

School Health Services (SHS) Program Mid-Year Training

The Department of Health Care Policy and Financing (Department)

General Program Updates

January 2023

Agenda

Introduction
Annual Reimbursement
Free Care
Annual Cost Report Desk Review
Comprehensive Review Common Findings
Random Moment Time Study
Medicaid Administrative Claiming
Conclusion
Program Contacts



Introduction

Acronyms A-I

Acronym	Full Names
<i>BCBA</i>	Board Certified Behavior Analyst
<i>BOCES</i>	Boards of Cooperative Educational Services
<i>CDE</i>	Colorado Department of Education
<i>CEO</i>	Chief Executive Officer
<i>CFO</i>	Chief Financial Officer
<i>CPE</i>	Certified Public Expenditure
<i>CMS</i>	Centers for Medicare and Medicaid Services
<i>Department</i>	Department of Health Care Policy & Financing
<i>DMP</i>	Direct Medical Percentage
<i>DS</i>	Direct Service
<i>FAPE</i>	Free Appropriate Public Education
<i>FFP</i>	Federal Financial Participation Rate
<i>FMAP</i>	Federal Medical Assistance Percentage
<i>FY</i>	Fiscal Year
<i>IDEA</i>	Individuals with Disabilities Education Act



Acronyms I-Z

Acronym	Full Names
<i>IEP</i>	Individualized Education Plan
<i>IFSP</i>	Individualized Family Service Plan
<i>JM</i>	January - March
<i>MAC</i>	Medicaid Administrative Claiming
<i>MER</i>	Medicaid Enrollment Rate
<i>OD</i>	October-December
<i>PCG</i>	Public Consulting Group
<i>RBT</i>	Registered Behavior Technician
<i>RMTS</i>	Random Moment Time Study
<i>SHS</i>	School Health Services
<i>SPL</i>	Staff Pool List
<i>TSIG</i>	Time Study Implementation Guide
<i>QMP</i>	Qualified Medical Professional
<i>UICR</i>	Unrestricted Indirect Cost Rate



Medicaid and Schools

Districts work within the Federal and State laws/guidelines to offer students unique opportunities to access health care via direct and administrative services



Federal Government

- ▶ Centers for Medicare & Medicaid Services (CMS) offers guidance/program oversight
- ▶ Individuals with Disabilities Education Act (IDEA) requires districts to provide students with disabilities a Free Appropriate Public Education (FAPE)
- ▶ Federal law says state Medicaid agencies are responsible to pay for the direct services identified on a student's medical plan of care and the administrative costs in support of the Medicaid state plan and Time Study Implementation Guide (TSIG)



State Government

- ▶ State Medicaid agency administers school-based claiming programs
- ▶ State agencies work under Federal guidelines and provides oversight of the vendor's administration of the program
- ▶ Typically issues reimbursement to districts
- ▶ Typically employs a vendor to administer the program



District

- ▶ Sign intergovernmental participation agreement with state Medicaid agency to participant in the school-based claiming program
- ▶ Funds are recovered for services rendered to Medicaid enrolled students

Program Support

Department of Health Care Policy & Financing (Department)

- Program policy expert
- Enforce CMS guidelines
- Training administration
- Approve/deny Random Moment Time Study (RMTS) and cost reporting extension requests

Public Consulting Group (PCG)

- PCG Claiming System administrator
- RMTS, quarterly cost reporting, and annual cost reporting subject experts
- PCG Claiming System Help Desk admin

Colorado Department of Education (CDE)

- Reimbursement spending expert
- Collect annual CDE reimbursement spending reports

Stakeholders

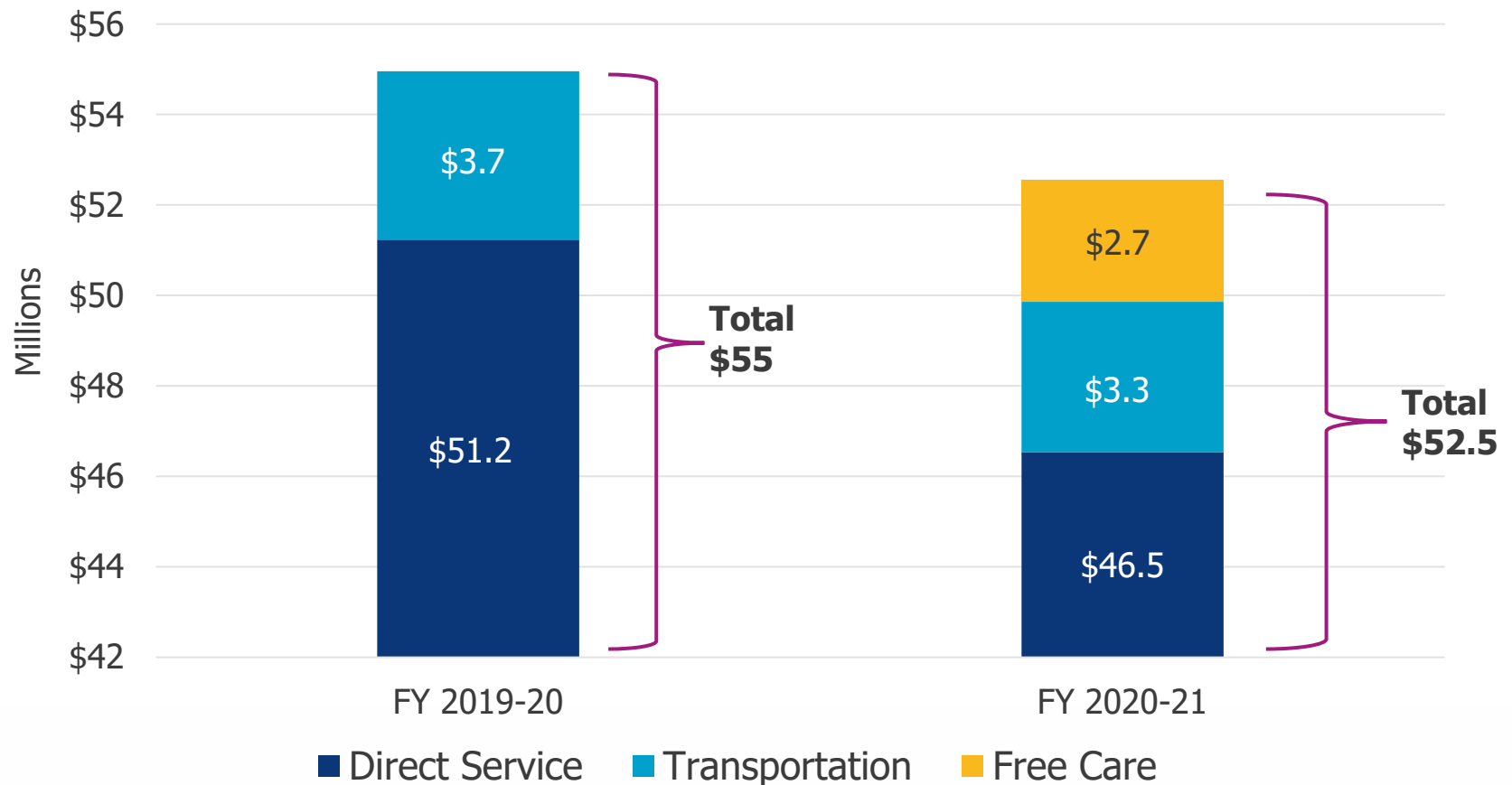
- Experienced regional coordinators
- Medicaid coordinator logistics
- Enhanced area of knowledge in RMTS, quarterly cost reporting, and annual cost reporting
- Speak on behalf of district regions in Stakeholder meetings



Annual Reimbursement

Annual Cost Reporting Trend

Statewide Total Reimbursement for Fiscal Year (FY) 2019-20 and FY 2020-21



Note:

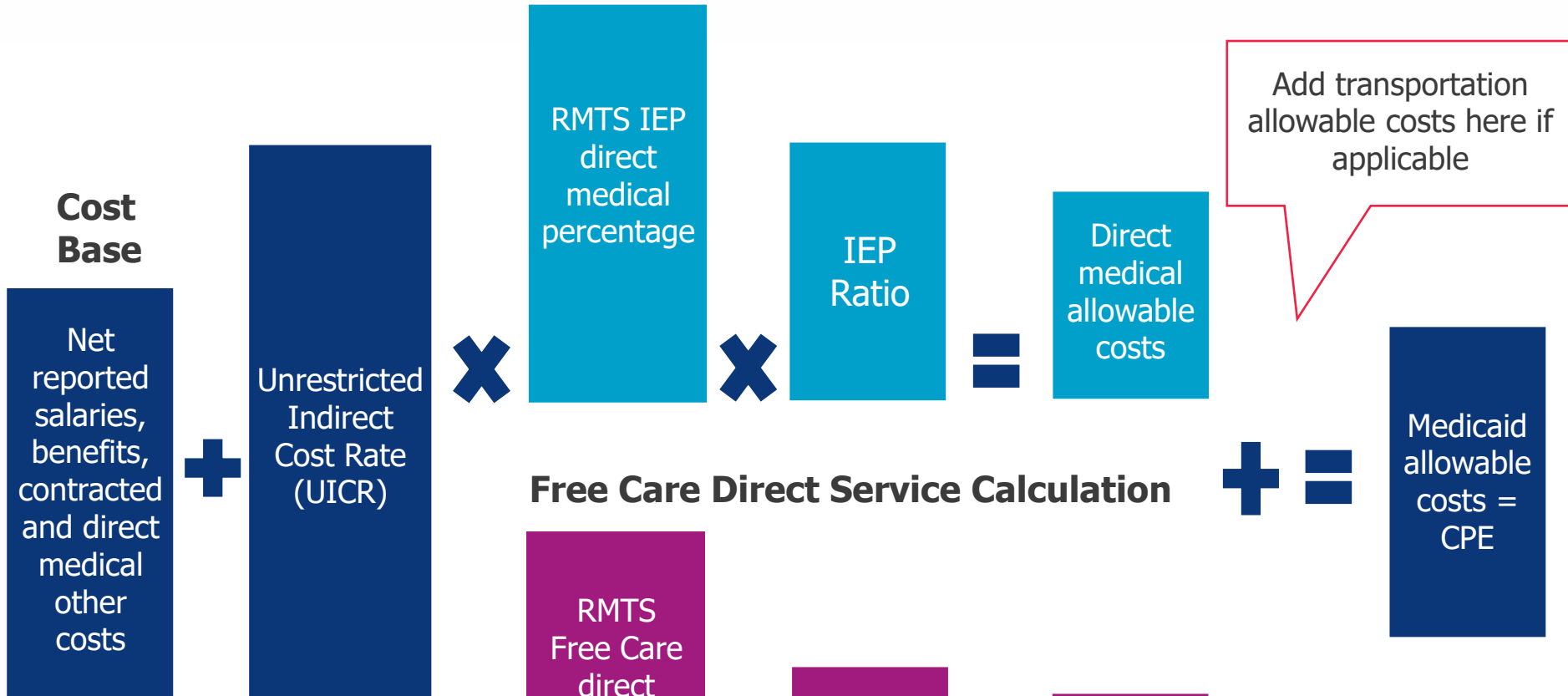
*Free Care was effective in FY 2020-21

*Reimbursement amounts are after Federal Medical Assistance Percentage (FMAP) and state withholding



Annual Certified Public Expenditure (CPE) Calculation

IEP* Direct Service Calculation



*Individualized Education Plan (IEP)

**Medicaid Enrollment Rate (MER)

CPE Form Reminders

Districts should keep the following best practices in mind when signing CPEs



Identify a back-up staff member and gain PCG Claiming System access in case the primary signer is out of the office



Review Cost Settlement Summary in the PCG Claiming System and approve once verified as accurate



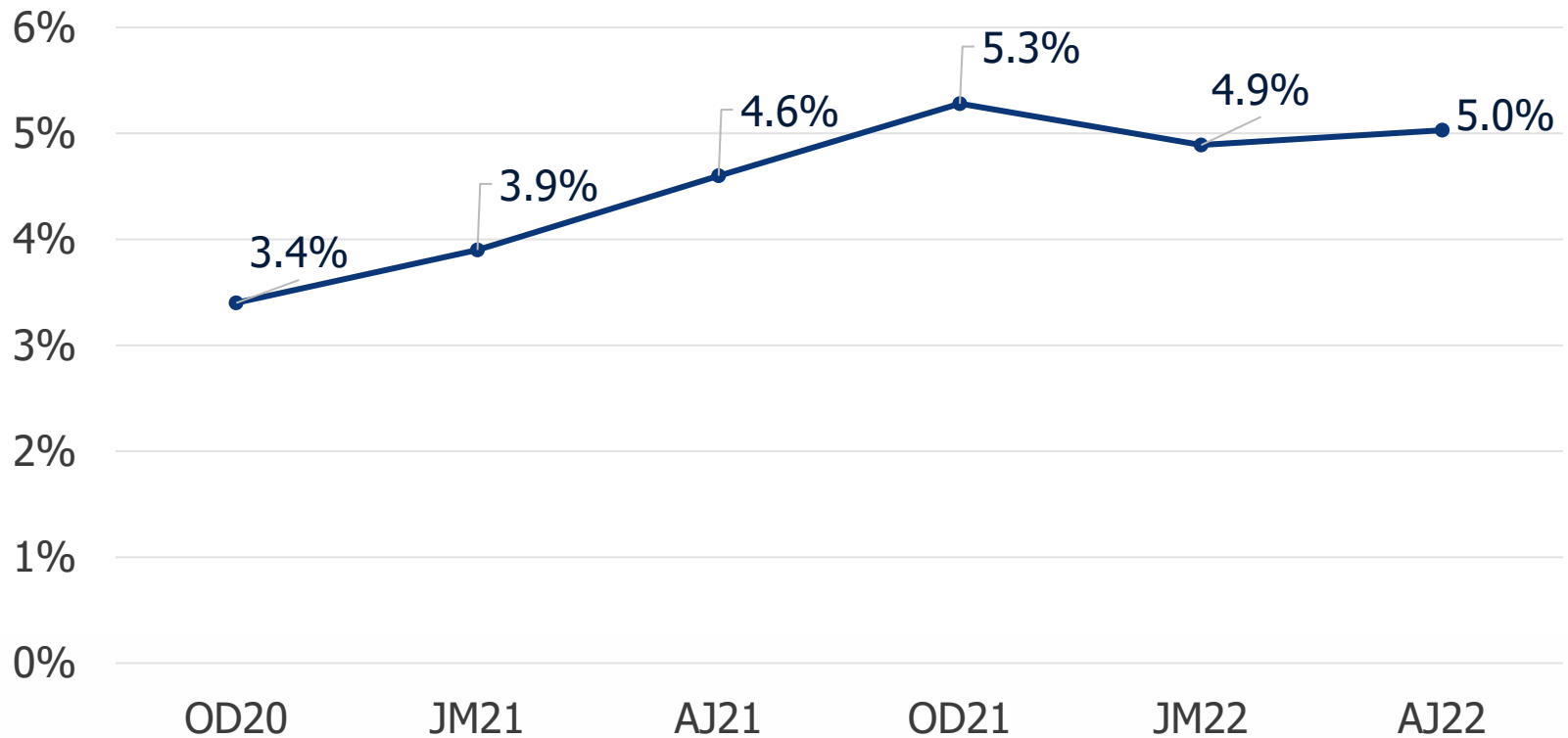
Complete all fields on the bottom section of the CPE form to include the date and signature from a Chief Executive Officer (CEO), Chief Financial Officer (CFO), or superintendent

Free Care

Free Care Reimbursement

Free Care was implemented on October 1, 2020

FY 2020-21 Free Care Percentage



Reminders for IEPs/Other Medical Plans of Care

Expansion of Free Care Services allows districts/Boards of Cooperative Educational Services (BOCES) to be reimbursed for services prescribed and rendered on other medical plans of care **if** medical necessity has been established



Providers should be trained on the source of the services they are rendering to students, i.e., IEP / Individual Family Services Plan (IFSP) and stand alone other medical plans of care



Providers should be able to answer time study questions with specificity about the services they are rendering

Examples of Other Medical Plans of Care:

1

Health Care Plan

2

Behavior Intervention Plan

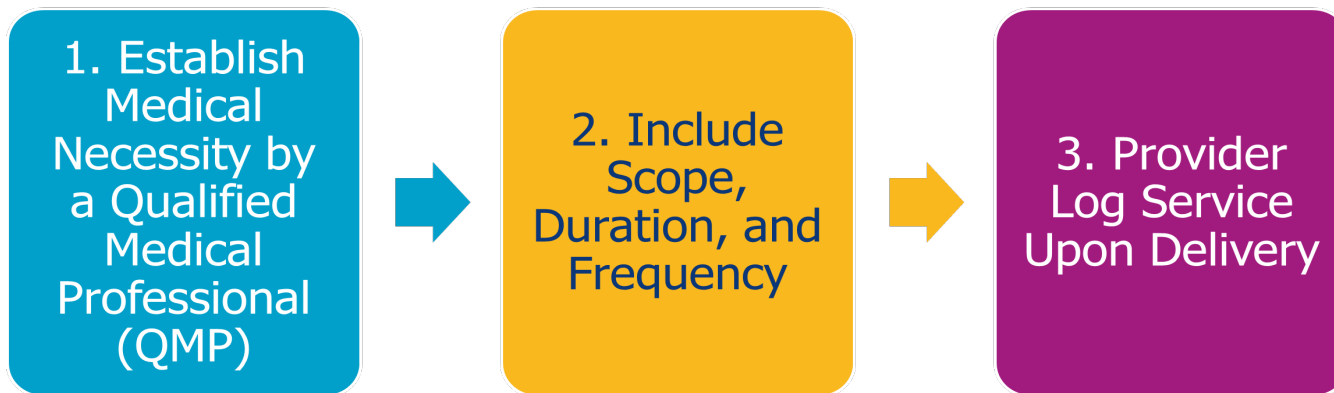
3

504



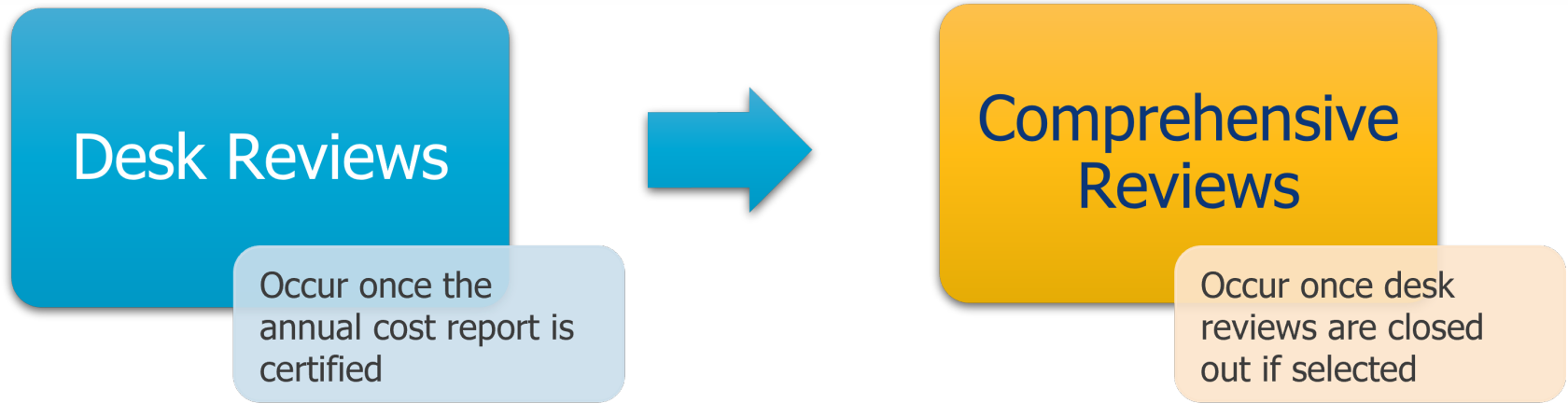
IEPs/Other Medical Plans of Care Compliance

These three items are relevant to all medical plans of care including IEPs/IFSPs:



Desk Reviews and Comprehensive Reviews

Desk Review and Comprehensive Review Timeline



Helpful Reminders:

- The sooner you complete the desk review, the sooner you can begin the comprehensive review (if selected)
- It is best to keep clear & organized documentation on hand for ease of reference during the review
- If selected for a comprehensive review, begin pulling and preparing information right away

FY 2021-22 Desk Review Recap

PCG conducts the desk review after the district has certified their annual cost report

- Desk reviews help protect school districts from federal audits and potential pay-back situations by verifying accuracy of reported data outside expectations

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	1,539	-10
Salary With Zero Benefits	8	2	-6
Transportation Staff Benefits With Zero Salary	1	2	1
Transportation Staff Salary Threshold	190	657	467
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



FY 2021-22 Desk Review Edits

- Overall, the number of edits requiring district response increased from FY 2020-21 to FY 2021-22
- The top 3 increases for total edit counts from the prior year included:

1

Transportation
Staff Salary

2

Contracted
Costs

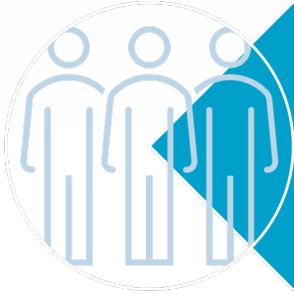
3

Year to Year
Transportation
All Other Costs

Increased edits were due to:

- Nationwide shortage of bus drivers
 - Increased pay to fill positions
- Districts were largely back to in-person learning

Desk Review Reminders



Review all data reported on each page of the annual cost report to confirm accuracy

- Thoroughly respond to all warnings/flags confidently



All costs reported should be 100% of the district's costs

- Include federal funds/non-allowable costs in the appropriate field to offset costs



All costs should be reported based off when the staff member was listed on the Staff Pool List (SPL)

- Reference the green job span bar in the PCG Claiming System to verify reasonability of reported costs

Comprehensive Review Common Findings

Standard 1a

Salaried and Contracted Staff

Finding: Over-reported salary and contracted staff costs

Tips:

- Costs are reported using the **accrual accounting method** (dates of service)

Standard 1e

Transportation Other Costs

Finding: Missing invoices/receipts to support each category of transportation other costs

Tips:

- Break out all costs by category
- Use system - generated reports

Standard 3

Quarterly Financials

Finding: Over-reported salary and contracted costs

Tips:

- Costs are reported using the **cash-basis method** (dates of payment)

Comprehensive Review Reminders

Annual/Quarterly Cost Reporting



Districts should retain all documentation as it is a program requirement

- This includes licensure, service logs, IEPs/other plans of care, attendance records, and receipts/invoices to support reported costs



Districts should understand and report all allowable costs including all pay and stipends associated with primary job function

- Reimbursement received from the SHS program is considered state/local funds
- Any general stipends/bonuses are considered allowable (i.e., COVID or retention stipends)



The SHS Program Fiscal Year runs from July 1 – June 30



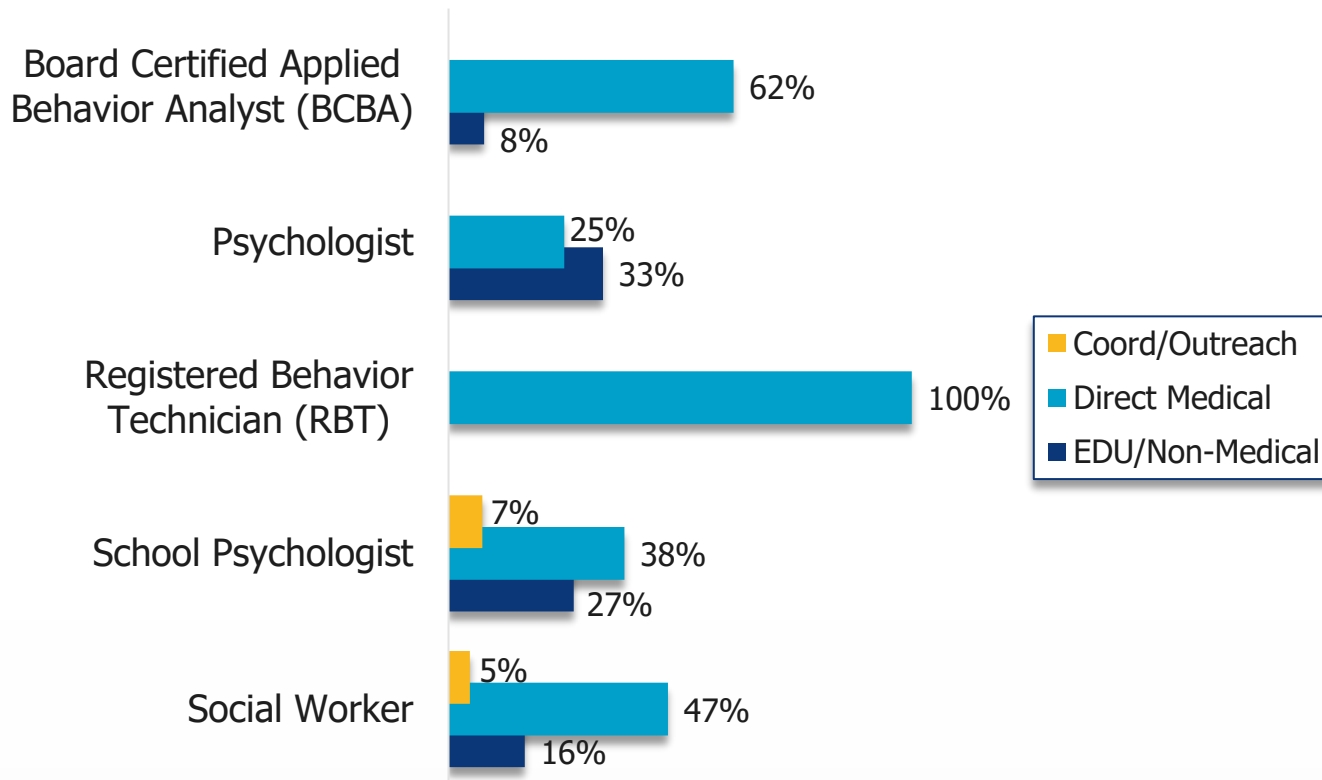
All financial documentation must include:

- Account codes for source funding
- Salaries and benefits broken out
- Unsubstantiated costs removed unless the district can provide supporting documentation to prove otherwise

RMTS

October – December (OD)2022 Preliminary Direct Service Behavioral Health Results

Behavioral Health Statewide Activities by Job Category



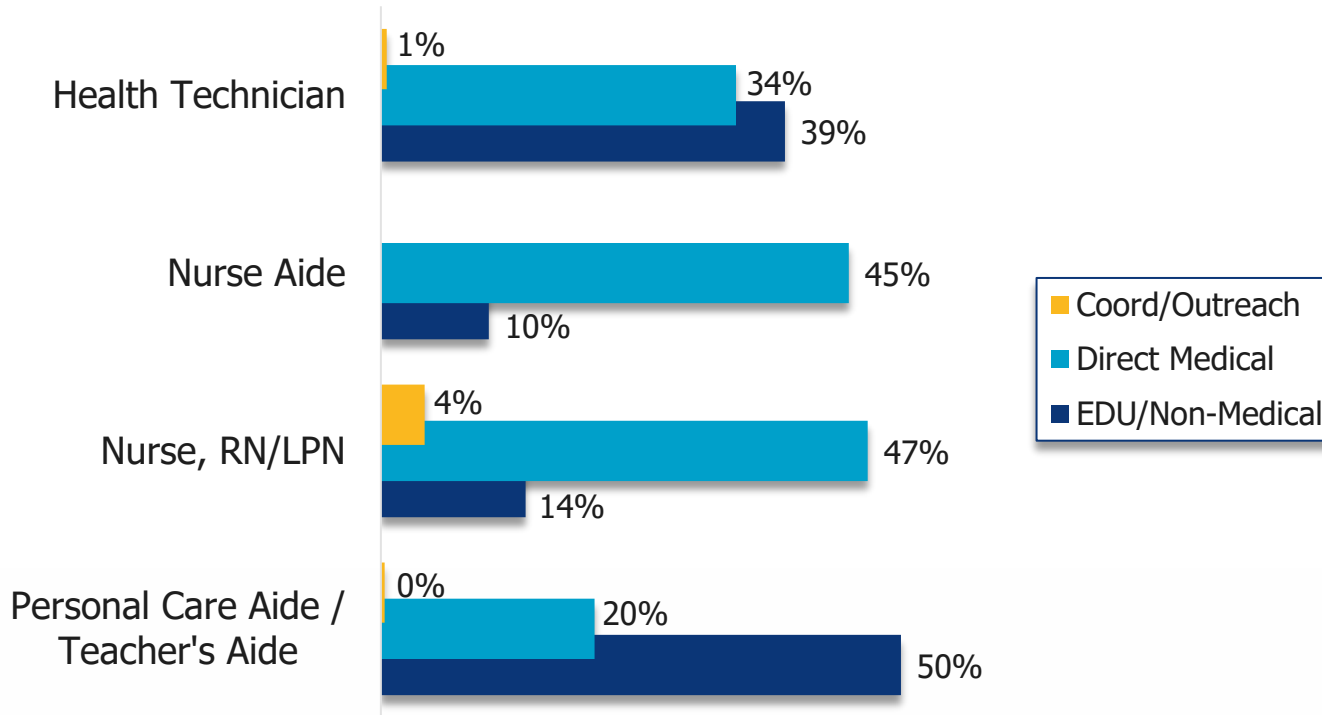
Distribution of Moments in the Cost Pool

1. Social Worker (**156, 5%**)
2. School Psychologist (137, **4%**)
3. RBT (1, **<1%**)
4. BCBA (13, **<1%**)
5. Psychologist (12, **<1%**)

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

OD22 Preliminary Direct Service High Volume Job Category Results

Nursing and Personal Care Statewide Activities by Job Category



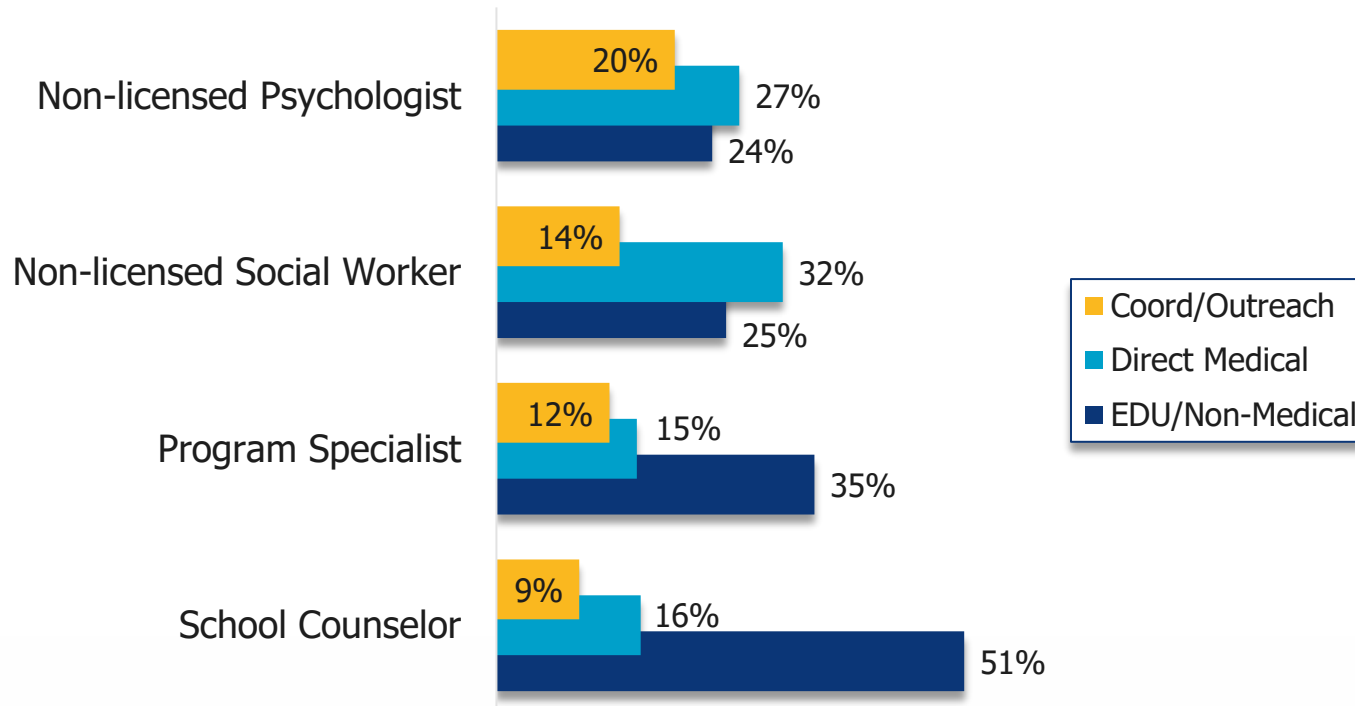
Distribution of Moments in the Cost Pool

1. Health Technician (1,100, **34%**)
2. Personal Care (842, **26%**)
3. Nurse LPN/RN (241, **8%**)
4. Nurse Aide (31, **1%**)

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

OD22 Preliminary Admin Personnel High Volume Job Category Results

High Volume Statewide Activities by Job Category



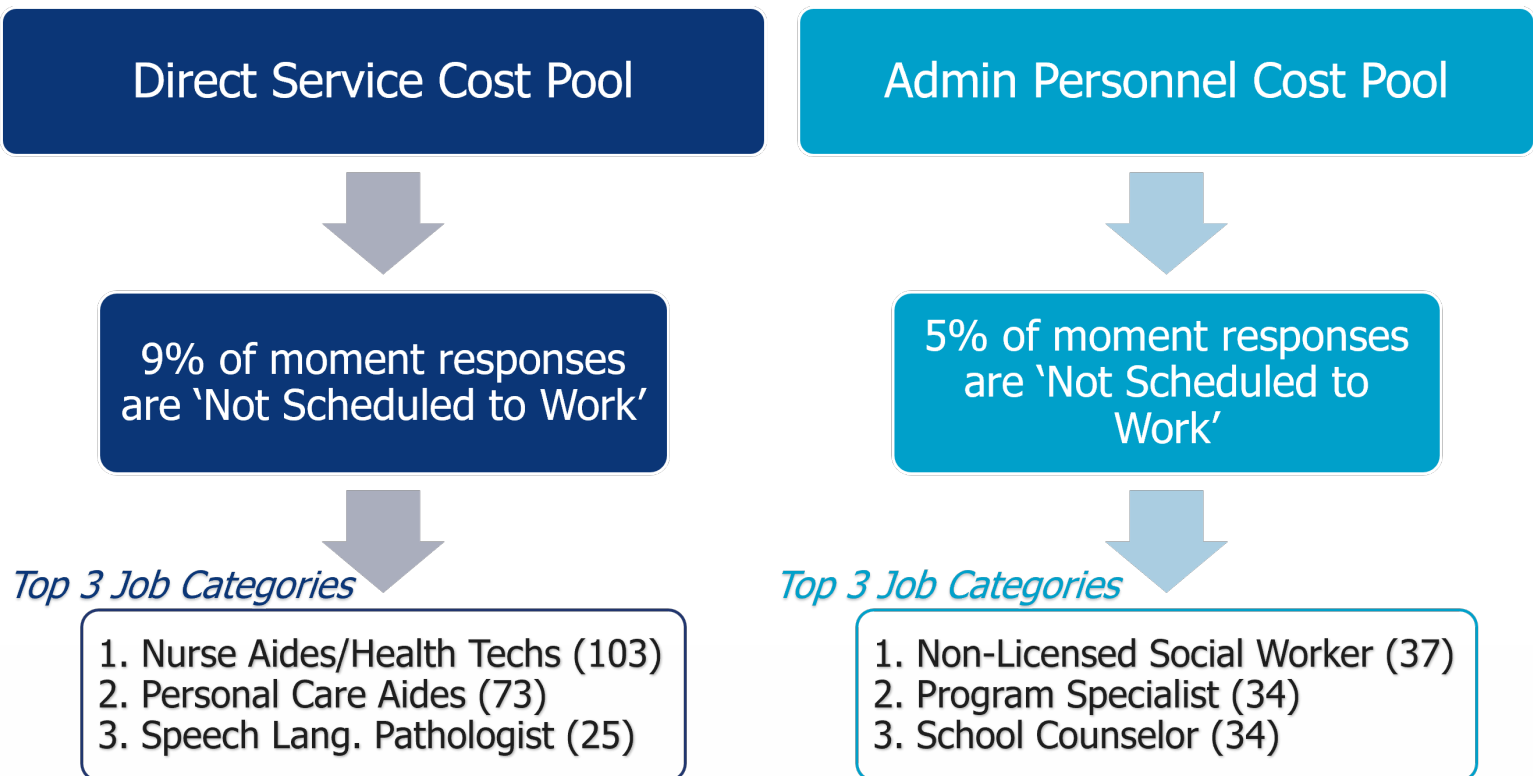
Distribution of Moments in the Cost Pool

1. School Counselor (705, **24%**)
2. NL Social Worker (556, **19%**)
3. Program Specialist (571, **19%**)
4. NL Psychologist (543, **18%**)

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

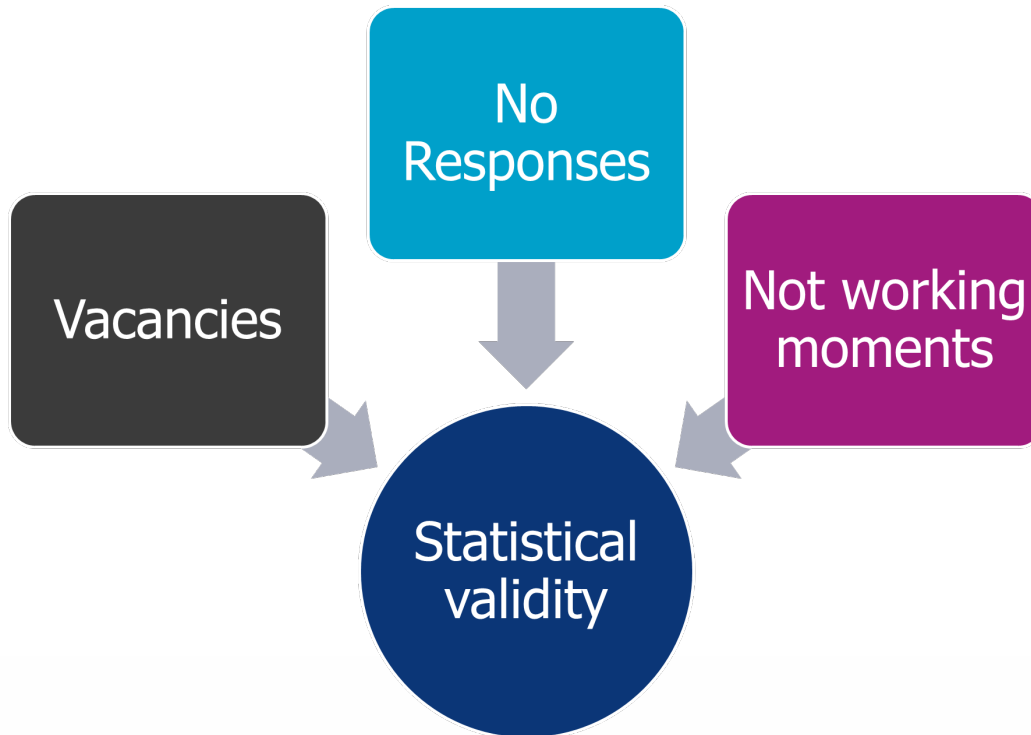
OD22 Preliminary RMTS Results by Cost Pool

Moments answered 'Not Scheduled to Work' can have a negative impact on the time study.



Meeting Statistical Validity

Meeting statistical validity is a statewide achievement. Each quarter 2,401 working moments must be received in each cost pool. The illustration depicts factors that do not contribute to meeting statistical validity:



What are some ways your district/BOCES can help manage the achievement of meeting statistical validity?

PCG RMTS Claiming System Feature Update

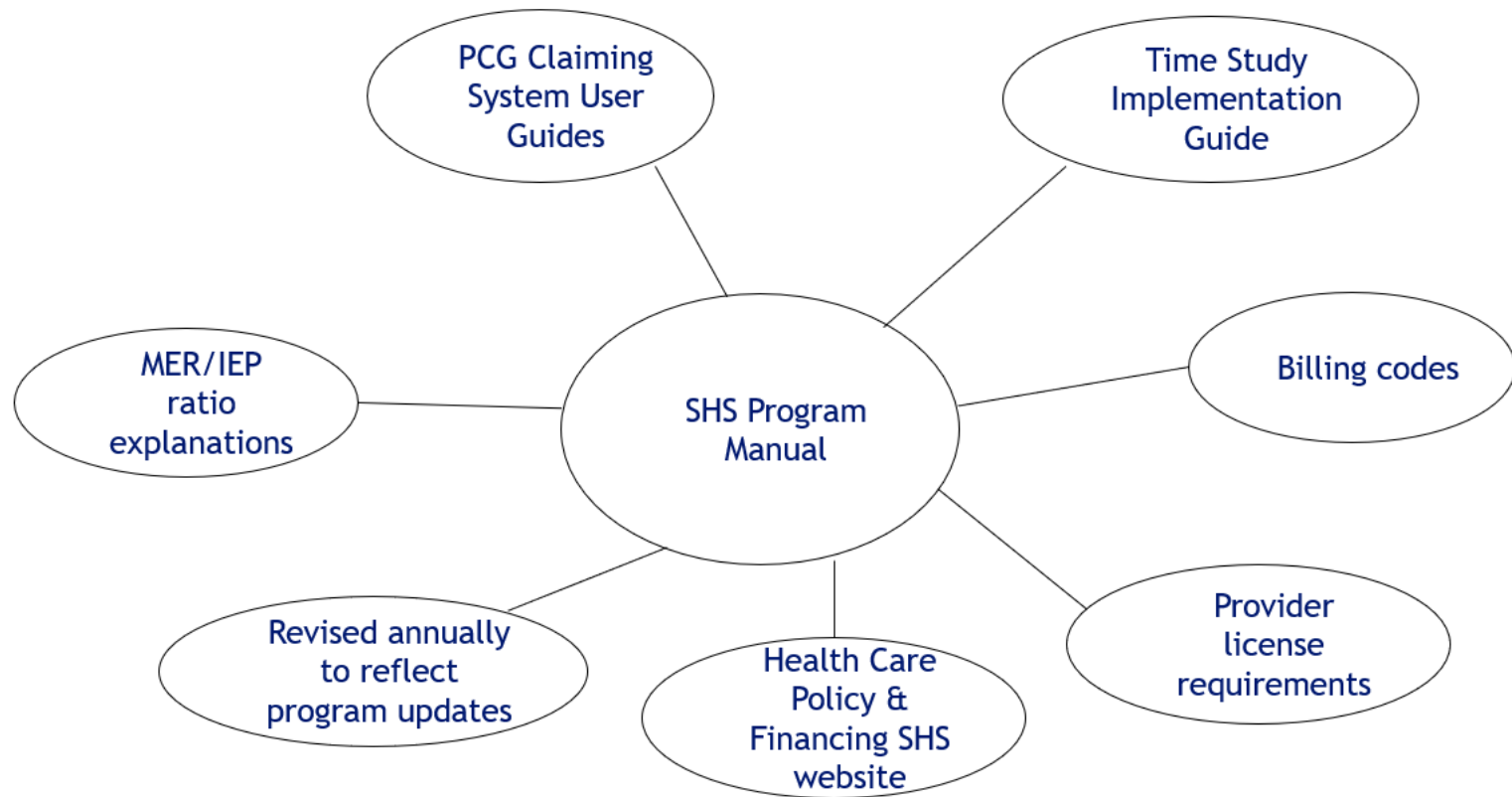
Starting in the January-March (JM) 2023 quarter, two system features will be improved to help streamline processes and minimize the administrative burden on districts/BOCES:

Program Focus	Previous Practice	Current Practice	Explanation
Moments	Follow-up moments did not contain the hyperlink to the moment prior to JM23	Follow-up moments include the hyperlink to the original moment in JM23	Coordinators no longer need to search for old moments to resend to participants when they are asked a follow-up question
Shifts	Follow-up with districts/BOCES on the utilization of non-traditional shifts was conducted via email after SPL certification prior to AJ23	Triggered system edits prompt districts/BOCES to re-review and edit shifts prior to certifying their SPL in AJ23	Most of the shift follow-up has been moved into the system via triggered edits

Mind Map Activity

Mind Map Example

Each group will be given a central theme to be placed in the center circle. The group should branch out to make as many program connections as possible for their theme.



Medicaid Administrative Claiming (MAC)

Allowable MAC Activities



Providing information to individuals / families regarding the SHS program and available medical services



Preparing and sharing information regarding medical and mental health related services



Assisting families in the Medicaid application process



Making referrals for coordinating/monitoring the delivery of health services



Participating in a parent meeting regarding health / medical / mental health services



Attending or conducting training for the purpose of improving their awareness, ability to identify, refer or assess students “at risk” of poor health outcomes

Entering Quarterly Cost Options

Districts have two options when entering their quarterly costs:

Option 1 Individually

Costs are entered for one participant at a time within the PCG Claiming System

This method is best used:

1. For a small number of participants
2. When entering costs for the first time

Option 2 Export/ Import

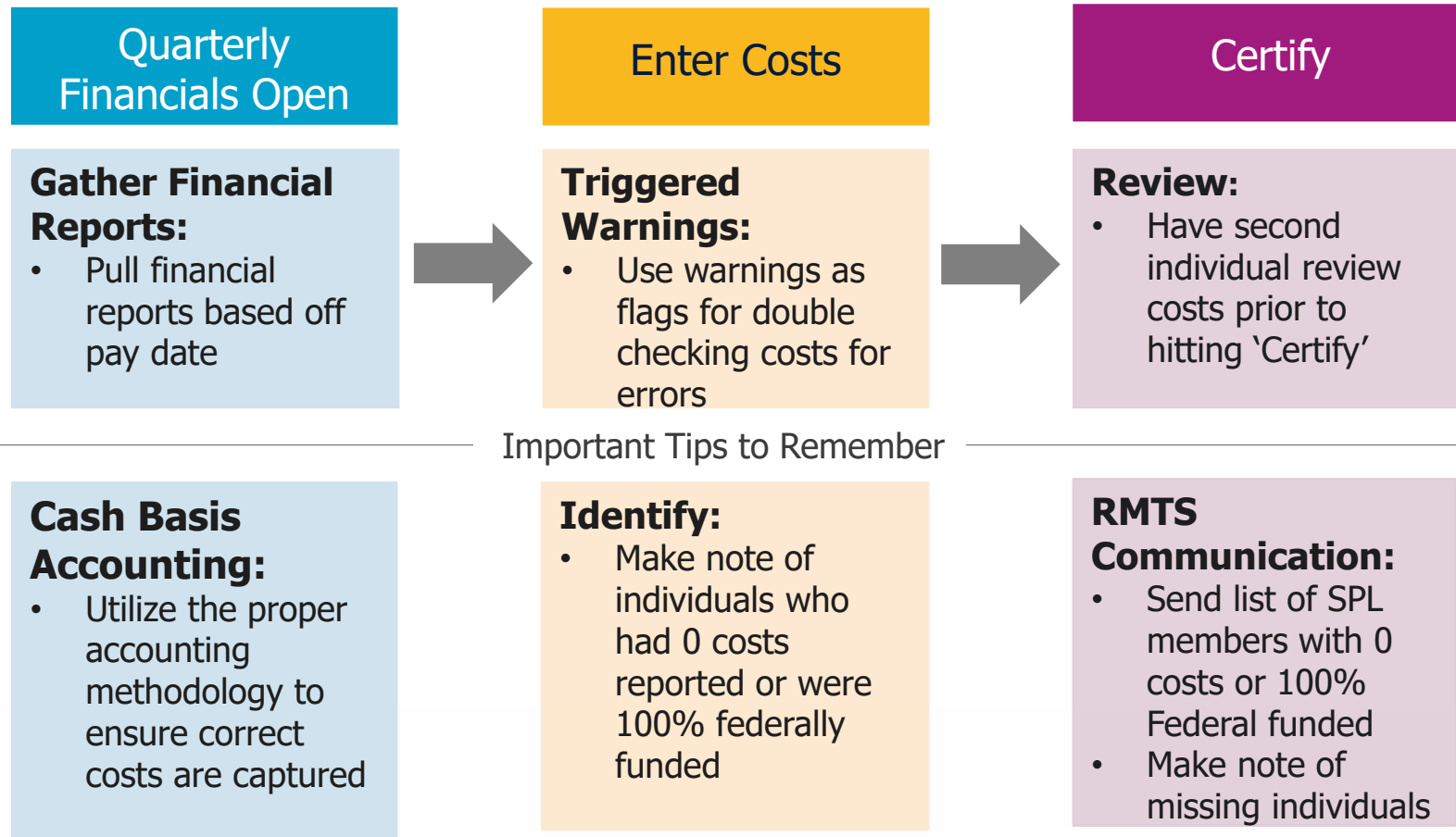
Exporting allows districts to view the quarter's SPL in an excel spreadsheet

Updates are:

1. Made on an Excel document offline
2. Imported back into the claiming system

Quarterly Cost Reporting Reminders

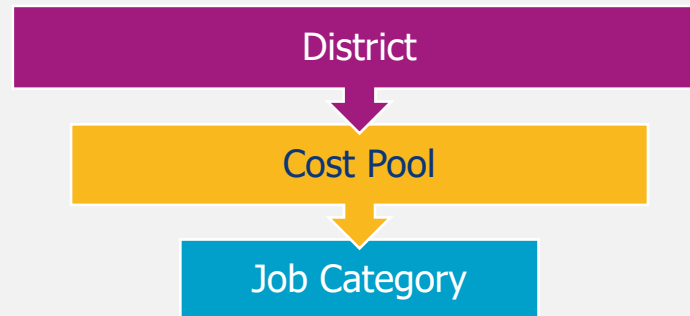
When taking the following actions, remember these important tips:



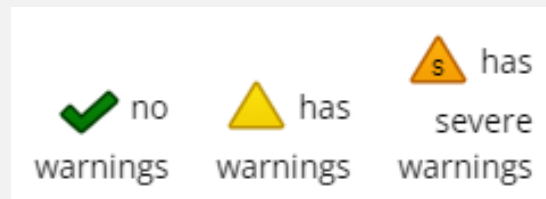
Thresholds

Warnings are triggered based on thresholds established by PCG:

- PCG calculates thresholds annually and drills down calculations:

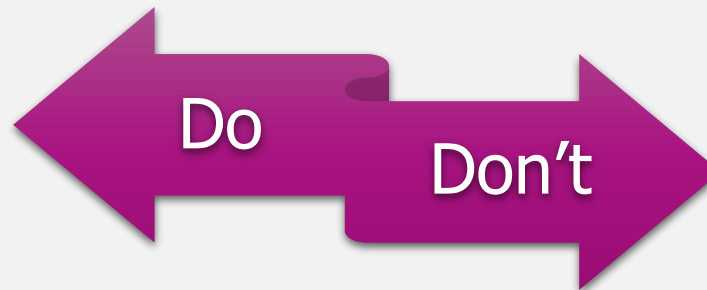


- Use Quarterly Summary to track triggered warnings



Resolving Warnings

When warnings are triggered use the paths below:



- ✓ Select the most appropriate explanation from the pre-populated drop-down menu
- ✓ Utilize the export/import feature to resolve edits quicker



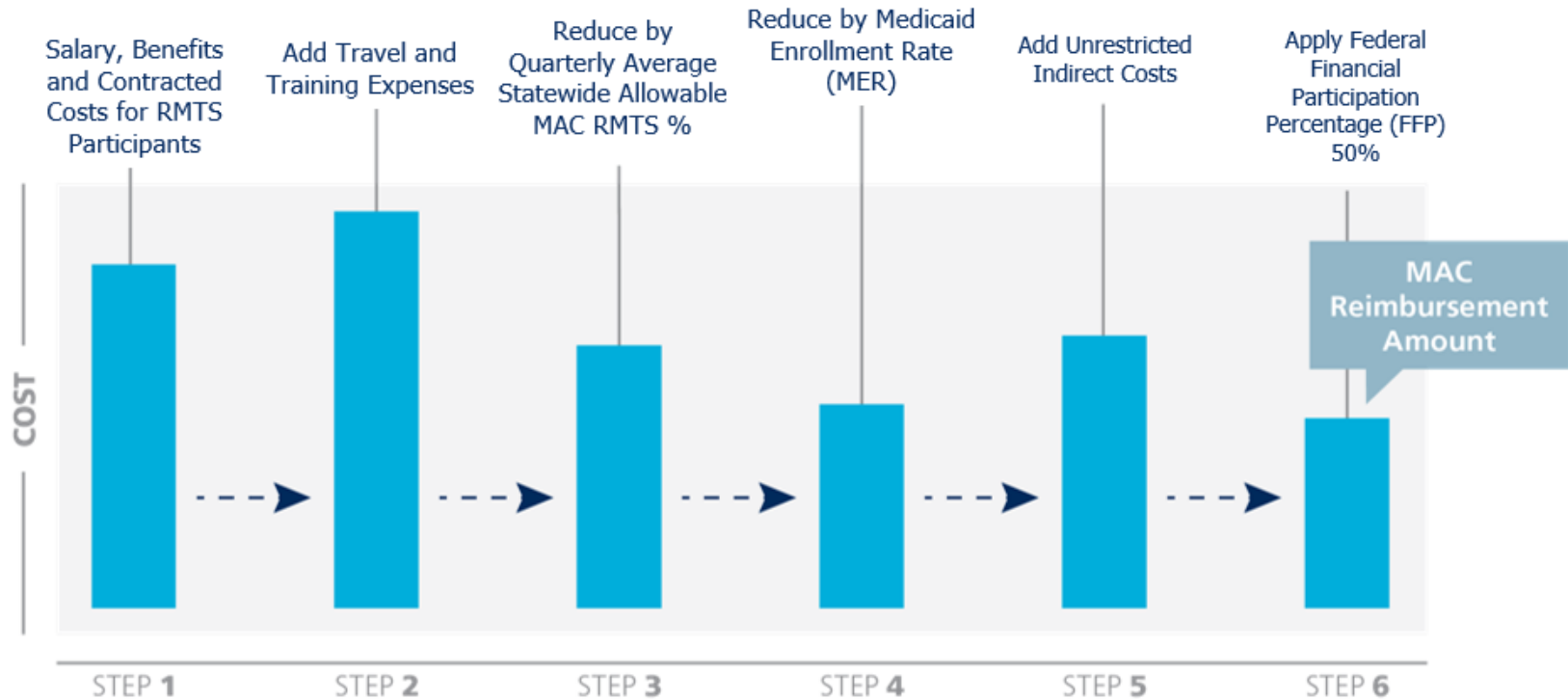
Select any explanation from the drop-down menu that may not address the triggered warning



Use the notes function instead of the drop-down menu

MAC Calculation

Districts/BOCES will complete steps one and two:



CPE Forms

CPE forms must be completed and submitted after the creation of every quarterly claim

- All expenditures must be assigned a source fund. This requires a confirmation that all expenditures do not contain federal funds:

Home People Quarterly Annual Configuration Reports About

Quarterly Funds

Add New Fund

Funds

Total Expenditures: \$75,343.75

Source	Amount	Delete
(0 Funds)		

After assigning a source for funds, the CPE form must...

1. Be printed off
2. Signed by a Chief Executive Officer (CEO), Chief Financial Officer (CFO), or superintendent
3. Be Uploaded to the PCG Claiming Site

Program Contacts

Program Resources



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



PCG Claiming System: claimingsystem.pcgus.com/com

- Free Care recorded Webinars
- Free Care FAQs
- User Guides
- Stakeholder information
- Program Manual
- Program Calendar
- Training schedule
- Newsletters
- Fact Page
- Annual Training PowerPoint Presentations
- Quarterly Refresher Trainings
- 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

PCG

Annual Help Desk

Email: cocostreport@pcgus.com

Phone: 866-317-0223

RMTS/MAC Help Desk

Email: cormts@pcgus.com

Phone: 866-766-9015



CDE

Omar Estrada

Email: Estrada_O@cde.state.co.us

Phone: 303-866-6455





Solutions that Matter