



LEA Medi-Cal Billing Option Program

September 29, 2020

1:00-2:30pm

Time Survey Participant (TSP) Training

TRAINING TO BEGIN AT 1:00PM



Introductions

California Department of Health Care Services (DHCS)

Administers the Local Educational Agency Medi-Cal Billing Option Program (LEA Program) and School-Based Medi-Cal Administrative Activities Program (SMAA Program)

Guidehouse (formerly Navigant Consulting)

Contractor to DHCS
Provides assistance to DHCS as a subject-matter expert



Agenda

Section	Topic
1	Overview of RMTS
2	Responding to Moments
3	Moment Response Examples



Training Goals

By the end of this training, participants will understand:

Basics of the **Random Moment Time Survey (RMTS)**
and How RMTS Will Impact LEAs

Responsibilities of a **Time Survey Participant (TSP)**

Why **TSP Participation** in RMTS is Important

What “**Clarifying Questions**” Are and How to Respond



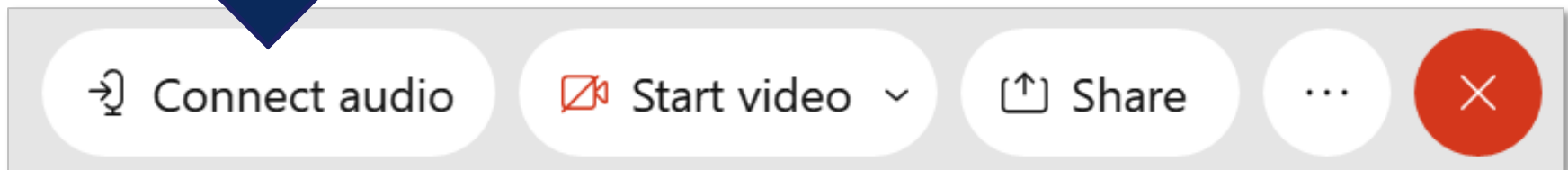
Housekeeping Items

- Questions
 - Submit via the **Q&A function** (not the chat function)
 - Time for Q&A at end of each section
 - An FAQ document will be compiled with questions submitted via the Q&A function and those sent to LEA@DHCS.CA.gov
- Training materials will be **distributed after the training**
- All stakeholders that have enrolled in the LEA Program email subscription service (the LEA Program listserv) will receive a copy of the training materials and FAQs
- LEA Program listserv:
<http://apps.dhcs.ca.gov/listssubscribe/default.aspx?list=DHCSLEA>



Webex Audio Help

- Connect to meeting audio:
 - Open the event from Webex rather than calling the Webex call-in number, and use the call-in options provided there
 - Select microphone icon at bottom of screen
 - Select the option for how you would like to connect





Chat, Feedback, and Q&A

The screenshot shows a Zoom meeting interface with the following sections:

- Participants:** Includes a search bar, a panelist named "Amarbir Ta... Host", and an attendee named "Amarbir Takhar Me".
- Chat:** A section for text-based communication.
- Q&A:** A section for questions and answers, showing "All (1)" and "My Q&A (1)".

A blue arrow points from the 'Participants' section to a feedback menu that includes the following options:

- ✓ Yes
- ✗ No
- Too Fast
- Too Slow
- Applause
- Laughter
- Check Feedback Result...

A navigation bar with three buttons: "Participants", "Chat", and a three-dot menu icon. A blue arrow points down to the "Participants" button.



Section 1

Overview of Random Moment Time Survey (RMTS)



California's School-Based Medi-Cal Programs

1

School-Based Medi-Cal Administrative Activities (SMAA) Program:

- The SMAA Program is a Federal program that reimburses LEAs for providing **administrative and outreach** activities (*i.e., Outreach and referral, arranging non-emergency/non-medical transportation, MAA claims coordination*)

2

Local Educational Agency Medi-Cal Billing Option Program (LEA Program):

- The LEA Program is a Federal program that reimburses LEAs for providing **direct health services** to Medi-Cal students (*i.e., Speech therapy, occupational therapy, nursing, psychological services*)



What is the RMTS?



The RMTS is a time study mechanism that California uses to determine **the amount of time spent** on activities throughout a participant's workday.



Random moment = **one minute of work** done by a **Time Survey Participant (TSP)**. Moments are randomly assigned on a quarterly basis.

As of SFY 2020-21, **both** school-based programs are incorporated into one RMTS.

****RMTS webpage contains additional resources****

<https://www.dhcs.ca.gov/provgovpart/Pages/School-Based-RMTS.aspx>



Types of TSPs

TSPs are classified by the LEA Coordinator as either:

- **Pool 1 participants:** direct health service practitioners that are qualified to bill under the LEA Program

Example: A school nurse that provides direct health services to students

- **Pool 2 participants:** administrative claiming staff that will not bill direct medical services

Example: A case manager that links families to health insurance or refers and coordinates health, dental or mental health services



Pool 1 (Direct Service) – Approved Participants

- Certified Nurse Practitioners
- Certified Public Health Nurses
- Credentialed Audiologists
- Credentialed School Counselors
- Credentialed School Psychologists
- Credentialed School Social Workers
- Credentialed SLPs
- Licensed Audiologists
- Licensed Clinical Social Workers
- Licensed Educational Psychologists
- Licensed Marriage and Family Therapists
- Licensed Occupational Therapists
- Licensed Optometrists
- Licensed Physical Therapists
- Licensed Physicians
- Licensed Physician Assistants*
- Licensed Psychiatrists
- Licensed Registered Nurses
- Licensed Respiratory Care Practitioners
- Licensed SLPs
- Licensed Vocational Nurses
- Occupational Therapy Assistants*
- Orientation and Mobility Specialists*
- Physical Therapist Assistants*
- Program Specialists
- Registered Associate Clinical Social Workers*
- Registered Credentialed School Nurses
- Registered Dietitians*
- Associate Marriage and Family Therapists*
- Registered School Audiometrists
- Speech-Language Pathology Assistants*
- Trained Health Care Aides

* Denotes a recently approved LEA Program practitioner in State Plan 15-021



Pool 2 (Administrative) – Approved Participants

- Community Liaison
- Coordinator, various selected positions (i.e., Medical, Mental Health, Speech, Nursing, etc.)
- Direct health service practitioners (Pool 1) that are unqualified to bill under the LEA Program reimbursement rules (i.e., a practitioner that requires supervision to bill under LEA Program but the LEA does not have a supervisor to oversee the services, etc.)
- Direct health service practitioners (Pool 1) that are not providing direct billable health services (i.e., a practitioner that is in a supervisory role)
- Director/Administrator - various selected positions (i.e., Mental Health, Speech, Nursing, etc.)
- Education/Instructional Aides
- Family Resource Center Staff (i.e., manager, secretary, office manager, clerk, assistant, director, coordinator, etc.)
- Health Care Assistant/Advocate
- Health Center Staff (i.e., manager, secretary, office manager, clerk, assistant, director, coordinator, etc.)
- Health Technicians/Specialist
- Interpreters/Interpreter Assistants
- Medical Administrative Coordinator/Assistant
- Medical Assistant
- Medical Interns
- Office Clerical Staff (i.e., technician, secretary, office manager, clerk, assistant, etc.)
- Organization Facilitator
- Parent Community Facilitator/Liaison
- Principal and/or Assistant Principal
- Pupil Support Services Administrators
- Pupil Support – Technicians
- School Bilingual Assistants
- Special Education Administrators
- Special Education Support Technician/Assistant
- Student Support Services Coordinator
- Teacher- various selected positions (i.e., special ed, alternative ed, resource, SDC)
- Translator; Senior Translator
- Transportation Planner / Router
- Other groups/individuals that may be approved by DHCS



Why is RMTS Important?

- **Responses to moments are coded** into one of several pre-determined categories
- RMTS results from certain categories are used to **allocate costs for school-based reimbursement**
- It is **VERY** important to complete your moment within four-student attendance days, or it becomes **invalid**
- LEAs must have an 85% accuracy in *moment* completion to be eligible to participate in the school-based programs



QUESTIONS – SECTION 1

*While DHCS is compiling questions submitted via the Q&A function, a **practice session** will be initiated.*

You will not hear anything while DHCS is in the practice session. Please remain on the call and DHCS will return shortly to answer questions.

Any additional questions can be submitted to the LEA Program inbox:

LEA@DHCS.CA.gov



Section 2

Responding to Moments



How Do TSPs Participate in RMTS?

If you are selected to participate, you will receive notification via email **one day in advance.**



A direct link to the **secure RMTS website** will be provided in the e-mail notification along with the **date/time of your moment.**



Example email subject line: ***You have a moment on 11/6/2020 at 9:16 a.m.***

After the assigned time has passed, you must submit your time survey response within four student attendance days!

Note: TSPs may have no moments or multiple moments assigned in a quarter



What Will I Be Asked in the Time Survey?

1. Pre-Sample Question:

“Were you working at the time of your moment?”

- *Yes, I was working.*
- *No, I was on paid time off.*
- *No, I was on unpaid time off.*
- *No, moment was before/after work day.*
- *No, I was on a paid lunch or break.*
- *No, I was on an unpaid lunch.*

If you respond “No,” additional questions will not be asked, and the time survey can be submitted.

If you respond “Yes, I was working,” you will need to respond to the following additional questions.



What Will I Be Asked in the Time Survey? (Cont'd)

2. For Pool 1 Practitioners Only:

“Was this activity being performed related to a student assessment, as defined in the LEA Provider Manual, or pursuant to a service listed on a student’s IEP, IFSP, or ‘Care Plan’?”

- *Yes*
- *No*
- *Not Sure*

A **‘Care Plan’** may be a 504 Plan, Nursing Plan, Health Plan, or other plan prescribing medically necessary services.



Care Plan Question - “Yes” vs. “No”

- **Examples of ‘yes’ response**

- Conducting or scoring an assessment
- Writing a report following an assessment
- Conducting a screening test
- Interviewing a parent or reviewing student records to prepare for an upcoming assessment
- Completing treatment notes related to a service listed in a student’s IEP
- Traveling to provide a treatment service to an IEP student
- Preparing for a procedure

- **Examples of ‘no’ response**

- Providing first aid to a student
- Waiting with a sick student for parent pick-up
- Checking supply inventory
- Filing paperwork for a group of students



What Will I Be Asked in the Time Survey? (Cont'd)

3. The “Who”:

“Who were you with?”

Use **categories**, not actual names.

For example:

“My student”

...or Parent, Social Worker, Occupational Therapist, Speech Language Pathologist, Teacher, Health Aide, etc.

If no one was with you, respond saying **you were alone.**



What Will I Be Asked in the Time Survey? (Cont'd)

4. The “What”:

“What were you doing?”

Be **specific**, **detailed**, and **precise** for the one-minute moment.

For example:

Trained Health Care Aide – assisting a student with eating

Physical Therapist – performing an evaluation

Occupational Therapist – in a therapy session with a student working on fine motor skills

Speech Therapist – working with a student on fluency goals



What Will I Be Asked in the Time Survey? (Cont'd)

5. The “Why”:

“Why were you performing this activity?”

Be **specific** and make it **clear** to an outside reviewer the purpose of your activity at that moment.

Do **NOT** respond with “Part of my general job duties.”

For example:

- Because the student has an **upcoming IEP meeting** that requires an evaluation
- Because **the student’s IEP includes speech therapy services**



Clarifying Questions

Clarifying Questions (CQs)

If a TSP **does not provide sufficient information**, they may receive a CQ requesting more information.

Example: What was the basis of the discussion at this moment?

TSPs have **five student attendance days** to respond to a CQ

If a TSP does not respond to the CQ, **only the information provided in the original response** will be available

Email subject line will include ***“Request for Follow-Up”***



Will I Need Supporting Documentation for my Moment Response?

If you were providing a direct health service at the time of your moment, you must be able to support your response, in event of a Federal or State audit of direct service activities



Documentation to substantiate the moment may include items such as **progress notes and treatment logs**.



Consider documentation requirements similar to what you'd need to produce for a **fair hearing process or litigation**.



If you have questions about these documentation requirements, contact your **LEA Coordinator**.



TSP Reminders

TSPs have **four student attendance days** to complete their RMTS moment

Non-responses will have a **negative fiscal impact** on your LEA



Avoid using acronyms, abbreviations, or names in your RMTS response

If you are unable to access your e-mail, please **notify your LEA RMTS Coordinator** as soon as possible



Additional Helpful Tips

- RMTS corresponds to **one minute** – be specific! Do not be concerned with what you were doing before or after the one assigned minute.
- Consider setting a **calendar alert** for the time of your moment so that you are aware when your moment is happening and can jot down notes regarding what you are doing.
- Be descriptive, but do not include **student-specific information**.
- **Complete your moment as soon as possible** after the minute has passed



Frequently Asked Questions

Question #1: What if I did not respond to my moment within four student attendance days?

- **Answer:** If the moment is not answered within four student attendance days, the moment expires and **CANNOT** be answered.

Question #2: What if I delete my email with the moment link?

- **Answer:** In addition to the four-student attendance day notice, you will receive a notice one hour prior to your moment that will also contain the moment link. You may also contact your LEA Coordinator to have the email containing the hyperlink resent to you.



Frequently Asked Questions (Cont'd)

Question #3: What if I cannot remember what I was doing?

- **Answer:** Use your best judgement to recall what you were doing. Review your calendar, meeting and/or service notes. If you absolutely cannot remember, simply record that you cannot remember the activity that you were completing at the time of your moment. In the future, take a mental note and/or jot down what you are doing during your assigned minute so that an accurate response may be captured.

Question #4: What if I am assigned to a student but they are not in school?

- **Answer:** Answer the moment indicating what you **are** doing at the time of your assigned moment (do not worry about what you are not doing).



Frequently Asked Questions (Cont'd)

Question #5: What if I am out sick, on vacation, or on leave during a moment?

- **Answer:** Indicate that you weren't working at the time of your moment.

Question #6: What if I am traveling at the time of my random moment?

- **Answer:** If you were traveling to/from work, a therapy session, or other meetings, please provide the specific purpose of your travel.

Question #7: What if I have an email or name change?

- **Answer:** Contact your LEA Coordinator as soon as possible to have them update your information in the RMTS system.



Additional Resources

School Based Claiming RMTS Webpage:

School Based Claiming Random Moment Time Survey

[Back to LEA BOP Home Page](#)
[Back to SMAA Home Page](#)

As of July 1, 2020, the Department of Health Care Services will use the Random Moment Time Survey (RMTS) methodology for both California School-Based Medi-Cal Programs: the Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) and the School-Based Medi-Cal Administrative Activities program (SMAA). The RMTS is a federally approved, web-based, and accepted statistical sampling method that will be used to capture the amount of time spent providing both administrative activities and direct services to Medi-Cal enrolled students.

This webpage contains information and resources to assist LEAs with the administration of RMTS for both school-based programs. For specific program information relating to either the LEA BOP or SMAA Program, please visit their respective websites listed at the top of the page.

RMTS Manual and Policy

- 2020 California RMTS Manual (under review)
- 2019 SMAA Manual - RMTS Sections:
 - [Section 5](#) - Activity Codes: Descriptions and Examples
 - [Section 6](#) - Time Survey
- [School-Based RMTS Index of Policy and Procedure Letters](#)

Required Forms

[TSP Equivalency Request](#)
[TSP Equivalency Request Practitioner Reference Sheet](#)

The TCM Certification document are currently under review with an anticipated posting date of September 1, 2020.

Resources

[RMTS Fact Sheet](#)
[RMTS Quick Reference](#)

The RMTS TSP Steps and RMTS Regional Contact documents are currently under review with an anticipated posting date of September 1, 2020.
[RMTS Quarterly Results](#)

Trainings

2020 Training are upcoming. This section will be updated by September 1, 2020.

Additional questions can be sent to the RMTS Inbox at RMTS@DHCS.CA.gov



QUESTIONS – SECTION 2

*While DHCS is compiling questions submitted via the Q&A function, a **practice session** will be initiated.*

Any additional questions can be submitted to the LEA Program inbox:

LEA@DHCS.CA.gov



Section 3

Moment Response

Examples



Moment Response #1

Question	Initial Response	Improved Response
Who were you with?	I was by myself in my office.	I was by myself in my office.
What were you doing?	Answering a phone call.	Answering phone call from a parent and providing her with the phone number and hours of a community clinic in her neighborhood.
Why were you doing this activity?	Parent had a question.	The parent had a question about where she could get her children immunized.



Moment Response #2

Question	Initial Response	Improved Response
Who were you with?	The resource specialist teacher, speech therapist, a parent, and 4th grade teacher.	The resource specialist teacher, speech therapist, a parent, and 4th grade teacher.
What were you doing?	We were holding a meeting for an annual review of an IEP for a 4th grade student.	We were holding a meeting for an annual review of an IEP for a 4th grade student. The speech therapist was reporting on the student's progress since the beginning of therapy.
Why were you doing this activity?	Participating in an IEP meeting is one of my duties	We are trying to determine whether the student may need less speech therapy next year due to progress she has made.



Moment Response #3

Question	Initial Response	Improved Response
Who were you with?	On the phone with a guardian	On the phone with a guardian
What were you doing?	Referring her to our family resource center.	Referring a guardian to our family resource center, as she is looking for mental health services for her 16 year old niece who lives with her.
Why were you doing this activity?	To meet her needs.	She is concerned about her niece's behavior—she cries all the time and won't eat.



Moment Response #4

Question	Initial Response	Improved Response
Who were you with?	By myself.	By myself.
What were you doing?	Reviewing an IEP for a newly enrolled student arriving from out of state to identify special education services he needs.	Reviewing an IEP for newly enrolled student arriving from out of state. Reading progress report from sending district on mental health services.
Why were you doing this activity?	To ensure IEP services are arranged and provided on student's first day of school.	To determine whether our school psychologist may (or will) need to arrange for more intensive mental health services through our community mental health partner.



Moment Response #5

Question	Initial Response	Improved Response
Who were you with?	With a student	With a student
What were you doing?	Waiting	Waiting with the student until she was picked up by a parent
Why were you doing this activity?	She couldn't be alone	The student was sick and needed support



QUESTIONS – SECTION 3 and GENERAL QUESTIONS

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a **practice session** will be initiated.*

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to the LEA Program inbox:
LEA@DHCS.CA.gov**