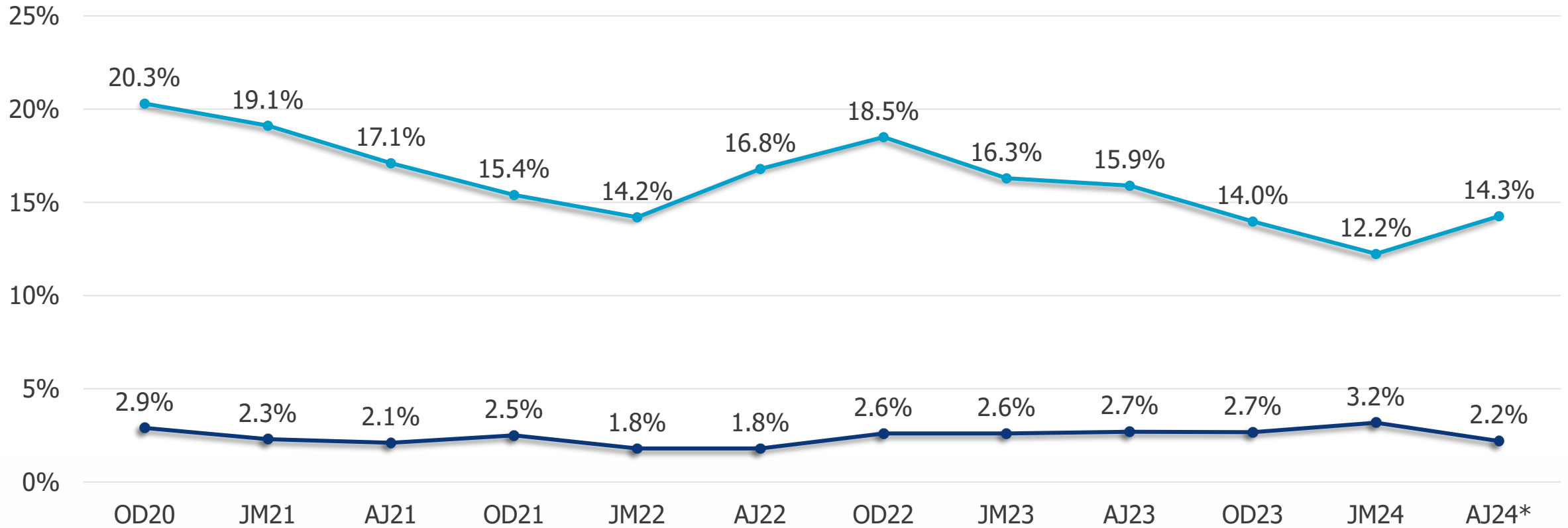
*preliminary data used

Legend: Direct Service Cost Pool — Administrative Cost Pool

FY 2023-24 Direct Service RMTS Results by Service Type

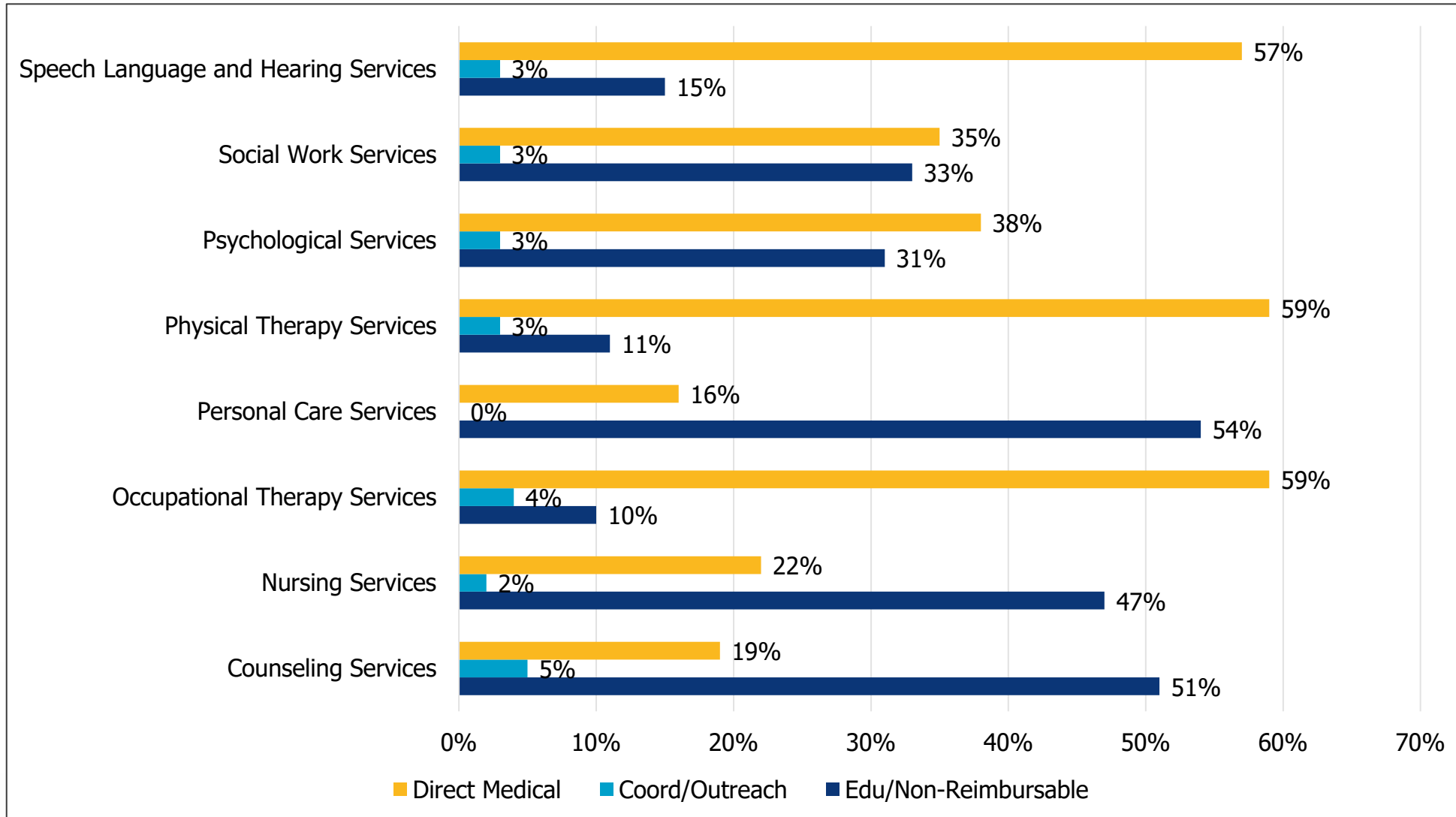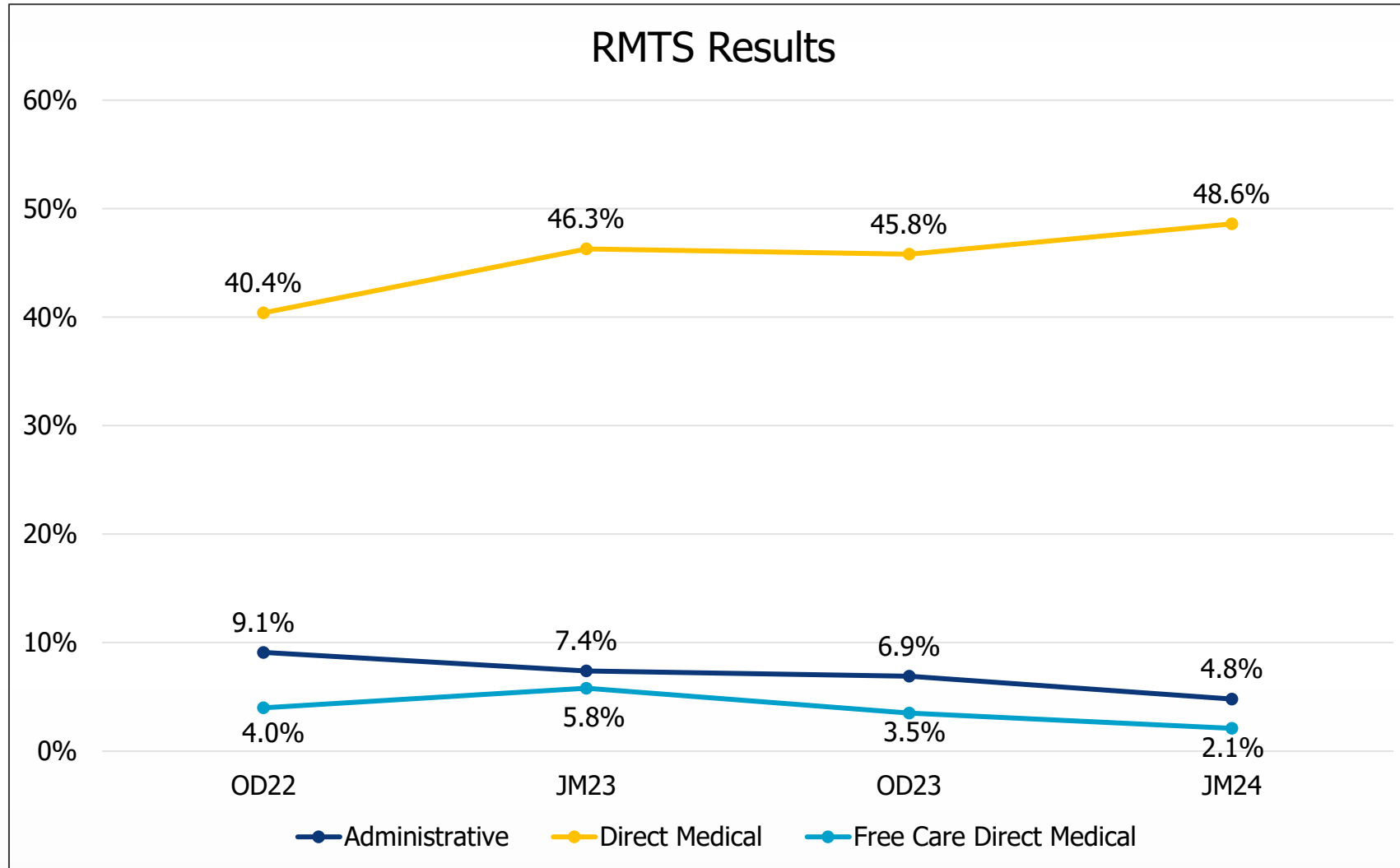**Job Categories with most Distributed Moments**

1. Health Tech, 36%
2. Personal Care Aide, 20%
3. Speech Pathologist, 12%
4. Nurse, 7%

Note: all time study results are preliminary

Chart data by service type:

Service Type	Direct Medical	Coord/Outreach	Edu/Non-Reimbursable
Speech Language and Hearing Services	57%	3%	15%
Social Work Services	35%	3%	33%
Psychological Services	38%	3%	31%
Physical Therapy Services	59%	3%	11%
Personal Care Services	16%	0%	54%
Occupational Therapy Services	59%	4%	10%
Nursing Services	22%	2%	47%
Counseling Services	19%	5%	51%

Legend: ■ Direct Medical   ■ Coord/Outreach   ■ Edu/Non-Reimbursable

School Psychologists

RMTS Results

	OD22	JM23	OD23	JM24
Direct Medical	40.4%	46.3%	45.8%	48.6%
Administrative	9.1%	7.4%	6.9%	4.8%
Free Care Direct Medical	4.0%	5.8%	3.5%	2.1%

Legend: Administrative — Direct Medical — Free Care Direct Medical

Direct Service (DS) Cost Pool percentage of Distributed Moments

Quarter:	Percent:
OD22	3.9%
JM23	4.9%
OD23	5.9%
JM24	5.7%

School Psychologists Count of Positions

Quarter:	Count:
OD22	396
JM23	550
OD23	665
JM24	685

Non-Licensed Psychologists – Admin Cost Pool Fiscal Year Comparison

Fiscal Year 2022-23

➤ Received 13% of all Admin Cost Pool Moments

➤ 262 Positions

➤ 26% of moment responses were Direct Medical

Fiscal Year 2023-24

➤ Received 8% of all Admin Cost Pool Moments

➤ 110 Positions

➤ 18% of moment responses were Direct Medical
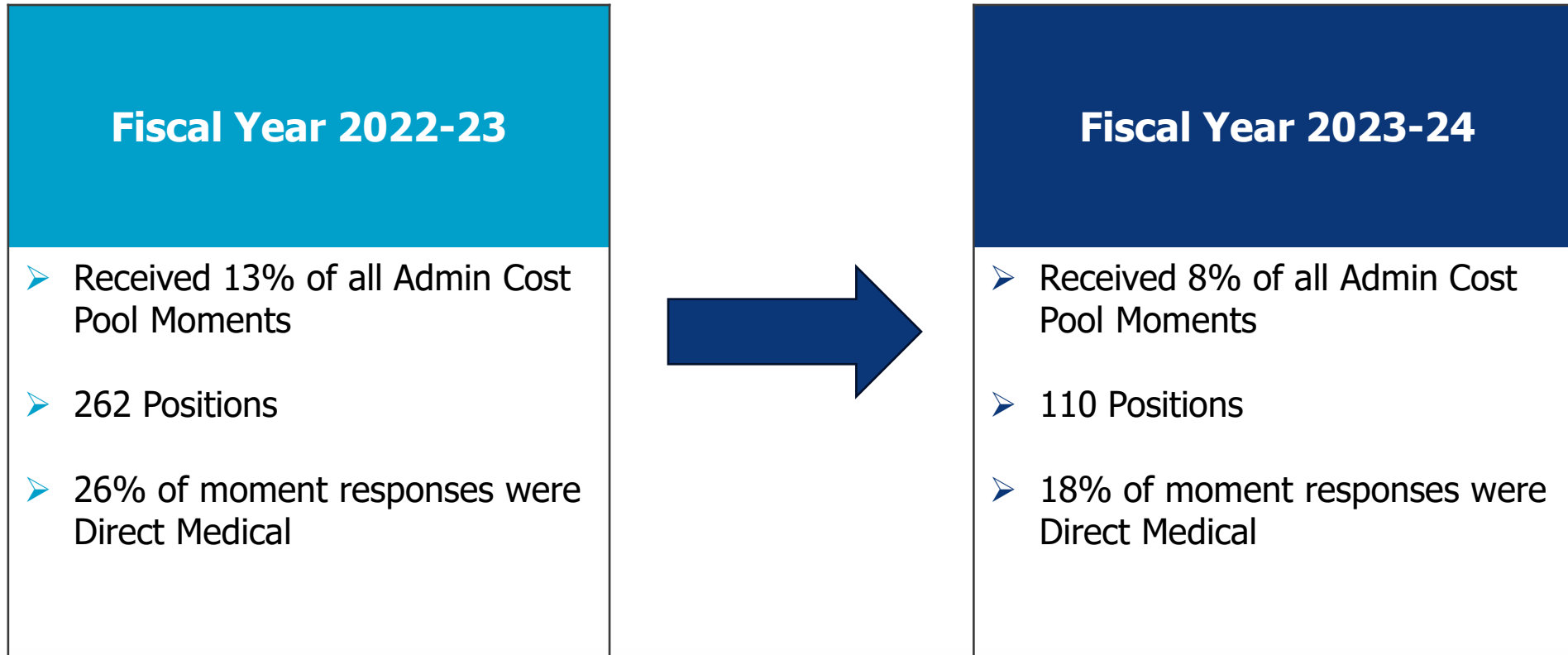
Removal of Non-Licensed Psychologist Position
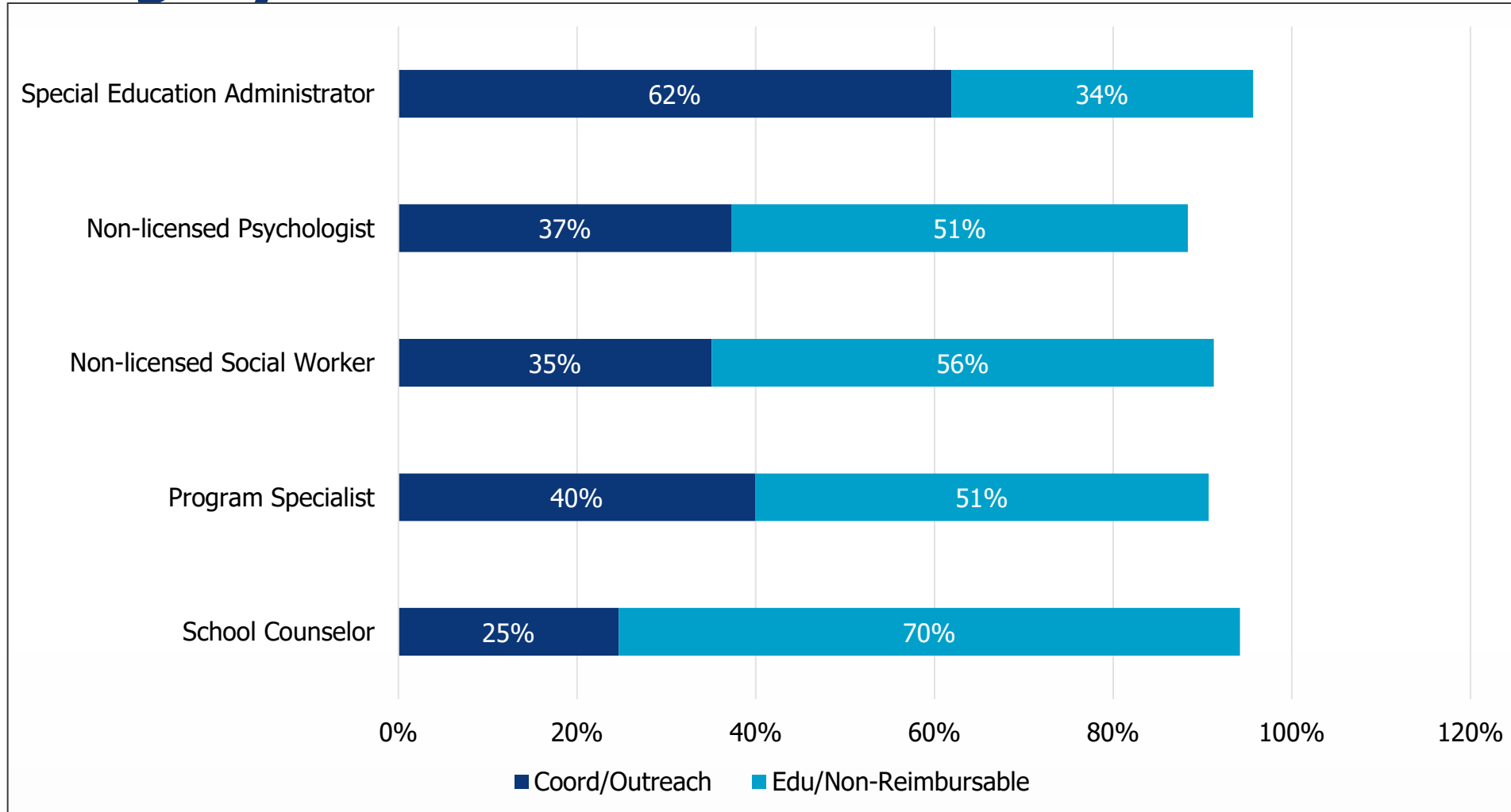
Consider the following questions when determining where to place current Non-Licensed Psychologists on your SPL:

1. Does the individual in this position have the licensure required to be on the Direct Service (DS) Cost Pool?

If Yes: Put them on the Direct Service Cost Pool in the corresponding Job Category

If No: Evaluate adding them on the Admin Cost Pool

2. Is this individual conducting Outreach and Coordination activities on a routine basis?

If Yes: Find a corresponding Job category in the Admin Cost Pool, Program Specialist can be used

If No: They should not appear on the SPL, re-evaluate if licensure or role changes

Important Note: The Non-Licensed Psychologist position will be removed from the SPL for the January – March 2025 quarter

FY 2023-24 Admin Cost Pool RMTS Results by Job Category

Special Education Administrator: Coord/Outreach 62%, Edu/Non-Reimbursable 34%
Non-licensed Psychologist: Coord/Outreach 37%, Edu/Non-Reimbursable 51%
Non-licensed Social Worker: Coord/Outreach 35%, Edu/Non-Reimbursable 56%
Program Specialist: Coord/Outreach 40%, Edu/Non-Reimbursable 51%
School Counselor: Coord/Outreach 25%, Edu/Non-Reimbursable 70%

Legend: ■ Coord/Outreach ■ Edu/Non-Reimbursable

Admin Cost Pool percentage of Distributed Moments

1. School Counselor, 24%
2. Program Specialist, 23%
3. Non-licensed SW, 18%
4. Non-licensed Psych, 8%
5. Special Ed Admin, 7%

Note: all time study results used are preliminary

Staff Pool List Activity

Direct Replacement Activity #1

It is May 20, 2024. Cobbler School District #10 has hired a new nurse, effective May 16, 2024. Can the district add the nurse to the Staff Pool List?

Name	Cost Pool	Job Category
(vacancy)	Direct Service	Occupational Therapist
(vacancy)	Direct Service	Nurse, Registered Nurse (RN)
(vacancy)	Admin	Program Specialist
Andrews, Archie	Admin	Special Education Administrator
Gilmore, Rory	Admin	School Counselor
Kim, Janet	Direct Service	Personal Care Aide
Swanson, Ron	Direct Service	Nurse, RN

Answer: Yes!

1. The change occurs during the quarter
2. There is a suitable vacancy on the Staff Pool List

Direct Replacement Activity #2

When certifying your Staff Pool List for the October – December quarter your district added a vacancy for an Occupational Therapist you expected to hire in October. It is now October 17, 2024 and your district has not yet been able to fill the position with a salaried individual. As a result, your district has decided that they will contract an individual for this position. Can you put this contracted individual in that vacant position you created on your Staff Pool List?

Name	Cost Pool	Job Category
(vacancy)	Direct Service	Occupational Therapist
(vacancy)	Direct Service	Nurse, RN
(vacancy)	Admin	Program Specialist
Andrews, Archie	Admin	Special Education Administrator
Kim, Janet	Direct Service	Personal Care Aide
Swanson, Ron	Direct Service	Nurse, RN

Answer: Yes!

Selecting Salaried or Contracted is simply a way to make it easier to track your individuals. This can be corrected on the next open Staff Pool List

Direct Replacement Activity #3

It is April 7, 2024 and Mountain Peak School District #10 has hired a new Occupational Therapist Assistant, effective April 17, 2024. Can the district add the Occupational Therapist Assistant to the Staff Pool List?

Name	Cost Pool	Job Category
(vacancy)	Direct Service	Occupational Therapist
(vacancy)	Direct Service	Nurse, RN
(vacancy)	Admin	Program Specialist
Andrews, Archie	Admin	Special Education Administrator
Gilmore, Rory	Admin	School Counselor
Kim, Janet	Direct Service	Personal Care Aide
Swanson, Ron	Direct Service	Nurse, RN

Answer: No!

1. There are not any suitable vacant positions for this individual.

Direct Replacement Activity #4

Mountain Peak School District #10 has hired a new Mental Health Advocate. This individual splits their time between the school wellness center, assisting families, and coordinating services for students.

Name	Cost Pool	Job Category
(vacancy)	Direct Service	Occupational Therapist
(vacancy)	Direct Service	Nurse, RN
(vacancy)	Admin	Program Specialist
Andrews, Archie	Admin	Special Education Administrator
Gilmore, Rory	Admin	School Counselor
Kim, Janet	Direct Service	Personal Care Aide
Swanson, Ron	Direct Service	Nurse, RN

Additional Questions:

1. Would your district add this Mental Health Advocate to the Staff Pool List?
2. What are some considerations you would make before coming to your decision?

Vacancies Activity

Oct-Dec 2024 Vacancy Activity #1

Your district is looking to add a vacant Administrator position. This administrator would be responsible for assisting front office staff in general education matters. There has been a candidate selected who has an anticipated start date of October 7th.

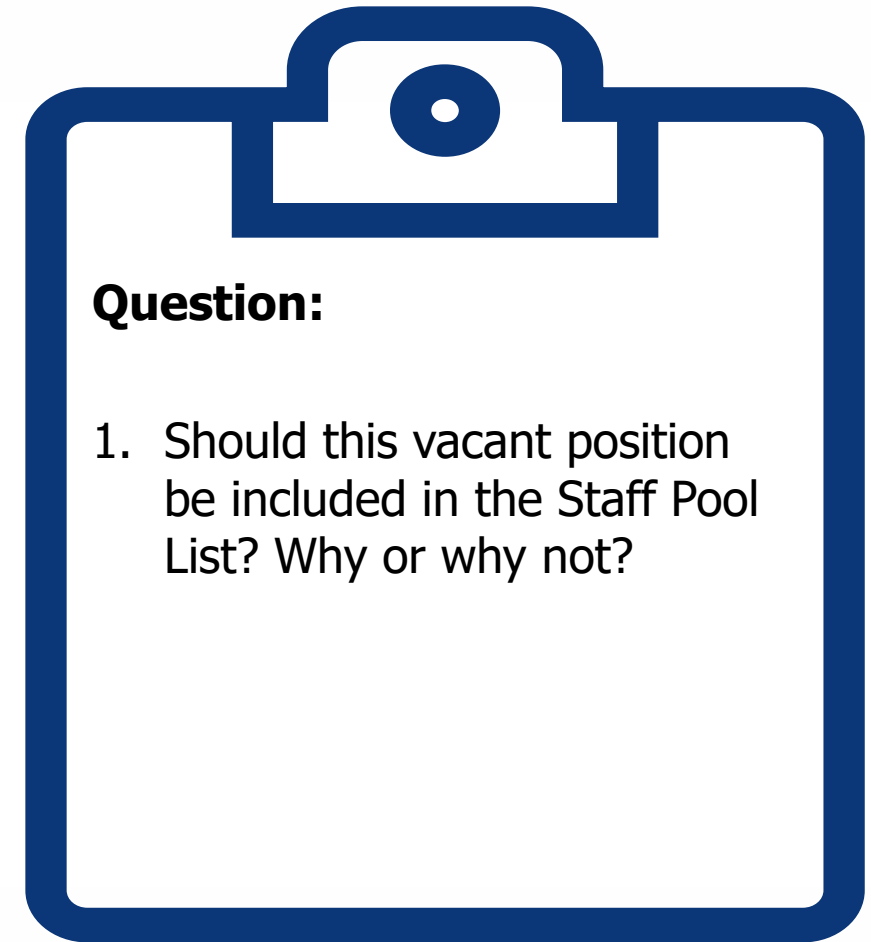| Name	TBD
Email	TBD
Employment Type	Salaried Staff
Job Title	Administrator
Job Category	Administrator
Cost Pool	Admin
Shift	Full Time
Salary/Benefits Costs	Salary: $45,432 Benefits: $11,445
Federal Funds	30%

Question:

1. Should this vacant position be included in the Staff Pool List? Why or why not?
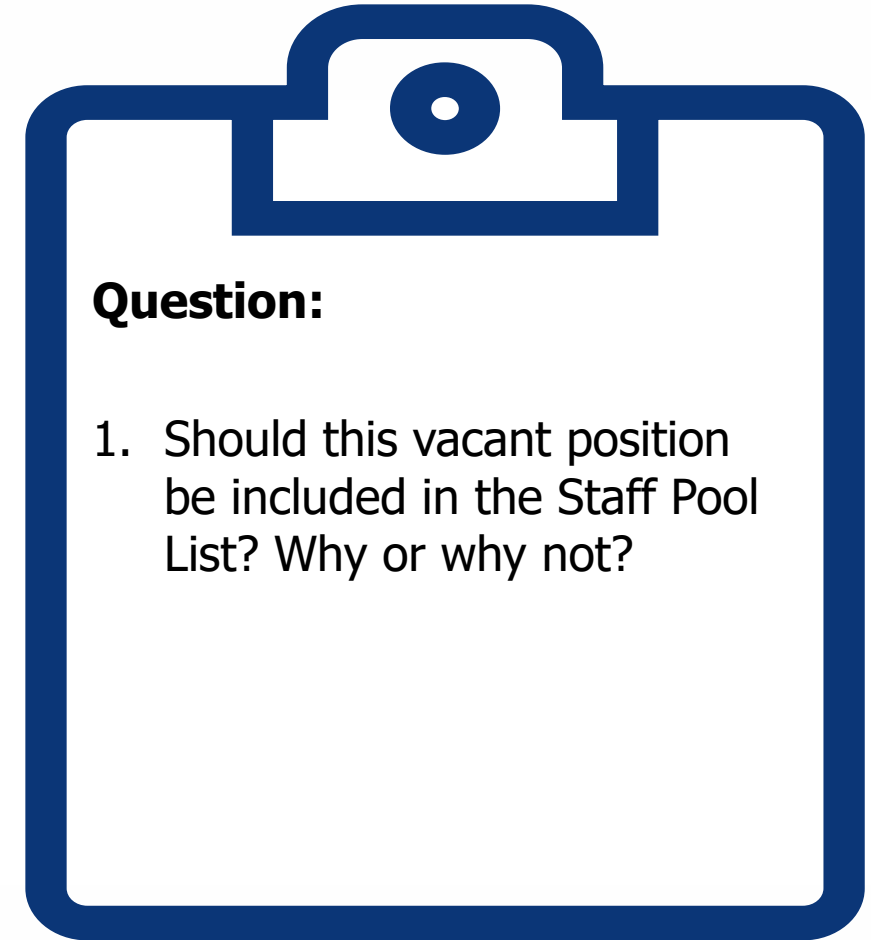
Oct-Dec 2024 Vacancy Activity #2

Your district is looking to create a vacant Occupational Therapist position. The hiring process is expected to conclude soon, with the new hire starting on October 24th.

Name	TBD
Email	TBD
Employment Type	Salaried Staff
Job Title	Occupational Therapist
Job Category	Occupational Therapist
Cost Pool	Direct Service
Shift	Full Time
Salary/Benefits Costs	Salary: $45,297 Benefits: $10,283
Federal Funds	0%

Question:

1. Should this vacant position be included in the Staff Pool List? Why or why not?

Oct-Dec 2024 Vacancy Activity #3

Your district is looking to add a vacant Nurse position. Your district is actively searching for an individual to fill this position. No start date has been confirmed, but it is expected to be within October.

Name	TBD
Email	TBD
Employment Type	Salaried Staff
Job Title	RN
Job Category	Nurse, RN
Shift	Mon – Fri 8:30 – 3:30
Salary/Benefits Costs	Salary: Unknown Benefits: Unknown
Federal Funds	Unknown

Question:

1. Should this vacant position be included in the Staff Pool List? Why or why not?

Oct-Dec 2024 Vacancy Activity #4

Your district is looking to add a vacant Physical Therapist position. You have heard your district might begin searching for this position in November. No start date has been confirmed for this position.

Name	TBD
Email	TBD
Employment Type	Salaried Staff
Job Title	Physical Therapist
Job Category	Physical Therapist
Shift	Full time
Salary/Benefits Costs	Salary: $42,704 Benefits: $12,375
Federal Funds	0%

Question:

1. Should this vacant position be included in the Staff Pool List? Why or why not?
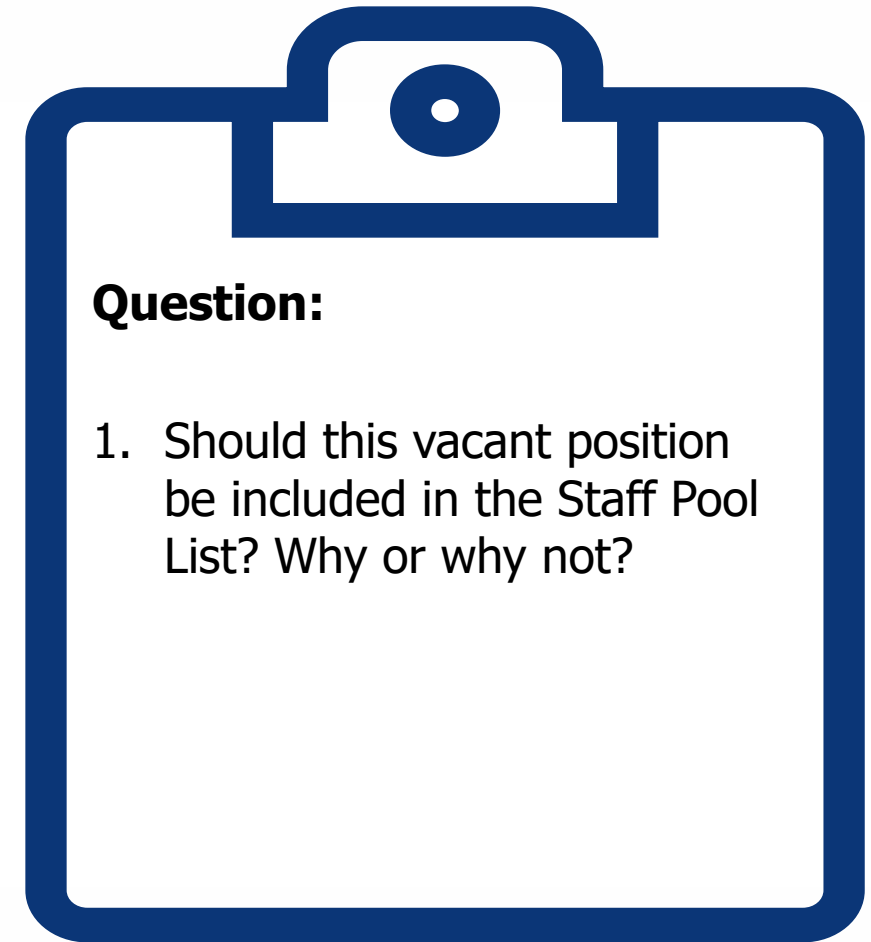
Jan-Mar 2025 Vacancy Activity #5

Your October – December 2024 Staff Pool List had a School Psychologist position in which the individual left the district part way through the quarter. Your district plans on filling this role within the next quarter.

Name	TBD
Email	TBD
Employment Type	Salaried Staff
Job Title	School Psychologist
Job Category	School Psychologist
Cost Pool	Direct Service
Shift	MWF
Salary/Benefits Costs	Salary: $37,189 Benefits: $12,203
Federal Funds	100%

Question:

1. Should this vacant position remain on the Staff Pool List for the January – March (JM) 2025 quarter?

Jan-Mar 2025 Vacancy Activity #6

Your district has a position that was filled in the October – December 2024 quarter, however that individual is no longer employed as of November 10th. You initially removed this vacant position then certified your Jan – Mar 2025 Staff Pool List. You have now heard this position will be filled by January 2025.

Name	TBD
Email	TBD
Employment Type	Salaried Staff
Job Title	School Counselor
Job Category	School Counselor
Cost Pool	Admin
Shift	Full Time
Salary/Benefits Costs	Salary: $45,589 Benefits: $12,345
Federal Funds	0%

Question:
1. What actions can you take?

Considerations:
➢ Do you already have a vacant School Counselor Position that can be utilized for this new hire next quarter?
➢ You can contact PCG to see about adding a new vacant position given this information.

Medicaid Administrative Claiming

Quarterly Financials Overview

What is Medicaid Administrative Claiming (MAC)?

➢ Reimbursement for outreach and coordination activities in both cost pools
➢ Paid through standalone payments related to quarterly participation

MAC Claim

- Costs are reviewed via edit checks
- MAC claim is calculated

Eligible Costs

- Districts must submit eligible costs for district and contracted staff by the due date using the PCG Claiming System

Certified Public Expenditures (CPE) Form

- School districts sign and submit the CPE form to complete the quarterly claim process

1 **2** **3**
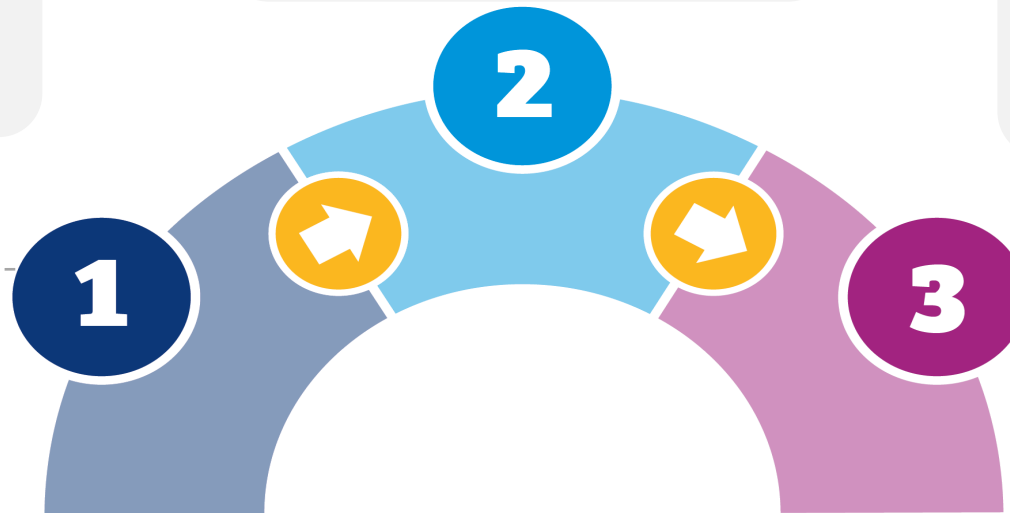
Reporting Other Costs

In fiscal year 2024-25, the professional dues and fees can be reported on your quarterly cost reports.

Examples include licensure and professional dues/fees related to a provider's primary job
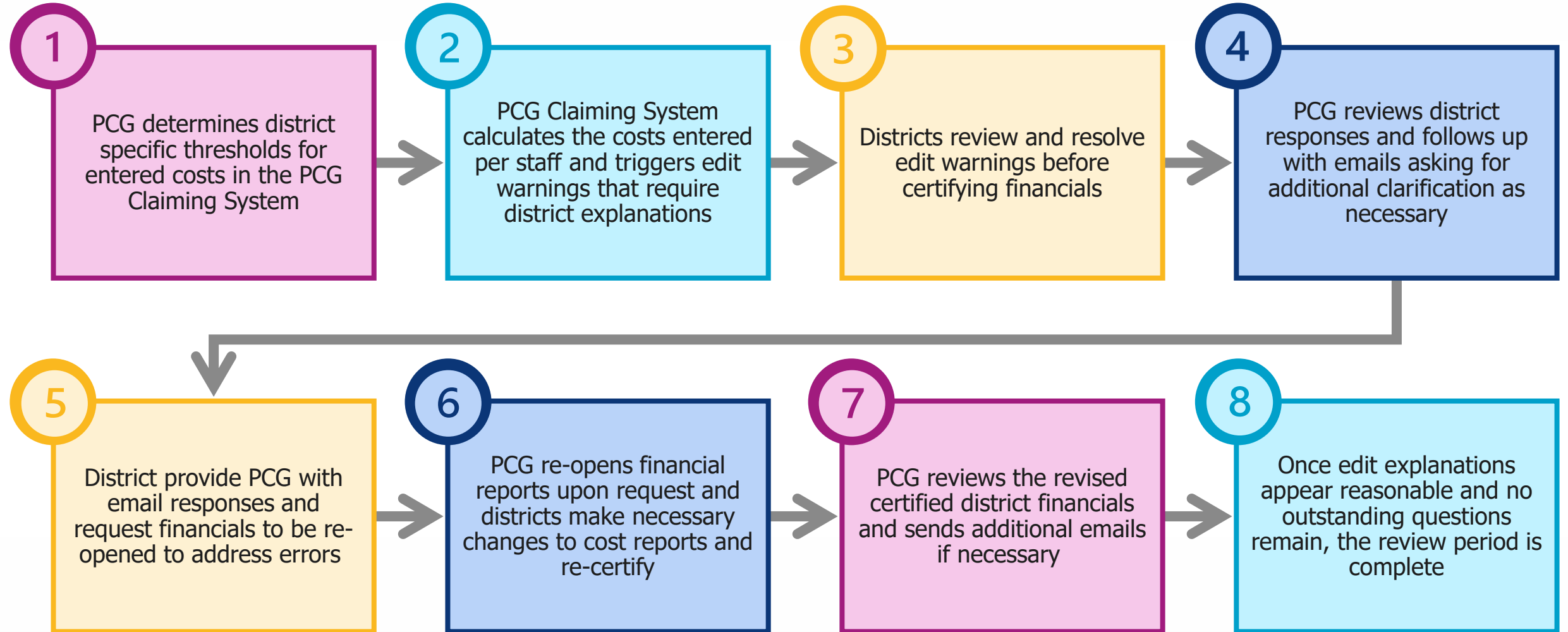
Reminder tip: Other costs only become available in the system when costs for the service type have been reported.
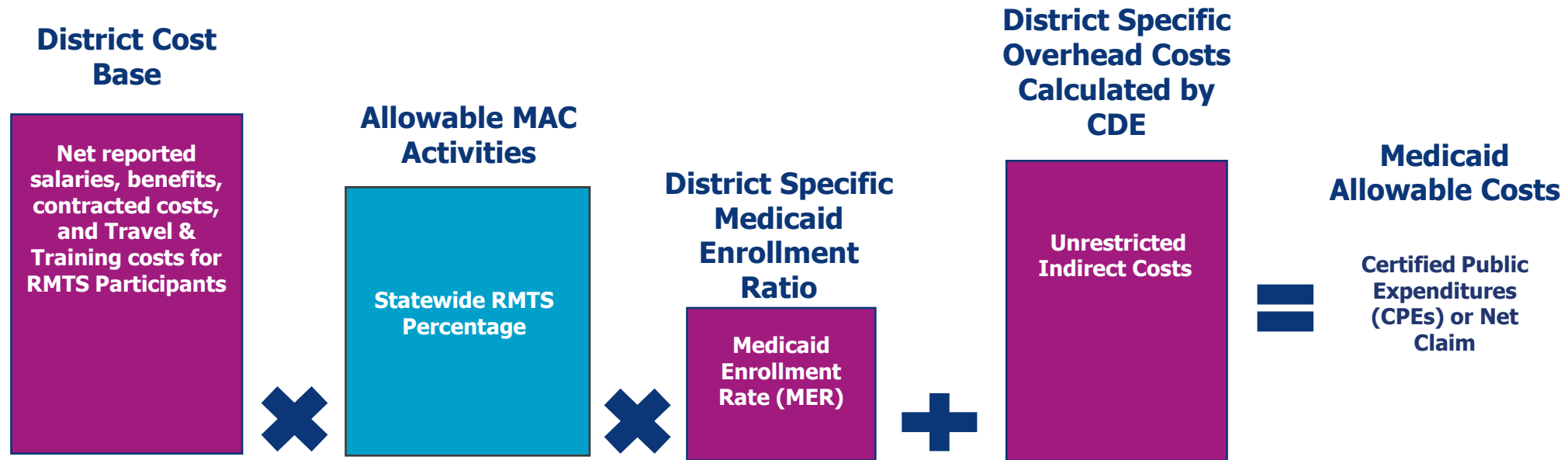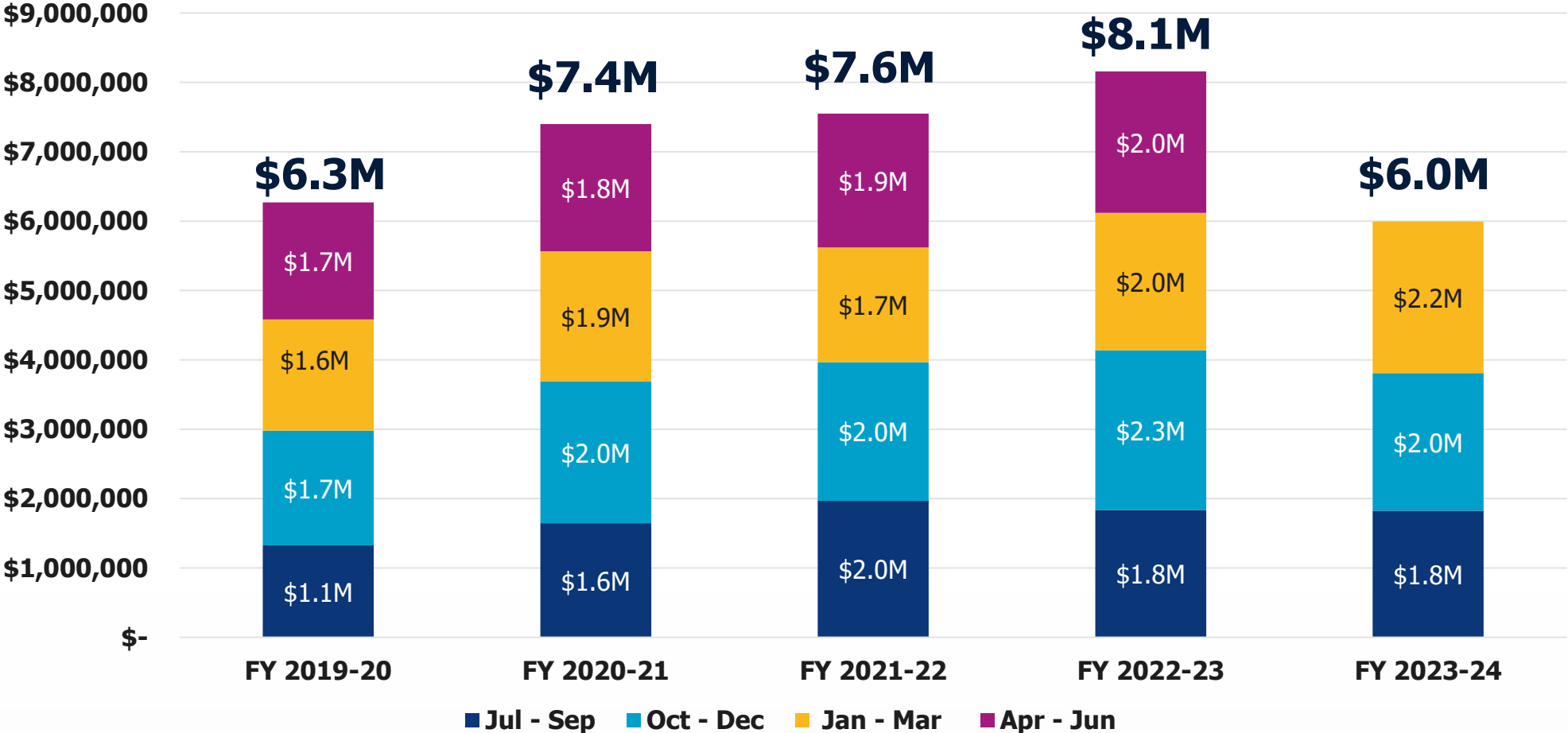
Edit Check Process

1 PCG determines district specific thresholds for entered costs in the PCG Claiming System

2 PCG Claiming System calculates the costs entered per staff and triggers edit warnings that require district explanations

3 Districts review and resolve edit warnings before certifying financials

4 PCG reviews district responses and follows up with emails asking for additional clarification as necessary

5 District provide PCG with email responses and request financials to be re-opened to address errors

6 PCG re-opens financial reports upon request and districts make necessary changes to cost reports and re-certify

7 PCG reviews the revised certified district financials and sends additional emails if necessary

8 Once edit explanations appear reasonable and no outstanding questions remain, the review period is complete

Quarterly Medicaid Administrative Claim (MAC) Calculation

A Medicaid Administrative Claim is calculated for every quarter of participation

District Cost Base

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

✖

Allowable MAC Activities

Statewide RMTS Percentage

✖

District Specific Medicaid Enrollment Ratio

Medicaid Enrollment Rate (MER)

✚

District Specific Overhead Costs Calculated by CDE

Unrestricted Indirect Costs

=

Medicaid Allowable Costs

Certified Public Expenditures (CPEs) or Net Claim

Medicaid Administrative Claiming (MAC) Reimbursement

Statewide Net Reimbursement

CPE Form Submission

⚠️

REMEMBER:

- Without a properly completed CPE Form reimbursement cannot be processed for your district. Failure to meet CPE Form deadlines will delay state payments for **all participating districts**

- Ensure your district has backup personnel to complete the CPE Form

1 Review Quarterly Claim Breakdown on the CPE Form (Total Expenditures, Net Claim, State Withholding, etc.)

2
- Fiscal Authority reviews
- Fiscal Authority signs the CPE form ensuring all lines are filled out

3
- Ensure the CPE signer is a HCPF approved signer (Fiscal Authority who IS NOT the primary coordinator)
- Make sure claim status says "Signed"

CPE Form Activity

Check for Understanding: CPE Form Activity

True or **False**?

•**Anyone can sign the CPE form.**
False. Only *Fiscal Agents recognized by HCPF are authorized to sign the CPE form. If signed by unapproved personnel or by the primary program coordinator, the CPE form will be returned to the district for corrections.

> *Include but not limited to: Chief Executive Officer, Chief Financial Officer, Superintendent, Finance Director, Controller

•**Districts cannot be reimbursed without a signed CPE Form.**
True. If a district fails to complete and submit an outstanding CPE Form, payment will be withheld until completed forms have been received

> *Make sure to have backup users and signers in case the primary individual is out!

•**Federal funding expenditures reported by districts will appear on the Quarterly CPE form.**
False. Federal funds reported by districts do not appear on the CPE form. Only state/local funds will appear within the 'Quarterly Claim Breakdown' section of the CPE Form. District reported Federal funds will be backed out of this section. This an important item for your fiscal agent signer to check before completing

Annual Cost Reporting

Annual Cost Report

Interim Payments

- Districts bill Health First Colorado for the provision of direct services
- HCPF and PCG calculate interim payments prior to the start of the FY
- Districts receive monthly interim payments throughout the FY

Eligible Costs

- Districts submit eligible costs for the FY via the PCG Claiming System
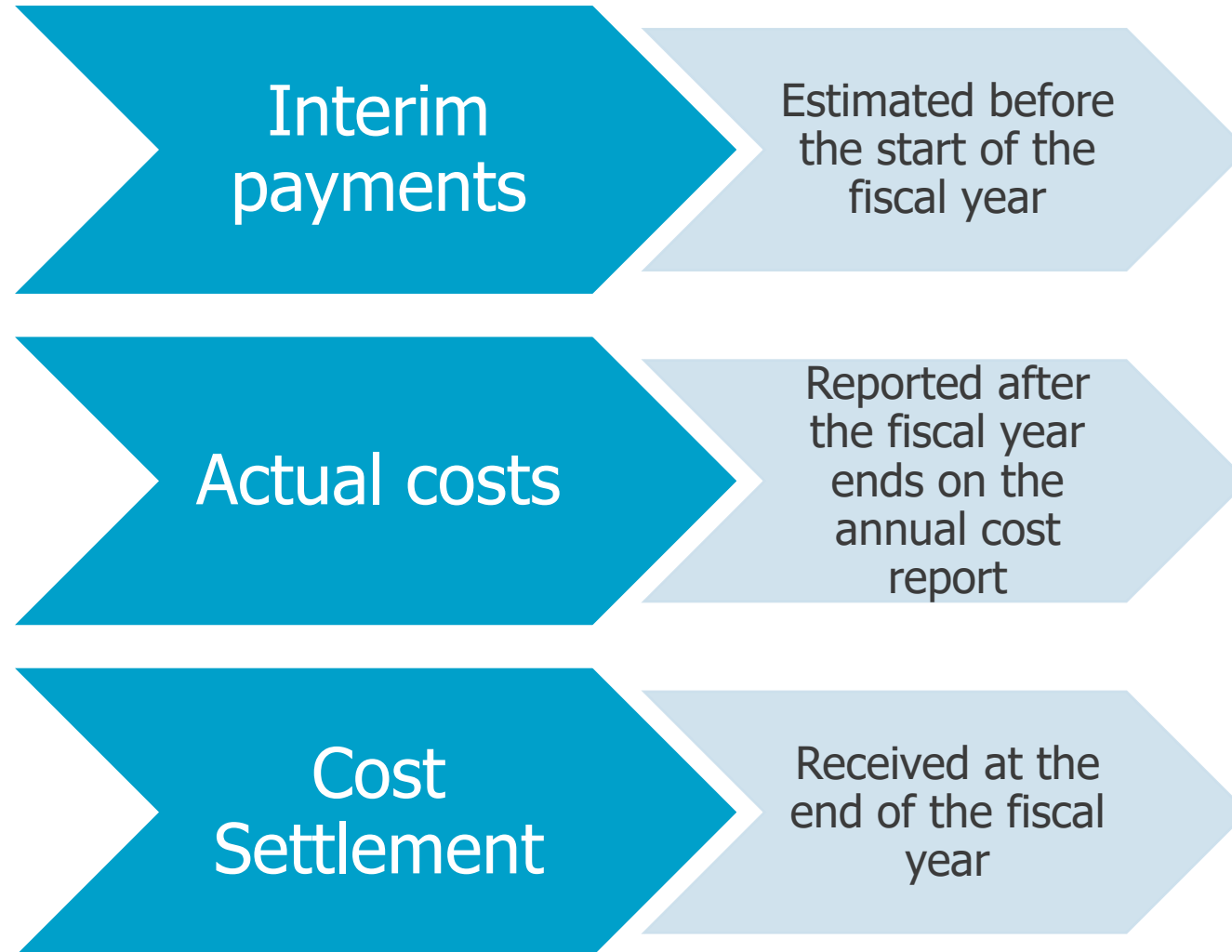- The FY 2023-24 cost report is due October 28, 2024

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

1

2

3

Annual Timeline

Interim payments → Estimated before the start of the fiscal year

Actual costs → Reported after the fiscal year ends on the annual cost report

Cost Settlement → Received at the end of the fiscal year

Annual Reimbursement

Annual SHS Statewide Reimbursement (Federal Share Less Withhold)

Legend: ■ Direct Service ■ Transportation ■ Free Care

	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23
Total	$48.08	$55.27	$52.55	$62.20	$80.14
Free Care			$2.69	$5.15	$6.23
Transportation	$3.49	$3.73	$3.32	$2.88	$2.95
Direct Service	$44.59	$51.54	$46.54	$54.17	$70.96
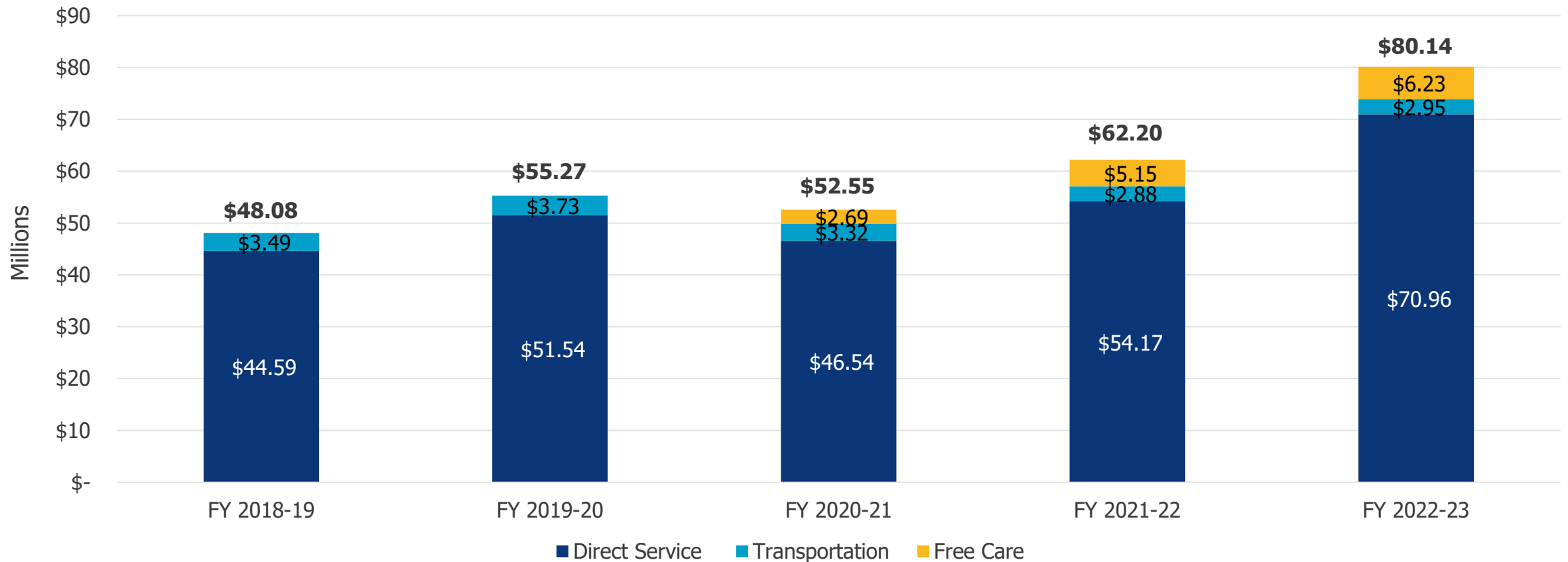
District Reported Direct Service Costs

Comparison of FY 2021-22 and FY 2022-23 District Reported Net Service Type Costs by Direct Service Job Category

Chart: Millions vs. Direct Service Job Categories

Direct Service Job Category	FY 2021-22	FY 2022-23
Counseling	$0.83	$1.19
Nursing Services	$42.33	$52.18
Occupational Therapy Services	$9.97	$11.45
Personal Care Services	$24.99	$29.82
Physical Therapy Services	$2.80	$3.35
Psychological Services	$1.76	$13.88
Social Work Services	$9.74	$11.87
Speech Language and Hearing Services	$29.25	$34.61

Legend: ■ FY 2021-22 ■ FY 2022-23

Annual Cost Report – Direct Service/Free Care

Direct Medical Costs:

- Reported direct service costs for services provided between July 1 – June 30

- The staff member must be on the direct service staff pool list when the service was provided

Allowable Payroll Costs (Salaries and Benefits)

Federal Funds and Non-allowable Costs

District Reported Direct Medical Costs

Allowable Contracted Staff Costs

Direct Medical Services Other Costs

Accounting Methodology

Districts are required to report information based on an **accrual basis accounting methodology**

- Expenses are recorded based on the **date the services were provided**, regardless of when they are paid
- For the providers' costs to be eligible to be included on the cost report, the provider must be on the direct service staff pool list for the applicable quarters
- Staff members cannot be added retrospectively

Provider provides services for your district
August 2023 – May 2024

The provider is on the direct service staff pool list October 2023 – May 2024

Report the provider's costs from October 2023 – May 2024 on the FY 2023-24 annual cost report

Resources

- The PCG Claiming System has various guides, trainings, and helpful documents under the resources menu towards the bottom of the homepage

- Districts can filter by program component and fiscal year

- Please refer to these items when completing your annual cost report

Resources

Available Filters (filtered)

Category: Annual Cost Report ⌄

Fiscal Year: ⌄

Filter   Clear

⬇ Free Care Overview Mini Training

⬀ Annual Cost Report Recorded Training

⬇ Instructions to Access Desk Review Training

⬇ Desk Review Fact Sheet

⬇ Annual Cost Reporting User Guide

Reports

⬇ Active Participants

⬇ Active Coordinators

⬇ SPL History

⬇ SPL Certified/Uncer

⬇ Calendar Certified/

⬇ Compliance Report

⬇ District Compliance

⬇ District Master Sam

⬇ Quarterly Certificat

⬇ Annual Certification

Direct Medical Payroll Costs

Report:

- Total gross earnings and fringe benefits for full-time and part-time payroll employees based on the date services were provided during the reporting period July 1 – June 30

- Only report costs for the time period the employee was on the direct service Staff Pool List (SPL)

Check out resource guides located in the 'Resources' section of the PCG Claiming System

Salaries

Report regular wages and any extra pay associated with primary job function as it relates to the SHS Program:

- Paid time off (e.g., sick or annual leave)
- Overtime
- Longevity
- Stipends
- Bonuses, and/or incentives

Fringe Benefits

Report employer-paid fringe benefits for staff members:

- Health insurance
- Retirement
- Long-term and Short-term disability
- Medicare and Social Security tax
- Worker's Compensation, etc.

Contracted Staff Costs

- The district will report total earnings for each contracted staff member for services provided while on the direct service SPL

- The district must retain supporting documentation to substantiate costs, hours, rate, and contract requirements

Invoice/timesheets per contractor

Paid Hours (number of paid working hours, if paid hourly)

Fund codes (e.g., state/local, federal funds)

Contract Agreement valid for the time period reviewed, signed and dated by the vendor and district

Rates (hourly rate, or rate otherwise agreed upon by the contracted agency and district)
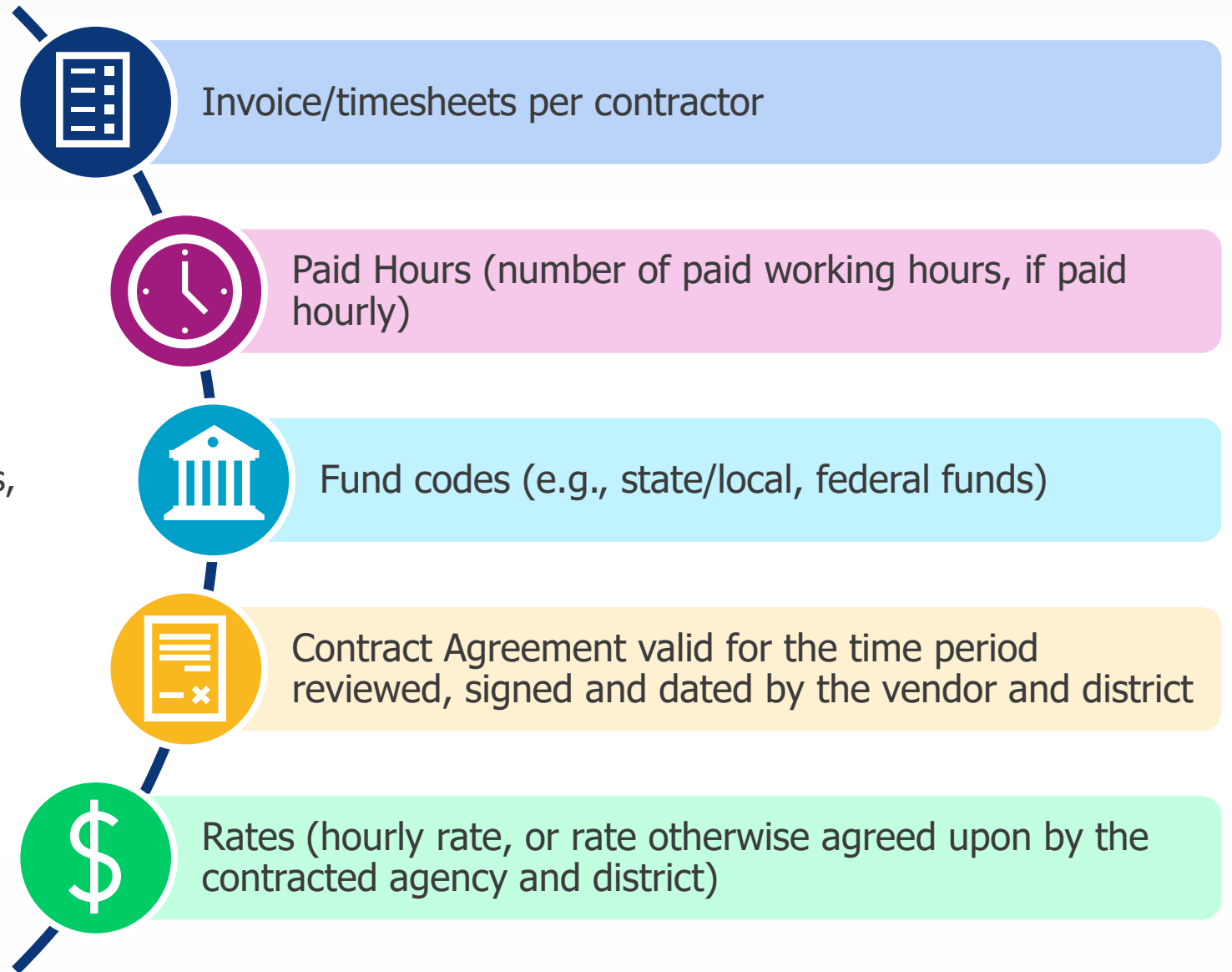
Direct Medical Material and Supply Costs and Equipment Depreciation
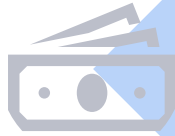
Direct medical other costs are allowable **ONLY** when used in the provision of an allowable direct medical service

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

The item must be used for a direct medical purpose

Items reported cannot be 100% federally funded!

Direct Medical Other Costs Reporting Guide

START

Does your district purchase direct medical materials, supplies, and/or equipment used for the provision of direct medical services in the School Health Services (SHS) Program?

YES → Does the district maintain detailed documentation of direct medical materials, supplies, and/or equipment?

YES → Is the direct medical material, supply, and/or equipment solely used by students on a medical plan of care?

NO (from first box) ↓

NO (from second box)

YES / **NO** (from third box)

STOP!
District is not eligible to report direct medical other costs

District is eligible to report direct medical other costs

Is the direct medical material, supply, and/or equipment cost 100% federally funded

NO / **YES**
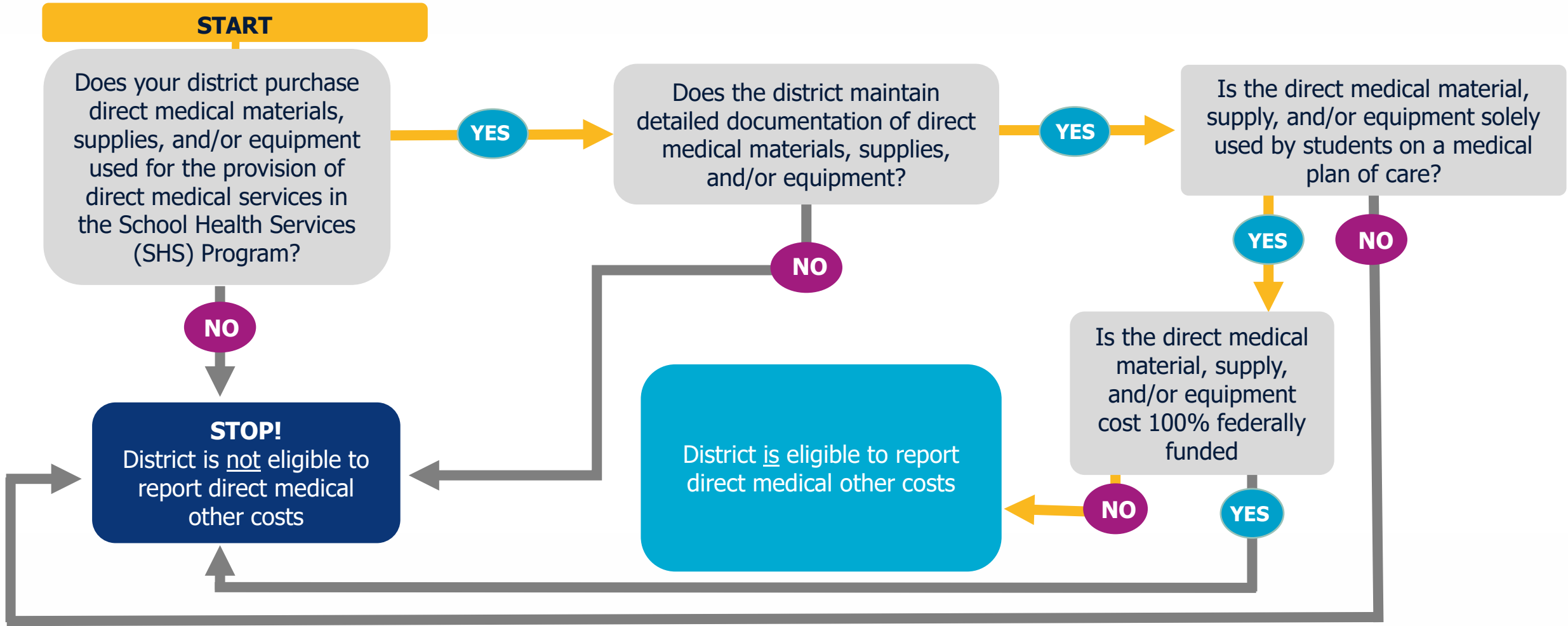
Direct Medical Other Costs Activity

Direct Medical Other Costs Activity – Allowable vs. Not Allowable

Allowable	Not Allowable
Fidget cube/spinner	Third Party Biller fees
Face shield	Cell phones/Cell Phone Stipends
Weighted blanket	Laptops to enter provider service log notes
Positional wedges	Radios
Testing, evaluation, and assessment materials for a student being evaluated for a medical plan of care	Cameras
Blood glucose meter	Food and drinks

Ratios PCG Claiming System

All ratios applied to the annual cost report are displayed on the 'General and Statistical Information' page except for the RMTS direct medical percentage

PCG enters:

- Federal Medical Assistance Percentage (FMAP)
- Unrestricted Indirect Cost Rate (UICR)
- IEP Ratio
- MER

Districts enter (if reporting transportation):

- One-Way Trip Ratio denominator
- Transportation Services IEP Student Ratio (if reporting Not Only Specialized Transportation)

Specialized Transportation

Annual Cost Report – Transportation

Specialized Transportation Costs:

- Only reported once per fiscal year on the annual cost report
- Transportation staff are not included in the RMTS
- Must have documentation to support costs and reported ratios
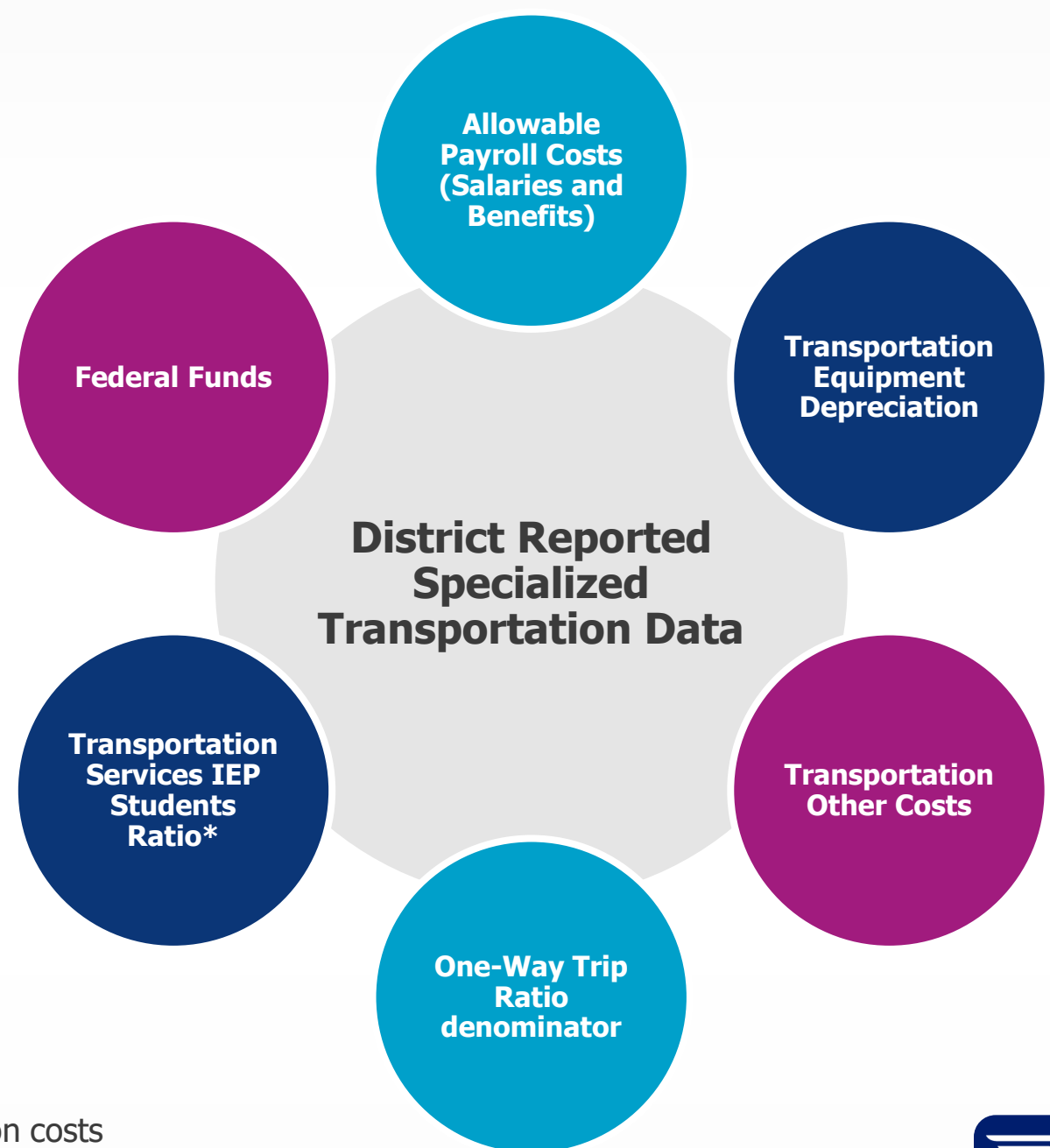
*Only applicable if reporting Not Only Specialized transportation costs

District Reported Specialized Transportation Data

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

Transportation Costs

When the annual cost report opens on **8/1**, districts can report additional costs related to specialized transportation

• There are several requirements for reporting specialized transportation

• Transportation costs are reported using **accrual basis accounting** methodology

PCG recommends implementing processes now to allow for the reporting of and reimbursement for allowable transportation costs

Specialized transportation must be prescribed in a student's IEP

Transportation is reimbursed only on days when a direct service (speech, physical or occupational therapy, nursing, etc.) was provided pursuant to the student's medical plan of care

Documentation must be kept (bus logs, attendance sheets, etc.) to support the student was receiving transportation services and received a direct medical service on the same day

Transportation Costs - Requirements

Transport requires use of physically modified vehicles or a bus aide is present

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

Maintain bus logs throughout the school year

Vehicles must transport students for at least one specialized route

Specialized transportation prescribed in the student's IEP

'Only' Specialized vs. 'Not Only' Specialized

Districts categorize allowable transportation costs as either 'only' specialized or 'not only' specialized transportation

Only Specialized

- The costs **exclusively** pertain to a physically modified vehicle that transports students with specialized transportation in their IEP
- Costs can be discretely associated to specialized transportation with supporting documentation

Not Only Specialized

- Costs are unidentifiable between general education and special education student services
  - Purchased in bulk
  - Associated with a 'shared' vehicle

Transportation Staff Costs

Transportation staff must be entered as 'only' specialized or 'not only' specialized

Districts may report staff costs for:

- Bus Drivers
- Bus Aides
- Mechanics
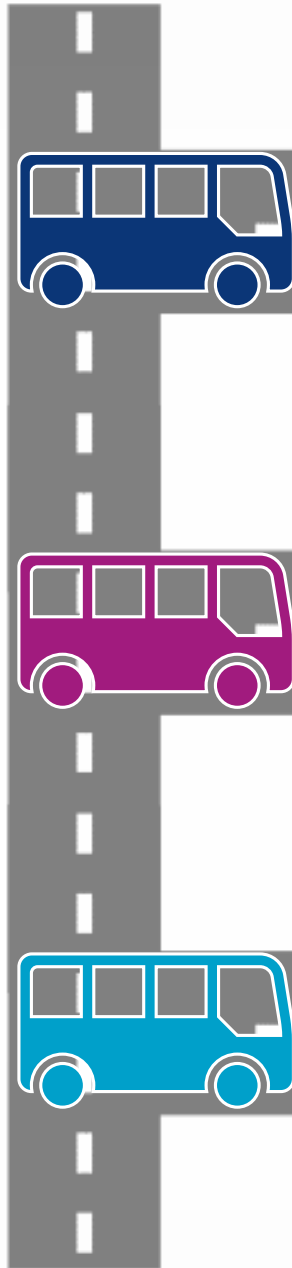
Transportation staff **do not** participate in the RMTS

Only costs associated with the employee's job as a driver/mechanic/bus aide are allowed

Similar to direct service reporting, costs should be reported based on date of service

Transportation Other Costs

Districts may report transportation other costs for:

- Contracted transportation services
- Contracted transportation equipment costs
- Fuel and oil
- Insurance
- Lease/rentals
- Maintenance and repairs

Transportation other costs must be entered as 'only' specialized or 'not only' specialized
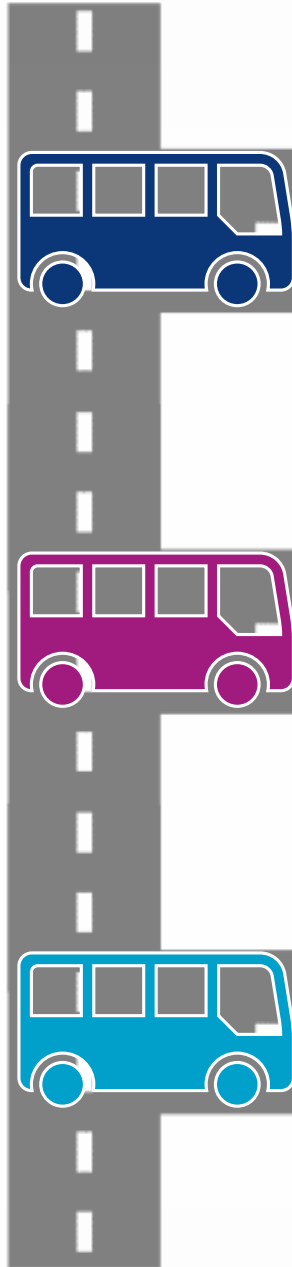
Only costs associated with 'Making the bus go' should be reported

Non-Allowable:
Car washes, uniforms, drug testing, radios, general office supplies for the transportation department

Districts must have documentation to support all transportation other costs detailed by category and name of the item

Transportation Equipment Depreciation

Districts may report transportation equipment depreciation costs for:

- Vehicles that transport students
- Wheelchair lifts
- Vehicle air conditioning

Transportation equipment depreciation must be entered as 'only' specialized or 'not only' specialized
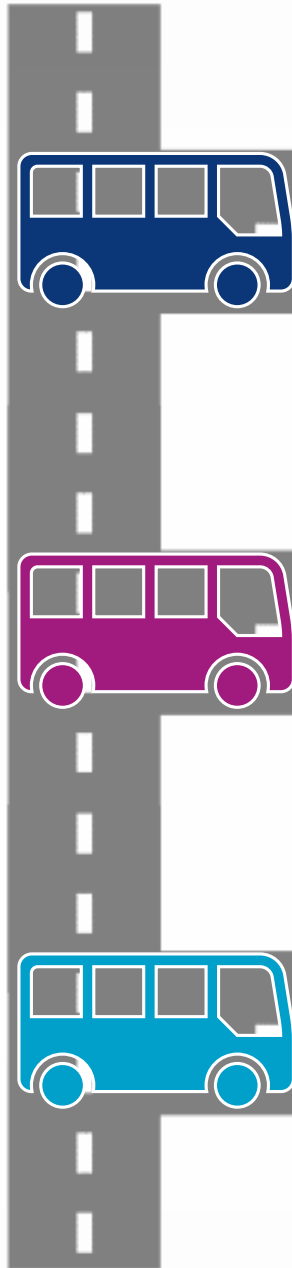
The vehicles must be **physically modified** per the specialized transportation prescription in the students' IEPs

Depreciation is automatically calculated in the PCG Claiming System according to a straight-line depreciation method
X = (Cost - Federal Funds) ÷ 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 is applied to all transportation costs

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

✓ Final numerator is entered by PCG in January

✓ The denominator is populated by the district

✓ Bus logs must be kept to support the trip ratio

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

Total number of one-way trips for **ALL students receiving specialized transportation** services per their IEP

=

Trip Ratio

Apportions costs to the population of students eligible for reimbursement

Transportation Services IEP Students Ratio

The Transportation Services IEP Students Ratio is required if reporting Not Only Specialized transportation

✓ If requested, districts must be able to provide the student roster supporting the reported ratio

✓ If your district solely reports 'only' specialized transportation costs, this ratio is not applicable and will appear as 100% on your cost report

Numerator:
Total number of students that have specialized transportation per their IEP

÷

Denominator:
Total number of students receiving transportation

=

Transportation Services IEP Students Ratio
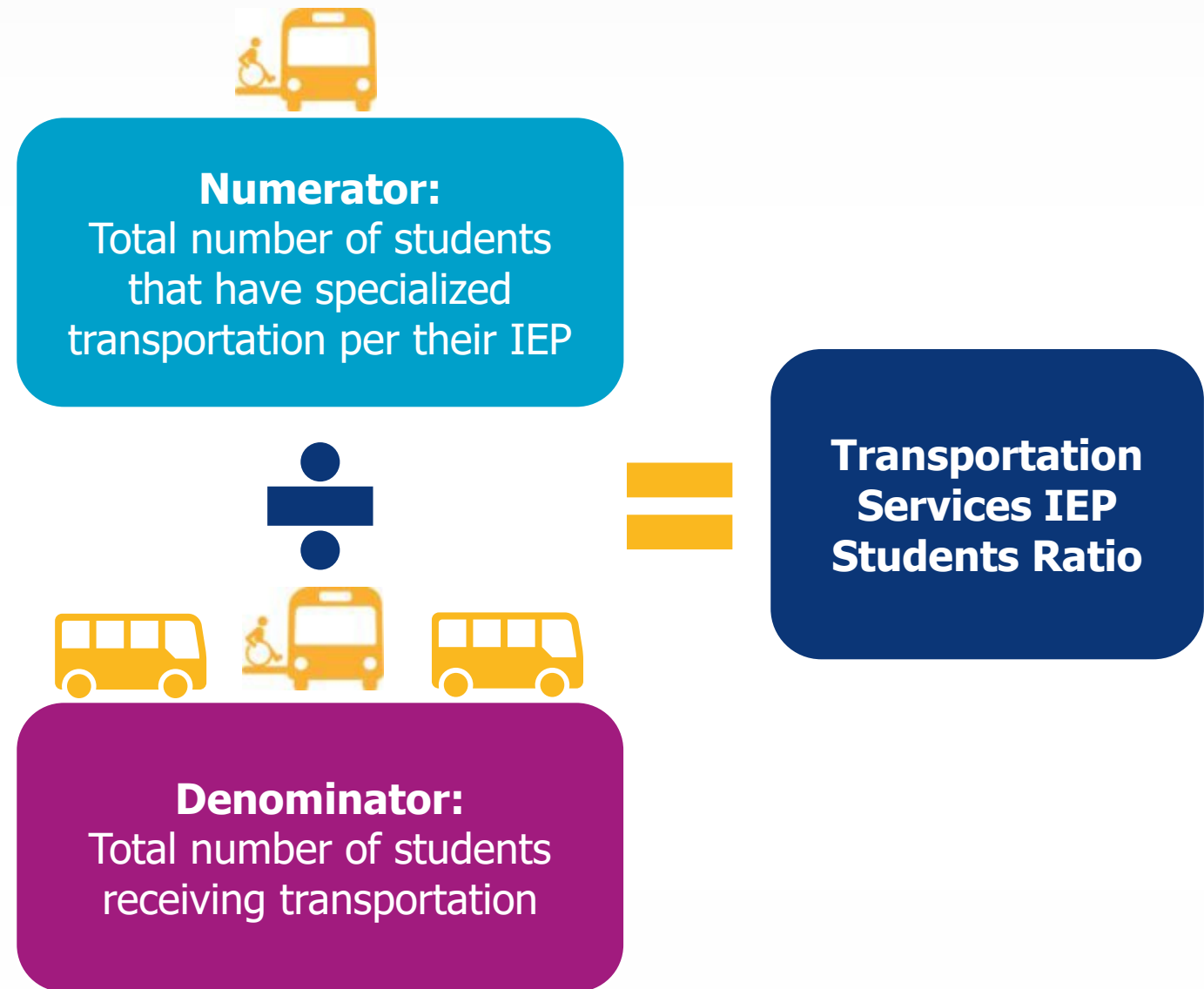
Transportation Analysis

Timeline of transportation analysis that has occurred:

| Updated CMS Comprehensive Guide released in May 2023 | → | Districts were sent a survey regarding specialized transportation services in November 2023 | → | District meetings occurred in March and April 2024 to address the anticipated impact | → | Analysis currently being conducted for future program changes |

- As a friendly reminder, please make sure to complete and send back the transportation workbooks to PCG if you haven't done so already!

Annual Cost Report Desk Review

Desk Review

After certifying the annual cost report each year, PCG creates a desk review to verify costs and other data is reported accurately by each district

| Districts report financial and statistical data in the PCG Claiming System on their annual cost report | → | PCG develops district specific thresholds* and conducts year to year analysis to identify potential errors | → | District reviews and responds to ALL identified edits during the desk review process | → | Districts should review all reported costs and ratios to ensure accuracy. Districts are responsible for maintaining documentation for all reported costs and ratios |

*PCG uses statewide thresholds when sufficient district data is not available

Desk Review Process

1 — PCG determines thresholds for entered costs and ratios in the PCG Claiming System

2 — PCG Claiming System calculates the desk review based on thresholds or year-to-year variances (district responses are carried onto the desk review)

3 — PCG releases desk review edits to every district to review submitted costs/ data

4 — District reviews costs/data and responds to desk review edits in the PCG Claiming System

5 — PCG reviews district responses and will either accept or request additional follow-up

6 — District makes necessary changes to cost report determined during desk review *if applicable (positive or negative)

7 — PCG recalculates review sending any new or re-opened edits back to the district for review and confirmation of accuracy

8 — Once changes are complete and all edits are answered, PCG closes the desk review

Cost Settlement Calculation and Process

Annual Claim Calculation

Cost Base

Net reported salaries, benefits, contracted and direct medical other costs

+

Unrestricted Indirect Costs

✕

IEP* Direct Service Calculation

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 Program (IEP)

Annual Claim Calculation

Direct service + free care + transportation allowable costs **—** **Interim payments** **×** **FMAP and state withhold** **=** **Cost settlement due to/from the district**

Subtract gross interim payments received from total Medicaid allowable costs

Reduce by FMAP and state withhold

Cost Settlement Calculation Activity

Cost Settlement Calculation Activity – Cost Base

What are the four areas costs can be reported under the direct service portion of the annual cost report?

Employee Salaries

Employee Benefits

Contractor Costs

Direct Medical Other Costs

Cost Base

Net reported salaries, benefits, contracted and direct medical other costs

+

Unrestricted Indirect Costs
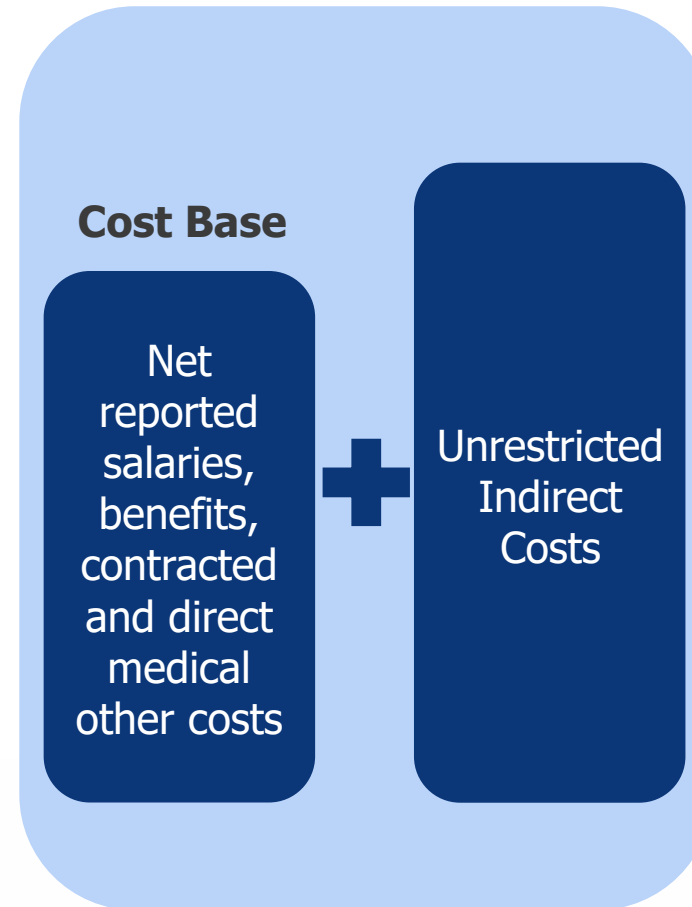
Cost Settlement Calculation Activity – Direct Service Ratios

What are the two ratios that are applied to costs to determine the direct medical allowable costs and what is used to calculate the ratios?

Direct Medical Percentage (IEP Services)

- **Where does the ratio come from?**
  - Results from the RMTS Moments
- **What does the ratio represent?**
  - The amount of time staff in the direct service cost pool spent providing reimbursable medical services to students with an IEP

IEP Ratio

- **What data is used to calculate?**
  - Calculated from student data provided by HCPF
- **What does the ratio represent?**
  - The percentage of Medicaid eligible IEP students to the total number of IEP students

Direct Medical Allowable Costs Calculation

Direct medical percentage **✖** IEP Ratio **=** Direct medical allowable costs
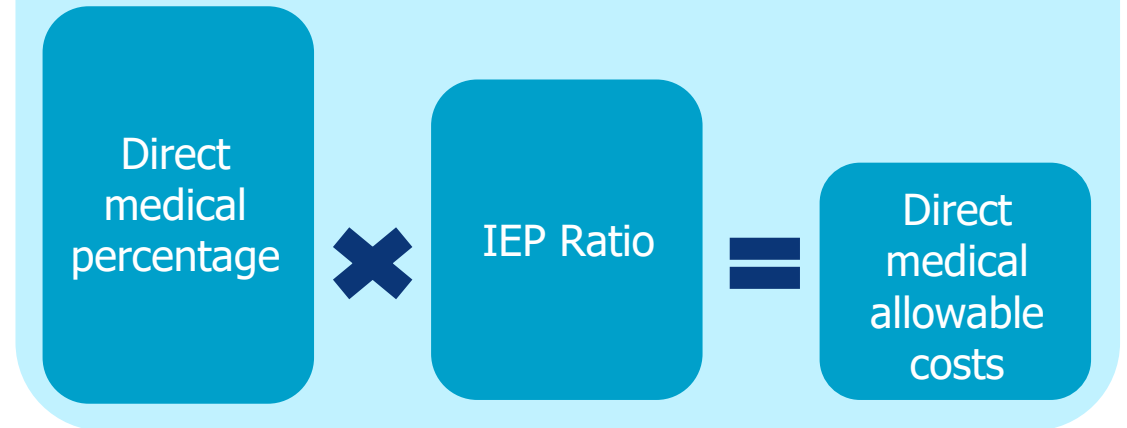
Cost Settlement Calculation Activity – Free Care Ratios

What are the two ratios that are applied to costs to determine the Free Care allowable costs and what is used to calculate the ratio?

Free Care Direct Medical Percentage (Other Medical Plans of Care Services)

- **Where does the ratio come from?**
  - Results from the RMTS
- **What does the ratio represent?**
  - The amount of time staff in the direct service cost pool spent providing reimbursable medical services to students with a medical plan of care

MER

- **What data is used to calculated?**
  - From student data provided by HCPF
- **What does the data represent?**
  - The percentage of students in the district who are Medicaid eligible

Free Care Allowable Costs Calculation

Free Care RMTS percentage $\times$ MER $=$ Free Care allowable costs

Comprehensive Review

Comprehensive Review Overview

PCG conducts a Comprehensive Review on selected districts upon completion of desk reviews each year

- Districts are selected at least once every three years

- The Comprehensive Review examines all areas of the SHS Program and is a safeguard to claiming correct costs for federal matching dollars

- 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

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

Comprehensive Review Timeline

Districts have 20 calendar days from the date the email notification is sent to upload required documentation

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

Documentation Reminders

To support each category of costs, districts are required to maintain the following documentation:

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

Performance Standard Scores

Districts are graded for each standard as "Pass/Fail"

For example:

- Each sampled employee's payroll costs entered in the PCG Claiming System must match the documentation provided
- If one employee's reported costs do not match the documentation, this standard is marked as "Fail"

The results and overall score of the review will determine the district's next steps

Performance Standards	
Standard	**Review Topic**
1A	Annual Salaried and Contracted Costs
1B	Direct Medical Other Costs
1C	Licensure
1D – if applicable	Transportation Payroll Costs
1E – if applicable	Transportation Other Costs
1F – if applicable	Transportation Equipment Depreciation Costs
1G – if applicable	General and Statistical Information
2A	Service Logs
2B	Attendance Logs
2C	IEPs and/or Other Plans of Care
3	MAC/Quarterly Financials
4	Documentation Due Date

FY 2023-24 Comprehensive Review Findings

Standard	Review Topic	Number of Districts with Findings	Percent of Districts with Findings
1A	**Annual Salaried and Contracted costs**	11	57.9%
3	**Quarterly Payroll/Salaried and Contract**	8	42.1%
1D	**Transportation Payroll Costs**	6	31.6%
1B	Direct Medical Other Costs	5	26.3%
1F	Transportation Equipment Depreciation Costs	3	15.8%
2A	Service Logs	3	15.8%
2C	IEPs/Other Medical Plans of Care	3	15.8%
1C	Licensure	2	10.5%
1E	Transportation Other Costs	2	10.5%
1G	General and Statistical Information	2	10.5%
2B	Attendance Logs	2	10.5%

*19 districts were reviewed

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 available to all district coordinators throughout the year

- Only those required to attend a PCT need to complete the attendance form

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

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

Depending on performance, districts may be selected for another Comprehensive Review prior to the three-year requirement

PCG Claiming System Enhancements

Desk Review Reference Page

Enhancement:
At the top of each desk review edit card, there is an additional line added: 'Reference Page'

Benefit:
The page listed is where the information undergoing review was entered and can be verified

Banner Training Links

Enhancement:
At the top of each annual, quarterly, or RMTS page, there is a banner with a link to relevant resources or a Click-2-Learn to guide for entering data

Benefit:
This gives users a way to quickly refresh on reporting requirements as they are completing their report

Annual: Salaried Staff

Annual Salaried Staff Banner

Please review this training on how to enter Federal Funds

SPL Import Upgrade

Enhancement:
Updated the SPL import feature

Benefit:
Faster upload speed, import large files, a detailed error report specifying line items that were unable to be imported
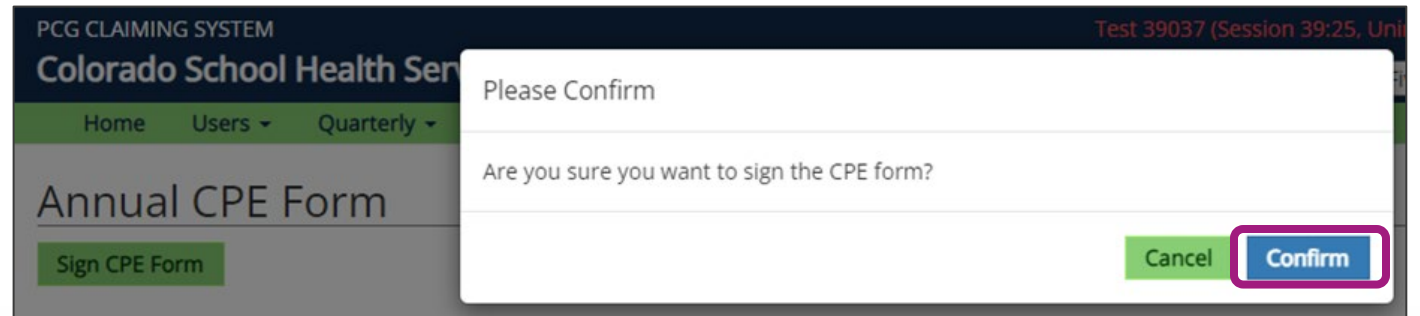
CPE Form Electronic Signature

Enhancement:
A staff member with fiscal authority from districts will electronically sign their CPE forms in the PCG Claiming System
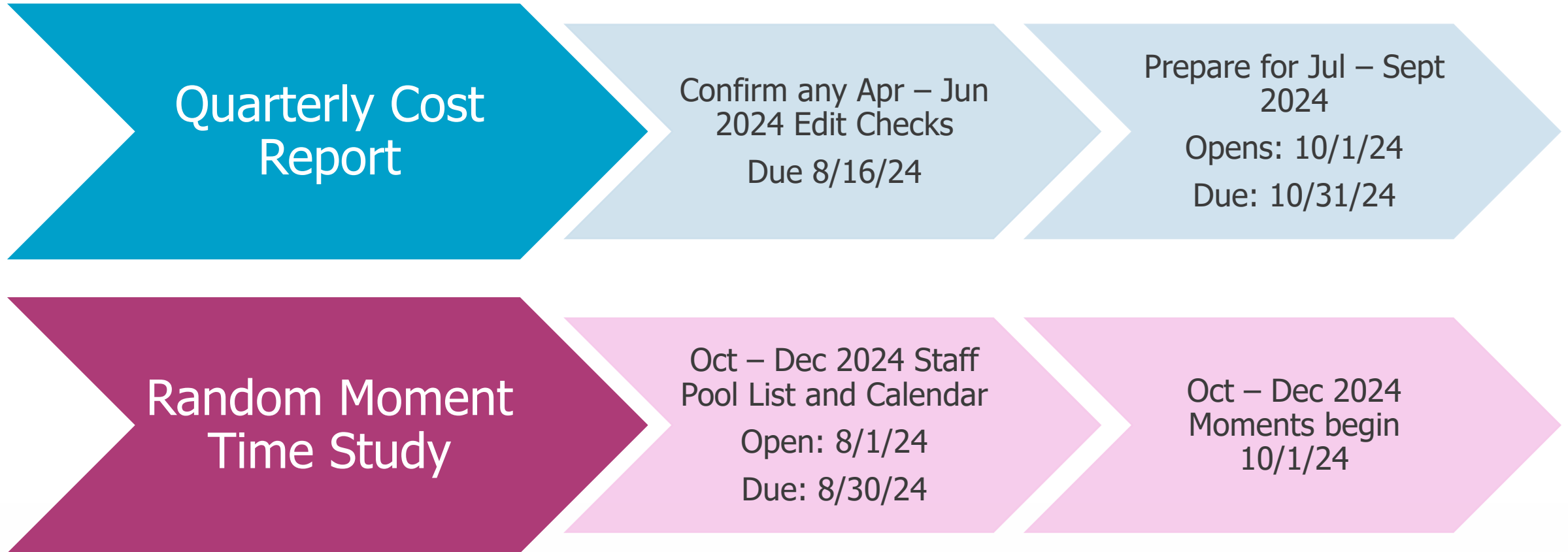
Benefit:
CPE forms will be signed and stored within the system for seamless completion of the cost reporting process
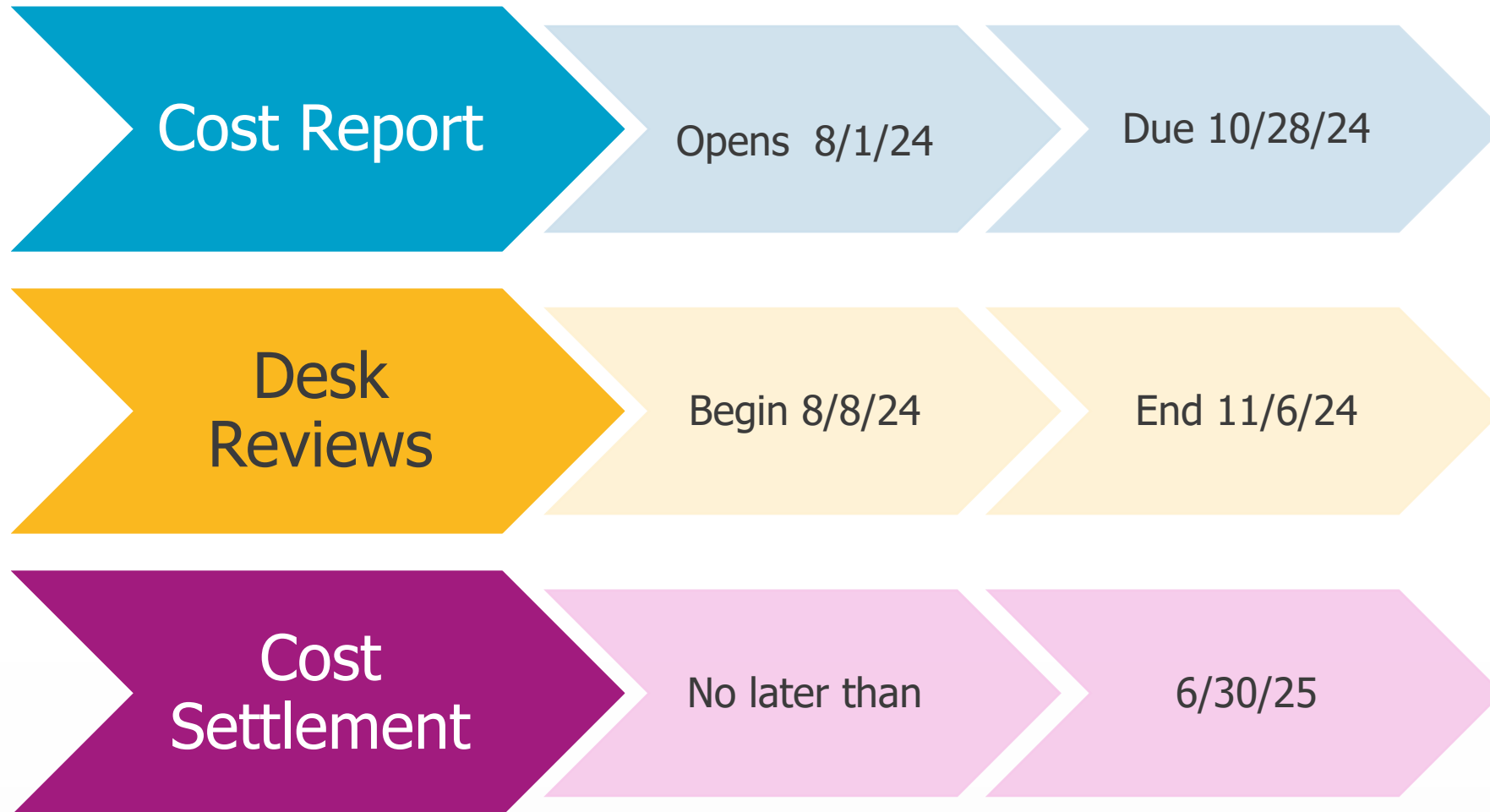
Key Dates & Contacts

Random Moment Time Study and Quarterly Cost Report Upcoming Dates FY 2024 - 25

Quarterly Cost Report

Confirm any Apr – Jun 2024 Edit Checks

Due 8/16/24

Prepare for Jul – Sept 2024

Opens: 10/1/24

Due: 10/31/24

Random Moment Time Study

Oct – Dec 2024 Staff Pool List and Calendar

Open: 8/1/24

Due: 8/30/24

Oct – Dec 2024 Moments begin 10/1/24

Annual Cost Report Important Dates – FY 2024-25

Cost Report	Opens 8/1/24	Due 10/28/24
Desk Reviews	Begin 8/8/24	End 11/6/24
Cost Settlement	No later than	6/30/25

Contacting Us

Call Us

Initiate calls from the very page you have a question on. Quick and direct responses from a PCG customer service representative by explaining what you see, and the help you need

Leave Us a Support Ticket

Leaving a message will auto populate with the user's information making it fast and easy. Narrow down the specific question topic by selecting issues from the dropdown menus. Receive emails with ticket status and notification of updates

Support can be initiated across multiple channels directly in the PCG Claiming System

Includes phone, email and submitting a support ticket

District coordinators can also initiate support outside the system via the toll-free hotline and email

- MAC/RMTS: 866-317-0223 cormts@pcgus.com
- Annual: 866-766-9015 cocostreport@pcgus.com

HCPF contact information:
HCPF_SchoolHealthServices@state.co.us

CDE contact information:
Tyler Marsh
Marsh_T@cde.state.co.us