



Maryland Department on Aging

**Proposed Time Tracking
Categories Pilot**

What We Will Be Covering Today

- Purpose of the pilot
- Planned approach
- Description and discussion of codes
- Description of time study method
- Coding scenarios
- Accurate time reporting
- Practice of time study methods

Purpose and Process

Purpose of Pilot

- MDoA is establishing a method to obtain Medicaid administrative Federal Financial Participation (FFP) funds to support the MAP program.
 - States must document the portion of time that is spent on Medicaid versus non-Medicaid related activities by having an ongoing time study. The pilot will help MDoA finalize the design of an ongoing time study process.
- The pilot is a necessary step before launching an ongoing time study.

Purpose of Pilot Cont.

- Main purpose is establishing a more accurate estimate on claimable activities now that the Level I screen and Options Counseling have begun.
- Full representation: Each MAP site and several CIL partners will be participating in the pilot.
- Only staff who manage and/or provide I&A services, MAP Options Counseling, and MAP website directory maintenance can participate in the FFP time study. It will **not** include staff who provide-or time spent on case management, supports planning, and MFP-nursing facility Options Counseling

Planned Approach

Planned Approach

- The pilot should take approximately 5-10 minutes per day depending on the activities performed and how familiar the individual is with the coding system.
- Data collection will be through a random moment survey
- Participants will receive an email twice per day containing a link to a survey. The survey will ask them to document the activity they were performing at the moment specified in the email.

Process for Pilot

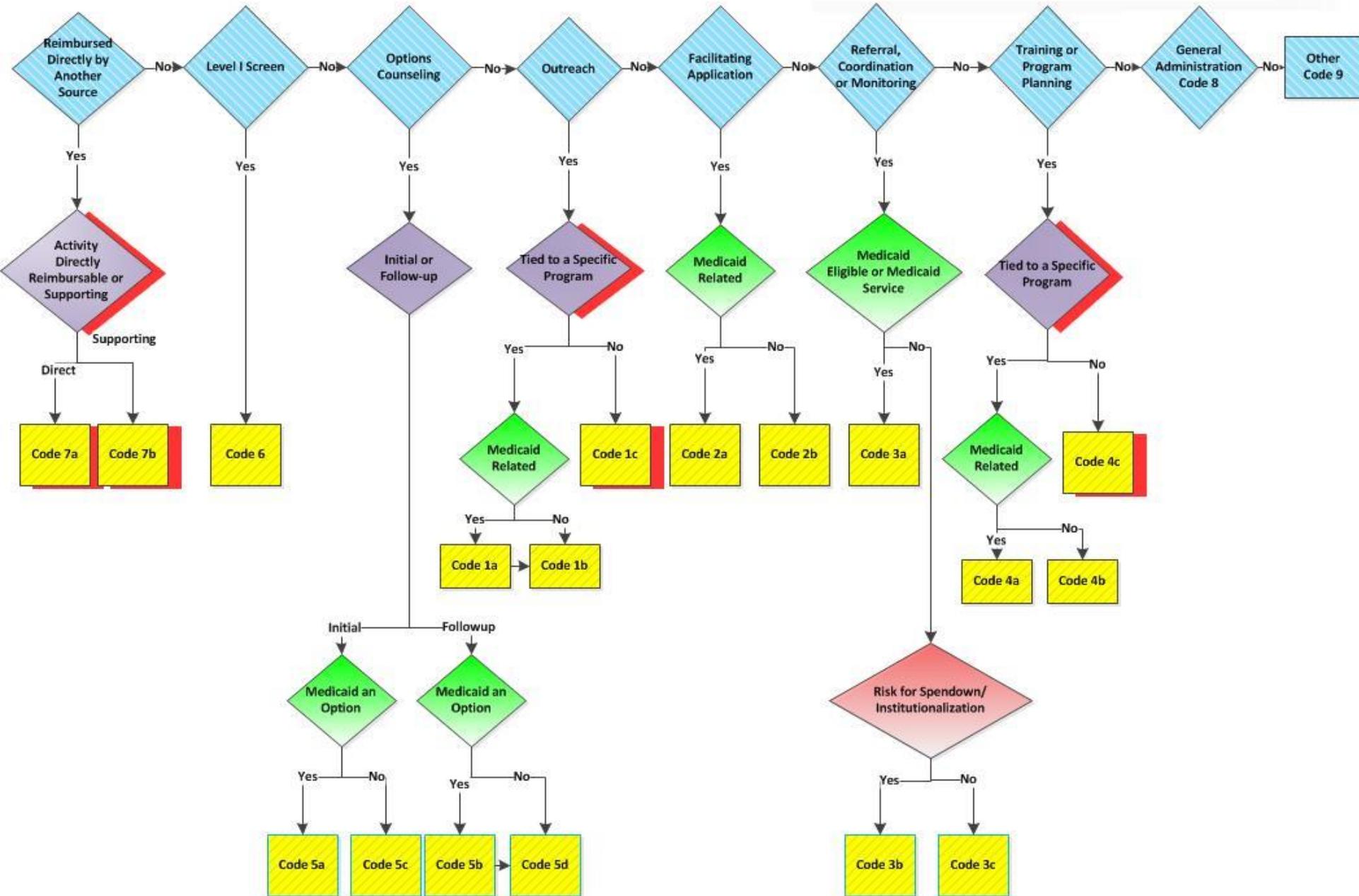


1. In-person or web-enabled training at the beginning of the pilot.
2. Random moment surveys (2 weeks)
3. Data Analysis, conducted by HCBS Strategies, will include a review of time spent on claimable activities

Code Definitions

A review of proposed codes and their definitions

Decision Tree for Choosing Time Study Codes



1a. Outreach/Program Education

1a. Outreach- Medicaid

Includes activities that help inform people about *programs funded by Medicaid* that provide long term supports and services (LTSS) and other services outside of the Options Counseling Process. Providing people with information about specific services should be coded as a Referral under Code 3. Includes both targeted outreach to specific individuals and broader outreach to the general population. Relevant activities include:

If this occurs as part of the Options Counseling Process, code this time as either Options Counseling code 5a or 5c, depending upon the individual's Medicaid status.

This code includes all related paperwork, clerical activities or staff travel required to perform above activities. Both written and oral methods may be used.

Includes any activity listed above that includes a discussion of Medicaid or a service covered under Medicaid, such as the Older Adults Waiver, PCA.

1b. Outreach

1b. Outreach- Not Medicaid Related

Includes activities that only discuss programs not funded by Medicaid or a service covered under Medicaid. For example, presentations that only discuss non-Medicaid services (e.g., Senior Care) or provide a general discussion of an issue, but do not discuss how that issue relates to Medicaid (e.g., a general discussion of abuse and neglect reporting).

If this occurs as part of the Options Counseling Process, code this time as Options Counseling code 5c .

This code includes all related paperwork, clerical activities or staff travel required to perform above activities. Both written and oral methods may be used.

1c. Outreach

1c. Outreach- Not Tied to a Specific Program

Includes outreach efforts that do not discuss a specific program.

2a. Facilitating Application

2a. Facilitating Program Applications- Medicaid: Use when assisting with to applications for Medicaid or referring individuals/families/other representatives to the appropriate agency to complete an application regardless of their ultimate Medicaid eligibility. Verification of current Medicaid status as well as assisting an individual/family/other representatives to maintain Medicaid eligibility. .

Includes activities related to assisting individuals or families with the application process for LTSS, health care services, and other supports that may assist an individual to remain in the community (e.g., income supports, energy assistance, etc.).

Relevant activities include:

- Explaining the eligibility rules and process to individuals, family members, or other representatives.
- Assisting an individual or family member to collect/gather information and documents for program applications.
- Assisting an individual or family in completing program applications.
- Activities that assist in the initial and continuing eligibility for programs.
- Providing necessary forms and other materials in preparation for eligibility determination.

2b. Facilitating Application

2b. Facilitating program applications- Not Medicaid Related: Includes activities related to assisting individuals or families with the application process for LTSS, health care services, and other supports that may assist an individual with remaining in the community (e.g., income supports, energy assistance, etc.). Use when assisting an individual or family to make application for non-Medicaid programs such as SSI, TANF, Meals on Wheels, Food Stamps and referring them to the appropriate agency to complete an application for those programs. Relevant activities include:

- Explaining the eligibility rules and process to individuals, family members, or other representatives.
- Assisting an individual or family member in collecting information and documents for program applications.
- Assisting an individual or family in completing program applications.
- Activities that assist in the initial and continuing eligibility for programs.
- Providing necessary forms and other materials in preparation for eligibility determination.

This includes all related paperwork, clerical activities, or staff travel required to perform these activities.

3a. Referral, Coordination, or Monitoring

3a. Referral, coordination and/or monitoring of services-Medicaid eligibles: Applies to staff activities that include making referrals to, coordinating, and/or monitoring the delivery of specific LTSS or other health care services that are Medicaid eligible. *Specifically, use when (1) a participant is Medicaid eligible or (2) facilitating access to a Medicaid covered service (e.g., assisting a non-Medicaid eligible individual to access a Medicaid Waiver).* This code refers to specific services or supports; applications to programs should be coded under Code category 2.

Includes all related paperwork, clerical activities or staff travel required to perform these activities.

If this activity occurs as part of Options Counseling, code under Options Counseling codes 5a-5b. If activity is directly paid for by another source (e.g., Waiver Case Management or MFP grant) code as 7.

3b. Referral, Coordination, or Monitoring

3b. Referral, coordination and/or monitoring of services - Individuals at risk of institutionalization and Medicaid spend down: For this code the following criteria must be met:

- The time must be spent assisting an individual in accessing supports that may prevent or delay the individual from entering a nursing facility or other Medicaid-funded institution; and
- It must be documented that the individual meets the 180 Day Eligibility Worksheet criteria.

If an individual is already Medicaid eligible and the relevant services are paid for by Medicaid, code under 3a.

3c. Referral, Coordination, or Monitoring

3c. Referral, coordination and/or monitoring of services- Not Medicaid Related: Applies to staff activities that include making referrals to, coordinating, and/or monitoring the delivery of specific LTSS or other health care services that are not Medicaid Related. Use for all other referral, coordination and/or monitoring of services activities, such as social services, educational services, legal services, housing services, Food Stamps and nutrition services, employment and job training. This code refers to specific services or supports; applications to programs should be coded under code category 2.

Includes all related paperwork, clerical activities or staff travel required to perform these activities.

If this activity occurs as part of Options Counseling, code under Options Counseling codes 5a – 5b. If activity is directly paid for by another source (e.g., Waiver Case Management or MFP grant) code as activity code 7.

4. Training or Program Administration

Training: Applies to coordinating, conducting, or participating in training and seminars regarding LTSS, health care services, and other supports that may assist an individual with remaining in the community (e.g. income supports, energy assistance, etc.). Relevant activities include:

- Participating in or coordinating training which enhances the quality of intake, screening, options counseling or other components of the eligibility determination process.
- Participating in or coordinating training which improves the delivery of services.
- Participating in, presenting, or coordinating training designed to address the specific administrative and reporting requirements associated with program services.
- Attending training to maintain provider requirements to provide services.
- Participating in or presenting training on ways to inform the community of the benefits of services and programs or ways to facilitate application and approval processes.

Includes activities related to establishing and maintaining documentation, internal processes, and policies, as well as all related paperwork, clerical activities or staff travel required to perform above activities.

4. Training or Program Administration

Program Administration: Includes activities related to establishing and maintaining documentation, internal processes, and policies related to the provision of LTSS, health care services, and other supports that may assist an individual to remain in the community (e.g., income supports, energy assistance, etc.), as well as working with other partner agencies to improve the coordination and delivery of services, and performing collaborative activities with other agencies to provide services. Relevant activities include:

- Analyzing data to identify and close service gaps.
- Assuring compliance with regulations, state requirements and improve delivery and efficacy of services.
- Collaborating with co-workers, partners, or other agencies via email or telephone about processes, policies, and procedures related to LTSS.
- Working with other partner agencies to improve the coordination and delivery of services, to expand access for populations, and to improve collaboration.
- Reducing overlaps and duplication of services, and closing gaps in the availability of non-medical services.
- Developing Maryland Access Point (MAP) advisory committees, interagency advisory committees, consumer/stakeholder work groups to provide consultation and advice regarding the delivery of services.
- Coordinating with interagency committees to identify, promote and develop services.
- Collecting and entering data on program performance.
- Developing budgets and maintaining records.
- Reviewing MDoA, DHMH or MAP/AAA procedures and standards.
- Developing, refining, and/or reviewing quality improvement procedures.
- Time associated with billing for services.

4a. Training or Program Administration

4a. Training and Program Administration- Medicaid: Applies to training or program administration activities that address (1) Medicaid; (2) a service covered under Medicaid, such as the Older Adults Waiver, PCA; or (3) a process that supports the Medicaid program (e.g., Level I Screen, access, outreach). Time spent entering information about referral resources, such as providers into a database or time spent documenting time for administrative claiming purposes should be included under this code.

4b. Training and Program Administration

4b. Training and Program Administration- Not Funded by Medicaid:

Includes activities related to establishing and maintaining documentation, internal processes, and policies related to the provision of LTSS, health care services, and other supports that may assist an individual to remain in the community (e.g., income supports, energy assistance, etc.), as well as working with other partner agencies to improve the coordination and delivery of services, and performing collaborative activities with other agencies to provide services.

- Applies to training or program administration activities that do not address a program, service, or related process that is related to Medicaid.
- Includes all related paperwork, clerical activities or staff travel required to perform these activities.

4c. Training and Program Administration

4c. Training and Program Administration- Not tied to a Specific Program

Applies to training or program administration activities that are not tied to a specific program or service.

Examples include:

- Program administration activities such as developing a budget for the entire agency
- General training on human resources or customer service

5a. Options Counseling

5a. Options Counseling- Medicaid or Potentially Medicaid Eligible: Options Counseling (OC) is defined as counseling that supports an individual and/or the individual's representative to make an informed choice about which Long Term Supports and Services (LTSS) option is the best fit for that person. Use when providing OC to an individual who either is eligible for Medicaid or for whom Medicaid is being considered as an option for providing LTSS. This includes individuals who are on a waiting list or registry for a Medicaid-funded service, such as the Older Adult Waiver. Activities include:

- Evaluating the information gathered to determine if the individual should receive OC.
- Gathering information from the individual and others, as requested by the individual, about the individual's wants, preferences, goals and interest in receiving OC.
- Communicating pros and cons of LTSS options.
- Providing and reviewing written information (i.e. brochures, contact information, applications, etc.) to the individual and other involved parties.
- Explaining and discussing the OC process and the role of the Options Counselor.
- Supporting and advocating for the individual's decisions about services and supports.
- Developing and recording action plans that support the individual's values, needs and preferences.
- Reviewing and adjusting action plan as needed to meet the individual's preferences or needs and arranging for other identified services.
- Following up with an OC participant including time spent locating and reviewing the individual's records, talking with the individual about how a plan developed as part of the OC process was working, updating the plan and time spent traveling to an in-person meeting with the individual.

Once Medicaid-funded services have been ruled out as an option, these activities should be coded under 5c.

5b. Options Counseling

5b. Options Counseling- Follow-up for Medicaid or potentially Medicaid: Use when following up with someone who had received OC and Medicaid-funded services remain an option.

If Medicaid-funded services have been ruled out as an option, this activity should be coded under 5d.

(Options Counseling (OC) is defined as counseling that supports an individual and/or the individual's representative to make an informed choice about which Long Term Supports and Services (LTSS) option is the best fit for that person.)

5c. Options Counseling

5c. Options Counseling- Medicaid Ruled Out as an Option: Options Counseling (OC) is defined as counseling that supports an individual and/or the individual's representative to make an informed choice about which Long Term Supports and Services (LTSS) option is the best fit for that person. Use when providing OC to an individual for whom Medicaid-funded services are no longer being considered as an option.

- Activities include:
 - Evaluating the information gathered to determine if the individual should receive OC.
 - Gathering information from the individual and others, as requested by the individual, about the individual's wants, preferences, goals and interest in receiving OC.
 - Communicating pros and cons of LTSS options.
 - Providing and reviewing written information (i.e. brochures, contact information, applications, etc.) to the individual and other involved parties.
 - Explaining and discussing the OC process and the role of the Options Counselor.
 - Supporting and advocating for the individual's decisions about services and supports.
 - Developing and recording action plans that support the individual's values, needs and preferences.
 - Reviewing and adjusting action plan as needed to meet the individual's preferences or needs and arranging for other identified services.
 - Following up with an OC participant including time spent locating and reviewing the individual's records, talking with the individual about how a plan developed as part of the OC process was working, updating the plan and time spent traveling to an in-person meeting with the individual.

5d. Options Counseling

5d. Options Counseling- Follow-up for Not Medicaid Related: Use when following up with someone who had received OC and for whom Medicaid-funded services are no longer being considered as an option.

If Medicaid-funded services are being considered for the individual, this activity should be coded under 5b.

(Options Counseling (OC) is defined as counseling that supports an individual and/or the individual's representative to make an informed choice about which Long Term Supports and Services (LTSS) option is the best fit for that person.)

6. Level One Screen

6. Level I Screen: Includes all activities related to performing a Level I Screen. This includes the following activities:

- Time spent on the telephone, in-person, or via a website obtaining information to fill out a Level 1 Screen.
- Time spent contacting additional individuals, such as physicians or other family members, to complete or verify information included on a Level 1 Screen.
- Time spent traveling to and from a Level 1 Screen that is conducted in person.
- Time spent conducting administrative activities necessary to complete a Level 1 Screen, such as:
 - Identifying correct contact information
 - Entering data into an electronic system
 - Answering questions about the purpose and nature of the Level I Screen
 - Providing results of the Level 1 Screen and making appropriate referrals
 - Setting up translation or signing services.

7. Activities Reimbursed Directly By Another Source

7a. Reimbursed time: Use when performing an activity that is directly reimbursed by another source. Examples of activities include:

- Providing Case Management under the Older Adults Waiver that is billed as a service.
- Activities that are funded directly under the Money Follows the Person or another grant.
- Providing reverse mortgage counseling that is paid for directly by the National Council on Aging (NCOA) under a HUD grant.

Only use this code if this activity is explicitly tied to payment (e.g., the worker bills directly for the time). Do not use this code to account for situations in which a portion of the staff member's salary is paid for by another source (this will be addressed as part of the overall accounting). For example:

- If the MAP site receives a payment that is directly tied to the activity (e.g., billing for a 15 minute unit of case management), use this code.
- If SHIP funds are used to pay half a staff member's salary, do not use this code.

Note: unless the activity is directly billed – e.g., the worker provides MFP options counseling for which the MAP receives a \$125 payment for the referral.

7b. Supporting activities that are not reimbursed: This code should be used for activities that support the billed activity, but is not directly reimbursed, such as travel time.

8. General Administration

8. General Administration: This code should only be used if one of the other codes was not applicable. Examples of relevant activities include:

- Paid time off, such as breaks, lunch, vacation, illness, holidays, snow days or any other type of leave.
- Providing general supervision of staff and evaluation of employee performance that is not related to an activity that could be included in another code.
- Processing payroll, filling out or reviewing timesheets (not as part of a FFP claiming time study), HR and other personnel-related documents.
- Resolving IT issues, such as problems or upgrades to computers or accessing the internet.
- Checking *personal* emails and voicemails.
- Updating work schedules.

Time spent on administrative activities such as reviewing emails, voicemails, making copies, etc. that were performed in support of an activity that is captured under another code should be classified under that code.

9. Other

9. Other: This code should only be used if no other code appears applicable. Please provide a description of the activity. The description will be reviewed.

Test Scenarios

Scenario #1

- You are working with an individual that is filling out a QMB or SLMB application. You would code this time as?

Scenario #2

- You receive a call from an individual who is looking for information on where to receive a flu shot. You would code this time as?

Scenario #2 Variation

- You receive a call from an individual who is looking for information on where to receive a flu shot. During this time you find out that the individual is elderly, and seems to have some significant mobility issues that may make it challenging for them to perform ADLS. You would code this time as?

Scenario #3

- You receive a call from an individual who is looking for information on energy assistance. During this time you find out that the individual also was recently diagnosed with Alzheimer's. You would code this time as?

Time to Practice

Apply the Random Moment Time Study

- Now we will code using the random moment time study. Please code for the activities you were performing yesterday at:
 - 9:15 am
 - 2:15pm

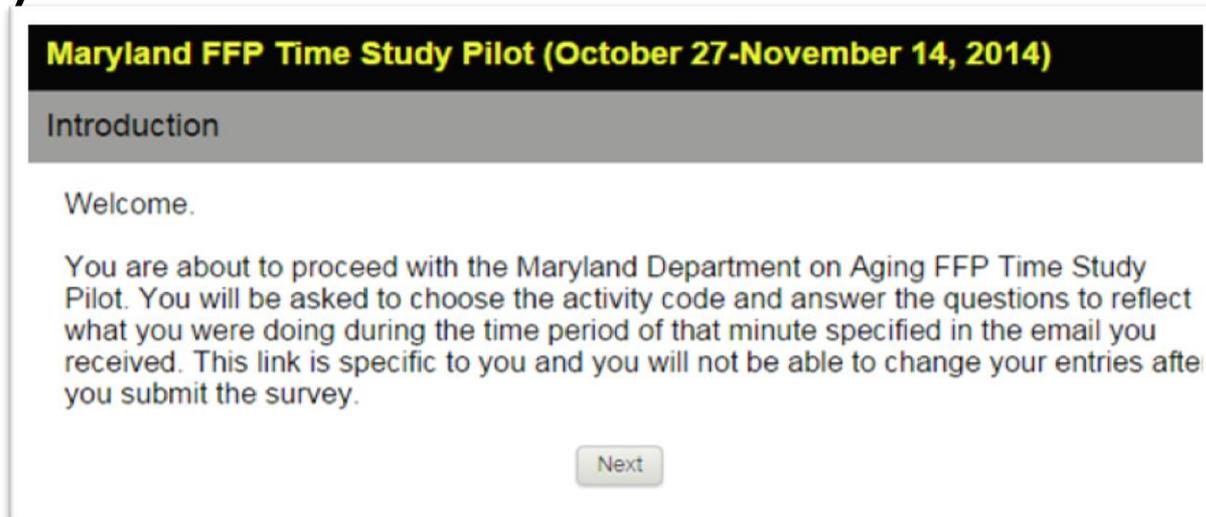
How do we log our Time?

Instructions on how to fill out both the Random Moment Survey

Random Moment Survey

BEGIN TIME STUDY

- By clicking on the link in the email received for the random moment, you will be brought to this introduction page to begin the time study.



Maryland FFP Time Study Pilot (October 27-November 14, 2014)

Introduction

Welcome.

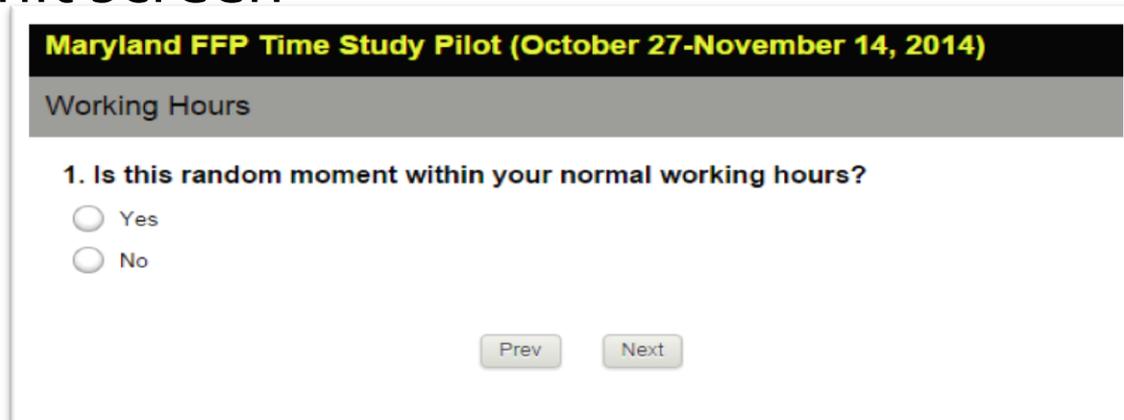
You are about to proceed with the Maryland Department on Aging FFP Time Study Pilot. You will be asked to choose the activity code and answer the questions to reflect what you were doing during the time period of that minute specified in the email you received. This link is specific to you and you will not be able to change your entries after you submit the survey.

Next

Random Moment Survey

WORKING HOURS:

- You will be asked if the random moment indicated in the email you received is in your working hours. Select **"Yes"** or **"No"** as appropriate and click on the **"Next"** button.
- If **"Yes"**, you will be taken to a screen to select an activity code. If **"No"**, you will be taken to the submit screen



The screenshot shows a survey interface with a black header bar containing the text "Maryland FFP Time Study Pilot (October 27-November 14, 2014)" in yellow. Below the header is a grey bar with the text "Working Hours". The main content area is white and contains the question "1. Is this random moment within your normal working hours?" followed by two radio button options: "Yes" and "No". At the bottom of the form are two buttons labeled "Prev" and "Next".

Random Moment Survey

SELECT ACTIVITY FOR RANDOM MOMENT:

- For this question, you will select the appropriate activity code for the random moment as specified in the email you received.
- Select the appropriate activity by clicking on the radio button next to the code and scroll down to the bottom of the page and click on the "**Next**" button.

Random Moment Survey

Maryland FFP Time Study Pilot (October 27-November 14, 2014)

Code Your Time

***2. Please select a code that represents the activity performed at the time of the random moment.**

The time is indicated on the email you received. Please choose the activity you were doing at that minute. Please reference your activity code handbook for a more detailed description.

- [1a. OUTREACH/PROGRAM EDUCATION: Medicaid Related](#)
- [1b. OUTREACH/PROGRAM EDUCATION: Not Medicaid Related](#)
- [1c. OUTREACH/PROGRAM EDUCATION: Not Tied to a Specific Program](#)
- [2a. FACILITATING APPLICATIONS: Medicaid](#)
- [2b. FACILITATING APPLICATIONS: Not Medicaid Related](#)
- [3a. REFERRAL, COORDINATION AND/OR MONITORING OF SERVICES: Medicaid Eligible](#)
- [3b. REFERRAL, COORDINATION AND/OR MONITORING OF SERVICES: Individuals at Risk of Institutionalization and Medicaid Spend Down](#)
- [3c. REFERRAL, COORDINATION AND/OR MONITORING OF SERVICES: Not Medicaid](#)

Funded

Random Moment Survey

CODE DESCRIPTIONS:

If you click on an ***activity code description hyperlink***, a new page will appear in your web browser in a new tab. The time study survey is on the previous tab on your web browser. You can return to the time study by clicking this tab. The descriptions for each of the codes have been loaded onto the pilot blog site (<http://mdffppilot.blogspot.com/>).

The screenshot shows a web browser window with the URL mdffppilot.blogspot.com/p/outreach-1a_7.html. The page title is "FFP - Medicaid Reimbursement Code Time Study Pilot". The main content area displays the following information:

Code 1. Outreach / Program Education

Includes activities that help inform people about programs that provide long term supports and services (LTSS) and other services outside of the Options Counseling Process. Providing people with information about specific services should be coded as a Referral under Code 3. Includes both targeted outreach to specific individuals and broader outreach to the general population.

Relevant activities include:

- Developing marketing/program education materials, such as brochures.
- Disseminating or presenting program information to inform individuals and family members and partners (such as providers, CIL partners, senior centers, hospital discharge planners etc.) about services and where to obtain services.
- Informing individuals and family members of the benefits offered by different programs.
- Assisting in identifying participants who could benefit from programs offering LTSS or other relevant services.

If this occurs as part of the Options Counseling Process, code this time as either Options Counseling code 5a or 5c, depending upon the individual's Medicaid status.

The sidebar on the right contains a "PAGE'S" section with a list of links:

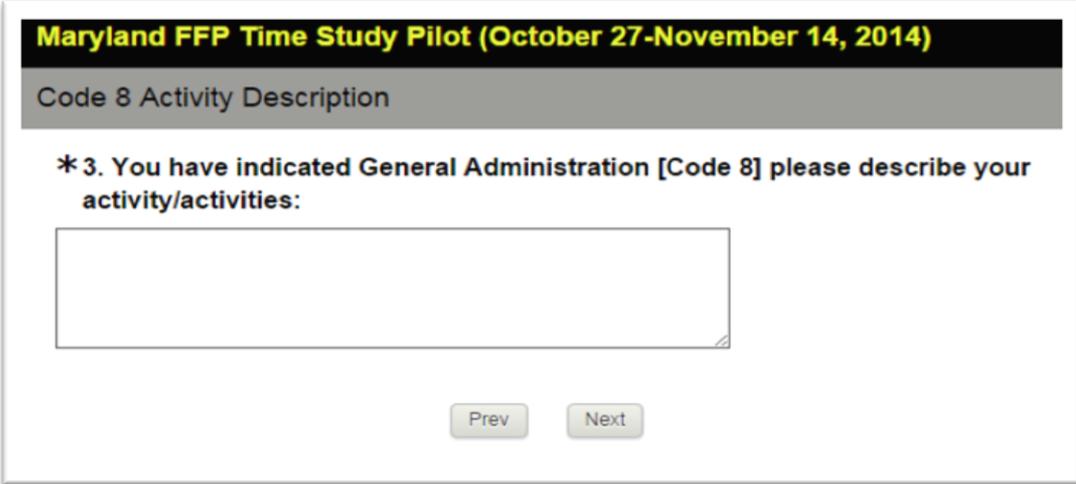
- Home
- Cost Pool Spreadsheet
- FFP Time Study - 2nd Round Pilot and Training
- Code 1. Outreach / Program Education
- Code 2. Facilitating Program Applications
- Code 3. Referral, Coordination and/or Monitoring of Services
- Code 4. Training and Program Administration
- Code 5. Options Counseling
- Code 6. Level I Screen
- Code 7. Activities Reimbursed Directly By Another Source
- Code 8. General Administration
- Code 9. Other

Below the list is a "FOLLOW BY EMAIL" section with a text input field for an email address and a "Submit" button.

Random Moment Survey

CODE 8 and 9 ACTIVITY DESCRIPTIONS

- If you selected **Code 8: General Administration** or **Code 9: Other** you will be asked to indicate the activities being conducted.
- Click the **"Next"** button and go to the Submit page

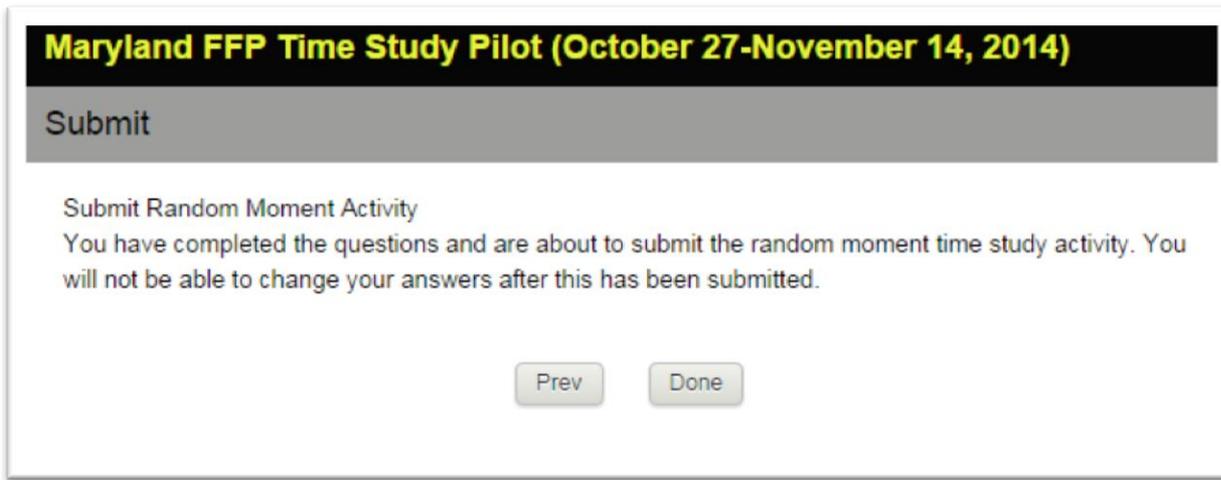


The screenshot shows a survey form titled "Maryland FFP Time Study Pilot (October 27-November 14, 2014)". Below the title is a section header "Code 8 Activity Description". The main question is: "* 3. You have indicated General Administration [Code 8] please describe your activity/activities:". Below the question is a large, empty text input box. At the bottom of the form are two buttons: "Prev" and "Next".

Random Moment Survey

SUBMIT

- You have completed the time study from the random moment specified in the email you received.
- Click on the “Done” button to complete your entry.
- ***You will not be able to change your answers after you click the submit button.***



Maryland FFP Time Study Pilot (October 27-November 14, 2014)

Submit

Submit Random Moment Activity
You have completed the questions and are about to submit the random moment time study activity. You will not be able to change your answers after this has been submitted.

Prev Done

Accurate Time Reporting

How to Code

- When filling out the survey you will select the appropriate activity code for the random moment as specified in the email you received. If you received the email at 11:30 am you would select the code that best reflects the activity for that time.

Methods for Accurate Coding

- Trying to remember what activity took place during a particular time when filling out the survey at the end of the day or on a following day may be difficult. Responding to the email as soon as possible will assist you with coding it accurately.

Next Steps

Dates for the Time Study

- The time study will begin Monday October 27th and run through Friday November 14th.
- Participants will receive the surveys via email beginning Monday morning.



The Blog

- In order to more efficiently facilitate questions and conversations, we have created a blog. It can be found at www.mdffppilot.blogspot.com
- The blog contains information including an FAQ page, contact information, and detailed code descriptions.

Questions

- If you have questions or a particular concern during the pilot you may contact:
 - Kristy Michael: Kristy@hcbs.info
 - Ami Patel: ami.patel@maryland.gov