

### **MAC TIME STUDY CODES**

Listed below are 11 codes to be used when performing time studies.

- CODE A Medicaid Outreach - **TM**
- CODE B Outreach Non-Medicaid – **U**
- CODE C Facilitating Medicaid Eligibility Determination - **TM**
- CODE D Facilitating Non-Medicaid Eligibility Determinations - **U**
- CODE E Referral and Coordination of Medicaid Services - **PM**
- CODE F Referral and Coordination of Non-Medicaid Services - **U**
- CODE G Medicaid Transportation\Translation\Interpreting - **PM**
- CODE H Non-Medicaid Transportation\Translation\Interpreting - **U**
- CODE I Direct Medical Services - **U**
- CODE J Non-Medicaid, Other Educational and Social Services - **U**
- CODE K General Administration - **R**

Codes are also accompanied by a Status Code. Listed below are the status codes with definitions:

**U** - Unallowable activities. Refers to an activity which is unallowable as administrative claiming under the Medicaid program. This is regardless of whether or not the population served included Medicaid eligible individuals.

**TM** - Total Medicaid. Refers to an activity which is 100 percent allowable as administrative claiming under the Medicaid program.

**PM** - Proportional Medicaid. Refers to an activity which is allowable as administrative claiming activity but for which the allowable share of costs must be determined by the application of the proportional Medicaid share. The Medicaid share is determined by multiplying the Medicaid eligibility percentage by the provider participation rate.

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**R** – Reallocated activities. Refers to those general administrative activities performed by time study participants which must be reallocated across the other activity codes on a pro rata basis. The reallocated activities are reported under Code K, General Administration. Note that certain functions, such as payroll, maintaining inventories, developing budgets, executive direction, etc., are considered overhead and, therefore, are only allowable through the application of an approved indirect cost rate.

All activities that are Medicaid related are to be handled within the framework of the Medicaid system, including CommunityCARE and KIDMED. This means that recipients enrolled in these programs should be referred to their Primary Care Physician when appropriate. Follow-up care and coordination will then become the responsibility of the PCP. If a recipient has Case Management, referrals must be made to the case manager and follow-up care coordination shall be performed by that individual. Many of these services duplicate the duties of the PCP, however, DHH and CMS recognize that schools have unique access to children and an enhanced opportunity to identify suspected conditions and make referrals for follow-up treatment.

**CODE A Medicaid Outreach - TM**

This code should be used by school district employees when performing activities which inform eligible and potentially eligible individuals about Medicaid and how to access it. Include related paperwork, clerical activities or staff travel required to perform these services. Report under this code only that portion of time spent on these activities, which specifically address Medicaid outreach. **LEAs may only conduct outreach for the population served by their school districts, i.e., students and their parents or guardians.**

Examples of activities reported under this code:

- Providing information to students and families on available Medicaid services and how to access them, including Medicaid, KIDMED or CommunityCARE,
- Notifying families of EPSDT Health Service and KIDMED initiatives, such as screenings conducted at a school site,
- Providing information on the parish's KIDMED program if they are a participating provider, or
- Handing out KIDMED and LaCHIP brochures.

**CODE B Outreach Non-Medicaid - U**

School district employees should use this code when performing activities that inform eligible or potentially eligible individuals about non-Medicaid programs (including special education

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services) and how to access them. This code should be used when describing the range of benefits covered under the non-Medicaid programs. Both written and oral methods may be used. Include related paperwork, clerical activities or staff travel required to perform these services.

Examples of activities reported under this code:

- Scheduling and promoting activities which educate individuals about the benefits of healthy lifestyles and practices,
- Conducting general health education programs or campaigns addressed to the general population,
- Conducting outreach programs directed toward encouraging persons to access social, educational, legal or other services not covered by Medicaid,
- Assisting in early identification of children with special medical/mental health needs through various CHILD SEARCH activities, or
- Any outreach activities in support of programs which are 100% funded by State general revenue.

**CODE C Facilitating Medicaid Eligibility Determination - TM**

School district employees should use this code when assisting an individual in becoming eligible for Medicaid. Include related paperwork, clerical activities or staff travel required to perform these services. Using Medicaid eligibility status to determine eligibility for non-Medicaid programs is not allowed under this activity code. This also does not include the actual determination of Medicaid eligibility. **LEAs may only conduct outreach for the population served by their school districts, i.e., students and their parents or guardians.**

Examples of activities reported under this code:

- Assisting an applicant to fill out a Medicaid eligibility application,
- Assisting individuals to provide third party resource information at Medicaid eligibility intake,
- Verifying an individual's current Medicaid eligibility status when occurring prior-to or as a follow-up to assistance given in applying for Medicaid,
- Gathering and organizing information related to the application and eligibility determination for an individual, including third party liability (TPL) information, as a prelude to submitting a formal Medicaid application,

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- Assisting the individual or family in collecting/gathering required information and documents for the Medicaid application, or
- Providing necessary forms and packaging all forms in preparation for the Medicaid eligibility determination.

**CODE D Facilitating Non-Medicaid Eligibility Determinations - U**

School district employees should use this code when helping an individual to become eligible for non-Medicaid programs such as Temporary Assistance for Needy Families (TANF), Food Stamps, Women, Infants and Children (WIC), day care, legal aid, and other social or education programs and referring them to the appropriate agency to make application, e.g., when helping an individual to become eligible for these services. Include related paperwork, clerical activities or staff travel required to perform these services.

Examples of activities reported under this code:

- Verifying an individual's eligibility or continuing eligibility for Medicaid for the purpose of developing, ascertaining, or continuing eligibility for non-Medicaid programs,
- Explaining eligibility rules and eligibility processes for TANF (formerly Aid to Families with Dependent Children (AFDC)), food stamps, WIC, etc., to prospective applicants,
- Assisting an applicant to fill out eligibility applications for such non-Medicaid programs as TANF (AFDC) and food stamps,
- Gathering information related to the application and eligibility determination for non-Medicaid programs for a client, or
- Providing necessary forms and packaging all forms in preparation for the non-Medicaid eligibility determination.

**CODE E Referral and Coordination of Medicaid Services - PM**

School district employees and vendors should use this code when making referrals for coordinating the delivery of Medicaid covered services. Referral, coordination and monitoring activities related to services in an IEP are reported in this code. In the instance of a Medicaid-eligible student, every effort must be made for referral to a Medicaid enrolled provider. A list of Medicaid covered services is attached. Include related paperwork, clerical activities or staff travel required to perform these services.

**Use code I when providing any direct medical service or activities that are considered**

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**integral to, or an extension of, a direct medical service. For example: A referral resulting from the provision of a direct medical service.**

Examples of activities reported under this code:

- Making referrals for and/or coordinating medical or physical examinations and necessary medical evaluations,
- Providing information about Medicaid EPSDT screening (e.g., dental, vision) in the schools that will help identify medical conditions that can be corrected or improved by services through Medicaid; Examples:
  - Making referrals for and/or scheduling EPSDT screens, inter-periodic screens and appropriate immunizations,
  - Referring individuals for necessary medical health, dental health (under age 21 only), mental health, or substance abuse services covered by Medicaid, including EPSDT Health Services,
  - Gathering information that may be required in advance of these referrals or evaluations,
- Working with individuals, their families, other staff, and providers to identify, arrange for, and/or coordinate services covered under Medicaid that may be required as the result of screens, evaluations, or examinations,
- The actual referral of an individual to a Medicaid program for services,
- Participating in a meeting to coordinate or review a student's needs for initial services covered by Medicaid (if a student is already receiving services and discussion is about ongoing medical services use code I),
- Providing follow-up contact to ensure that an individual has received the prescribed Medicaid covered service and to provide feedback as to whether further treatment or modification of existing treatment are required (the person doing the follow up is not directly involved in the direct service),
- Coordinating the completion of the prescribed services, termination of services, and the referral of the individual to other Medicaid service providers as may be required to provide continuity of care, or
- Consultations with peers, teachers and administration on medical/health-related services.

**CODE F Referral and Coordination of Non-Medicaid Services – U**

School district employees should use this code when making referrals for, coordinating, and/or monitoring the delivery of non-Medicaid covered services. A list of Medicaid covered services

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is attached. Include paperwork, clerical activities or staff travel required to perform these services.

Examples of activities reported under this code:

- Making referrals for and coordinating access to social and educational services such as child care, employment, job training, and housing,
- Making referrals for, coordinating, and/or monitoring the delivery of free child health screens (vision, hearing, scoliosis),
- Making referrals for, coordination of services that are rendered free of charge to the general public, or
- Referral to non-Medicaid programs such as TANF, Food Stamps, WIC, day care, legal aid, and other social or education programs.

**CODE G Medicaid Transportation\Translation\Interpreting - PM**

School district employees should use this code when assisting an individual to obtain transportation to services covered by Medicaid or obtaining translation\interpreting services for the purpose of accessing Medicaid services. A list of Medicaid covered services is attached. Include paperwork, clerical activities or staff travel required to perform these services. This activity does not include activities which contribute to the actual billing of transportation as a medical service.

Examples of activities reported under this code:

- Scheduling or arranging transportation to Medicaid covered services,
- Arranging for or providing translation services (oral and signing) that assist an individual or family to access and understand necessary care or treatment, or
- Accompanying the eligible individual to a Medicaid services activity.

**CODE H Non-Medicaid Transportation\Translation\Interpreting - U**

School district employees should use this code when assisting an individual to obtain transportation to services not covered by Medicaid or providing translation or interpreting services for non-Medicaid activities. Include related paperwork, clerical activities or staff travel required to perform these activities.

Examples of activities reported under this code:

- Scheduling or arranging transportation to social, vocational, and/or educational programs and activities,
- Accompanying an individual to services not covered by Medicaid,

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- Arranging for or providing translation services (oral or signing) that assist an individual to access and understand social, educational and vocational services,
- Arranging for or providing translation services (oral or signing) that assist an individual to access and understand state education or state-mandated health screening (e.g., vision, hearing, scoliosis) and general health education outreach campaigns intended for the student population.

**CODE I Direct Medical Services - U**

School district employees should use this code when providing client care, treatment, and/or counseling services to an individual and/or group in order to ameliorate a specific condition. This code includes the provision of all medical services, including but not limited to services reimbursed through EPSDT Health Services and KIDMED programs. Include paperwork, clerical activities or staff travel required to perform these services.

Examples of activities reported under this code:

- Direct clinical/treatment services,
- Administering first aid,
- Administering medication,
- Making referrals for and/or coordinating medical or physical examinations and necessary medical evaluations as a result of a direct medical service,
- All billable EPSDT Health Services as outlined in the EPSDT Health Services Manual including: audiology services, speech and language evaluations and therapy, physical therapy and evaluations, occupational therapy and evaluations, and psychological evaluations and therapy,
- All billable KIDMED Services as outlined in the KIDMED manual including: Medical Screenings, Vision Screenings, and Hearing Screenings and all KIDMED nurse consults,
- Social workers providing direct services, or
- Immunizations and performance of routine or education agency mandated child health screens to the student enrollment, such as vision, hearing and scoliosis screens.

**CODE J Non-Medicaid, Other Educational and Social Services - U**

This code should be used for any activities which are not health-related, such as employment, job training, and social services, as well as non-Medicaid health related. This code includes all paperwork, documentation and other administrative activities that directly support the delivery of these services.

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Examples of activities reported under this code:

- Performing activities that are specific to instructional, curriculum, student-focused areas,
- Performing necessary assessments and participation in the development, writing or review of the IEP. Time traveling to an IEP meeting,
- Monitoring student achievement,
- Having a parent/teacher conference about a student's educational progress. This includes any conference during the IEP meeting,
- Compiling, preparing, and reviewing reports on textbooks or attendance,
- Enrolling new students or obtaining registration information,
- Providing general supervision of students (i.e., playground, cafeteria),
- Conferring with students or parents about discipline, academic matters or other school related issues,
- Evaluating curriculum and instructional services, policies, and procedures,
- Participating in or presenting training related to curriculum or instruction (e.g., language, arts, workshop, or computer instruction),
- Providing academic instruction (including lesson planning), grading, and testing (instructional or educational),
- Providing individualized instruction (e.g., math concepts) to a special education student,
- Performing clerical activities specific to instructional or curriculum areas, or
- Activities related to the immunization requirements for school attendance including the review of immunization records, etc.

**CODE K General Administration - R**

All staff should use this code when engaged in general administrative activities. This code should be used by all personnel when on break or any form of paid leave.

Examples of activities reported under this code:

- Training (not related to curriculum or instruction),



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- Reviewing school or district procedures and rules,
- Attending or facilitating school or unit staff meetings or board meetings,
- Processing payroll/personnel-related documents,
- Maintaining inventories and ordering supplies,
- Developing budgets and maintaining records,
- Performing administrative or clerical activities related to general building or district functions or operations,
- Providing general supervision of staff, including supervision of student teachers or classroom volunteers, and evaluation of employee performance,
- Reviewing technical literature and research articles, or
- Lunch.