



MTS In the Know - Week of 10/28/24

New Resources Alert

How to Answer RMTS

Sampled moments need to be documented by school staff as a part of the State's time study methodology. This job aid is intended for Local Educational Agency (LEA) staff to understand the basic requirements of a time study, how school staff are notified of their participation, and best practices for documenting a moment.

Understanding Random Moment Time Study (RMTS)

What is a Time Study?

- A time study is a way to observe and measure how staff members' time is allocated across a range of activities. An RMTS is a type of time study methodology.
- An RMTS uses a statistically valid number of sampled moments to determine how much time eligible school staff spend performing Medicaid-eligible work activities that achieve specified statistical criteria for validity.

For recorded cost methodologies, a time study is used to identify what proportion of direct services and/or administrative costs are allowable and attributable to Medicaid beneficiaries as allowable activities or reimbursable costs, and therefore are reimbursable. Within the special cost identification process, the application of the time study subjects to Step 1 of the allocating allowable costs to Medicaid.

Step 1 Use of the time study percentage to estimate the portion of practitioners/employees' salaries to allocate to Medicaid activities.

Step 2 Use of the Medicaid Enrollment Ratio (MER) to determine the portion of practitioners/employees' salary applicable to allowable Medicaid activities (Step 2 criteria applicable to Medicaid. Allowable activities not subject to the MER specifically include out-of-state and including eligibility.

*Index of the steps process to allocate costs. Some may conduct a time study solely to calculate the per capita Medicaid allowable-eligible services and/or administrative activities. The RMTS activity codes are the structure to the time study subject to Step 1 of the delivery of Medicaid-allowable activities and allowed Medicaid direct costs.

Requirements

The RMTS methodology is approved by the Centers for Medicare & Medicaid Services (CMS) within a Time Study Implementation Plan and/or Public Assistance Cost Allocation Plan. A State is using Certified Public Expenditures for its Medicaid claims and therefore claims for costs incurred, and uses the RMTS to allocate costs to school districts that participate in any component of the Medicaid School-Based Services (SBS) Program should participate in the RMTS. School personnel who perform Medicaid direct services or administrative activities should be included on the RMTS Participants list(s).

RMTS participants should include all school personnel who provide direct services to children or provide administrative activities related to Medicaid, such as the following:

- Physical Therapists
- Occupational Therapists
- Nursing services
- Mental health services
- Speech Language Pathologists

From this list, individuals are randomly selected to participate in the RMTS and document the work they completed during a specific, randomly selected moment of time.

A moment is a single 15-second period (1 minute in a particular day) during which the participant needs to document what they are doing and answer questions about their activities.

ECONOMETRICA, INC.

How to Answer RMTS

This fact sheet is intended for Local Educational Agency (LEA) staff to understand the basic requirements of a time study, how school staff are notified of their participation, and best practices for documenting a moment in Random Moment Time Studies (RMTS).

CHILD NAME _____ SCHOOL YEAR _____
 LEA _____ SERVICES MANDATED _____
 SUPERVISING Clinician _____ Coordinates _____

I will keep the appropriate records documenting that the supervision services have occurred (i.e. telephone logs, minutes of meetings, minutes of observations, initial and subsequent periods face to face contacts with each student).

Meeting Date	Type of Contact	Treatment plan and services to be delivered	Issues identified, if any, and actions to be taken	Date of next review session	Signature of supervising clinician	Date of Signature
	Face to face <input type="checkbox"/>				X	
	Observation <input type="checkbox"/>				X	
	Telephone call <input type="checkbox"/>				X	

30 Day Review Template (Fillable)

The UNH Institute for Health Policy and Practice has drafted a 30 day review template for use by schools. This template is **not** required.

Understanding COST POOLS

The guide will assist local educational agencies (LEAs) in promoting their understanding of cost pools. It is essential to review and understand your state's specific guidance regarding time studies and cost pools, however.

Many states claim the costs of Medicaid services to the federal Medicaid agency, CMS, to partially recover those costs. In order to ensure accurate claiming to Medicaid, certain accounting principles are applied when determining the appropriate amount to claim. School-Based Services (SBS) costs for direct medical and administrative costs should be identified in cost pools and allocated to Medicaid. Cost pools are found in the state-specific claiming guidance based on a state's claiming methodology for federal reimbursement of Medicaid SBS.

What Are Cost Pools?

A state must develop a cost pool identification and allocation methodology, as detailed through a cost report and associated instructions that meets regulatory requirements. The cost report must accurately identify, classify and allocate 100 percent of the direct and indirect costs associated with the provision of Medicaid-covered SBS.

As part of the cost identification process for Medicaid SBS direct service and administrative costs, each entity billing Medicaid (e.g., an LEA or school district) must clearly define the cost pools from which amounts attributable to Medicaid will be identified and claimed for reimbursement. Time studies often have multiple cost pools to account for different types of staff (e.g., direct medical staff and administrative activities staff). The same costs should not be included in multiple cost pools.

In general, cost pools are a list of qualified provider types and other medical costs directly associated with providing Medicaid-covered services that, once properly allocated, may be claimed for Medicaid reimbursement.

More specifically, the term "cost pool" may mean different things to state Medicaid agencies (SMAs) and LEAs:

SMA: For SMAs, cost pools consist of a list of qualified provider types and costs associated with those provider types, which may include salaries, benefits, and other personnel costs.

LEA: For LEAs, the term "cost pool" refers to the specific individuals and other medical costs within a group of clinicians or job categories who need to participate in a time study so that the associated costs can be claimable.

Cost pools are used to group alike providers with similar job functions or duties. Some states may have a pool for physical therapy only, or they may have a pool that combines physical therapy, speech language pathology, and occupational therapy together. Once the cost pools for the different provider types and services are clarified, time studies will determine a percentage of time spent on allowable Medicaid activities for each cost pool in order to properly claim the amount of time that each activity spends on Medicaid services or administrative activities.

* 45 C.F.R. Part 163.500 - 45 C.F.R. Part 163.505, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for State Fiscal Year 2025; 45 C.F.R. Part 431.400 - 45 C.F.R. Part 431.410, Claims to States for Medical Assistance Programs; 45 C.F.R. Part 455.400 - 45 C.F.R. Part 455.410, Payments to Services

Understanding Cost Pools

This guide will assist local educational agencies (LEAs) in promoting their understanding of cost pools.

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