Medicaid School-Based Services for Recipients 0 - 21 Years of Age

Program Activity Time Study Codes

These activity codes represent administrative and direct service activity categories that are used in the school setting. Any costs related to medical services should be claimed to one of the options under Code 4.

Any reference to an Individualized Education Program (IEP) in this guide will also refer to the same activities performed in support of an Individualized Family Service Plan (IFSP). Additionally, any references to Plan of Care is separate from an IEP/IFSP.

The following 20 codes are to be used in completing the time study:

CODE 1A Non-Medicaid Outreach – U

CODE 1B Medicaid Outreach – TM/50 Percent FFP

CODE 2A Facilitating Application for Non-Medicaid Programs – U

CODE 2B Facilitating Application for Medicaid Programs – TM/50 Percent FFP

CODE 3 School-Related and Education Activities – U

CODE 4A Direct Medical Services, Not Covered as IDEA/IEP/IFSP Service or Plan of Care – U

CODE 4B Direct Medical Services, Covered as IDEA/IEP/IFSP Service – U

CODE 4C Direct Medical Services, Covered on a Plan of Care (that is not an IDEA/IEP/IFSP Service)

CODE 5A Transportation for Non-Medicaid Programs – U

CODE 5B Transportation for Medicaid Programs – PM/50 Percent FFP

CODE 6A Non-Medicaid Translation – U

CODE 6B Translation Related to Medicaid Services – PM/75 Percent FFP

CODE 7A Program Planning, Policy Development and Interagency Coordination Related to Non-Medical Services – U

CODE 7B Program Planning, Policy Development and Interagency Coordination Related to Medicaid Services – PM/50 Percent FFP

CODE 8A Non-Medical/Non-Medicaid Training – U

CODE 8B Medical/Medicaid Related Training – PM/50 Percent FFP

CODE 9A Referral, Coordination and Monitoring of Non-Medicaid Services – U

CODE 9B Referral, Coordination and Monitoring of Medical Services – PM/50 Percent FFP

CODE 10 General Administration – R

CODE 11 Not Paid/Not Worked – U

The status indicator, which follows the code, provides for the application of the FFP rate, whether the code is an allowable or non-allowable cost under Medicaid, and the proportion of Medicaid share of the code. Status indicators include:

Application of FFP rate

50 percent	Refers to an activity that is allowable as administration under the Medicaid program and claimable at the 50 percent non-enhanced FFP.

Unallowable Activities

U	Refers to an activity that is unallowable as administration under the Medicaid program (but may be eligible under Direct Services of the Medicaid program, such as codes 4B – IEP/IFSP Services and 4C – Plan of Care). This is regardless of whether or not the population served includes Medicaid eligible individuals.

Application of Medicaid Share

TM	(Total Medicaid) Refers to an activity that is 100 percent allowable as administration under the Medicaid program.
PM	(Proportional Medicaid) Refers to an activity that 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 eligibility rate). The Medicaid share is determined as the ratio of Medicaid eligible students to total students.

Reallocated Activities

R	Refers to those general administrative activities performed by time study participants that must be reallocated across the other activity codes on a pro rata basis. These reallocated activities are reported under Code GA, General Administration. Certain functions, such as but not limited to payroll, maintaining inventories, developing budgets, executive direction, are allowable through the application of an approved indirect cost rate.

TIME STUDY CODE DESCRIPTIONS

1A. Non-Medicaid Outreach – U

All participating time-study participants should use this code when performing activities that inform individuals about their eligibility for **non-Medicaid** social, vocational and outreach programs (including special education) and how to access them; describing the range of benefits and how to obtain them. Both written and oral methods may be used. Includes related paperwork, clerical activities or staff travel required to perform these activities.

1. Informing families about wellness programs and how to access these programs.

2. Providing information related to the applications for non-Medicaid programs. (e.g., foster care family coordination, WIC referrals, local shelters, emergency food assistance, day care, and indigent programs).

3. Scheduling and promoting activities that educate individuals about the benefits of healthy lifestyles and practices.

4. Conducting general health education programs or campaigns that address life-style changes in the general population (e.g., dental prevention, anti-smoking, alcohol reduction, etc.).

5. Conducting campaigns that encourage persons to access social, educational, legal or other services not covered by Medicaid.

6. Assisting in early identification of children with special medical/dental/mental health needs through various child find activities. (e.g., contacting a nurse to communicate the child's needs, completing observations on students to determine needs, etc.).

7. Outreach activities in support of programs that are 100 percent funded by state general revenue.

8. Developing outreach materials such as brochures or handbooks for these programs.

9. Making arrangements with presenters of health education programs.

10. Parent conferences on truancy, drugs, gangs, etc.

1B. Medicaid Outreach – TM/50 Percent FFP

School staff should use this code when performing activities that inform eligible or potentially eligible individuals about Medicaid and how to access the program. Such activities include providing information to parents of potentially eligible children on how to apply for Medicaid or information on how to reenroll children who are already eligible and whose eligibility is soon to

expire. Education about Medicaid may only be conducted for the populations served by the school districts, i.e., students and their parents or guardians.

1. Informing Medicaid eligible and potential Medicaid eligible children and families about the benefits and availability of services provided by Medicaid (including preventive treatment and screening) including services provided through the ESPDT program.

2. Developing and/or compiling materials to inform individuals about the Medicaid program (including EPSDT) and how and where to obtain those benefits. Note: This activity should not be used when Medicaid-related materials are already available to the schools (such as through the New Mexico Human Services Department Medical Assistance Division (HSD/MAD), the Medicaid agency). As appropriate, school developed education materials should have prior approval of the HSD/MAD.

3. Distributing literature about the benefits, eligibility requirements, and availability of the Medicaid program, including EPSDT.

4. Assisting HSD/MAD to fulfill the education objectives of the Medicaid program by informing individuals, students and their families about health resources available through the Medicaid program.

5. Providing information about Medicaid EPSDT screening (e.g., dental, vision) that will help identify medical conditions that can be corrected or improved by services offered through the Medicaid program.

6. Contacting pregnant and parenting teenagers about the availability of Medicaid prenatal and well-baby care programs and services.

7. Providing information regarding Medicaid managed care programs and health plans to individuals and families and how to access that system.

8. Encouraging families to access medical/dental/mental health services provided by the Medicaid program.

2A. Facilitating Application for Non-Medicaid Programs – U

This code should be used by school staff when informing an individual or family about **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 educational programs and referring them to the appropriate agency to make application.

1. Explaining the eligibility process for non-Medicaid programs, including IDEA.

2. Assisting the individual or family collect/gather information and documents for the non-Medicaid program application (e.g., foster care family coordination, WIC referrals, local shelters, emergency food assistance, day care, Indigent programs etc.).

3. Assisting the individual or family in completing the application, including necessary translation activities.

4. Developing and verifying initial and continuing eligibility for the Free and Reduced Lunch Program.

5. Developing and verifying initial and continuing eligibility for non-Medicaid programs.

6. Providing necessary forms and packaging all forms in preparation for the non-Medicaid eligibility determination.

2B. Facilitating Medicaid Eligibility Determination – TM/50 Percent

School staff should use this code when assisting an individual with the Medicaid eligibility process. Includes related paperwork, clerical activities, or staff travel required to perform these activities. This activity does not include the actual determination of Medicaid eligibility.

1. Verifying an individual's current Medicaid eligibility status for purposes of the Medicaid eligibility process.

2. Explaining Medicaid eligibility rules and the Medicaid eligibility process to prospective applicants.

3. Assisting individuals or families to complete a Medicaid eligibility application.

4. Gathering information related to the application and eligibility determination for an individual, including resource information, as a prelude to submitting a formal Medicaid application.

5. Providing necessary forms and packaging all forms in preparation for the Medicaid eligibility determination.

6. Referring an individual or family to the local Income Support Division Office to make application for Medicaid benefits.

7. Assisting the individual or family in collecting/gathering required information and documents for the Medicaid application.

8. Participating as a Medicaid eligibility outreach outstation but does not include determining eligibility.

3. School Related and Educational Activities – U

This code should be used for school-related activities, including social services, educational services, teaching services, employment and job training, and other activities that are not Medicaid-related. These activities include the development, coordination, and monitoring of a

student's education plan. Includes related paperwork, clerical activities, or staff travel required to perform these activities.

1. Providing classroom instruction (including lesson planning).

2. Testing, correcting papers.

3. Developing, coordinating, and monitoring the Individualized Education Program (IEP) for a student, which includes ensuring annual reviews of the IEP are conducted, parental sign-offs are obtained, and the actual IEP meetings with the parents, except for the development of the medical component, e.g., the individualized treatment plan, of the IEP. (This would also refer to the same activities performed in support of an Individualized Family Service Plan (IFSP).)

4. Compiling attendance reports.

5. Performing activities that are specific to instructional, curriculum, and student-focused areas.

6. Reviewing the education record for students who are new to the school district.

7. Providing general supervision of students, e.g., playground, lunchroom.

8. Monitoring student academic achievement.

9. Providing individualized instruction (e.g., math concepts) to a special education student.

10. Conducting external relations related to school educational issues/matters.

11. Compiling report cards.

12. Carrying out discipline.

13. Performing clerical activities specific to instructional or curriculum areas.

14. Activities related to the educational aspects of meeting immunization requirements for school attendance.

15. Compiling, preparing, and reviewing reports on textbooks or attendance.

16. Enrolling new students or obtaining registration information.

17. Conferring with students or parents about discipline, academic matters or other school related issues.

18. Evaluating curriculum and instructional services, policies, and procedures.

19. Participating in or presenting training related to curriculum or instruction (e.g., language arts workshop, computer instruction).

20. Translating an academic test for a student.

4A. Direct Medical Services, Not Covered as IDEA/IEP/IFSP Service or Other Plan of Care (not as IDEA/IEP/IFSP Service)– U

This code should be selected when school district staff are providing direct client care services for which medical necessity has not been determined. This code includes the provision of all non-IDEA/IEP/IFSP or other plan of care medical services reimbursed through Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services. This code includes pre and post activities associated with the actual delivery of the direct client care services, e.g., paperwork or staff travel required to perform these services.

Examples include:

1. Administering first aid

2. Administering medication or injection other than those outlined in the plan of care or IEP/IFSP as direct client care nursing services under the Direct Service program, e.g., providing immunizations;

3. Providing health/mental health services for which medical necessity has not been determined in a plan of care or IEP/IFSP

4. Conducting medical/health assessments/evaluations and diagnostic testing and providing related reports for which medical necessity has not been determined in a plan of care or IEP/IFSP

5. Performing initial developmental assessments if not in conjunction with development of an IEP/IFSP or plan of care

4B. Direct Medical Services, Covered as IDEA/IEP/IFSP Service – U

This code will be assigned when school district staff (employees or contracted staff) provides direct client services as covered services delivered by school districts under the Direct Service Program. These direct client services may be delivered to an individual and/or group in order to ameliorate a specific condition and are performed in the presence of the student(s). This code includes the provision of all IDEA/IEP/IFSP medical (i.e., health-related) services. It also includes functions performed pre and post of the actual direct client services (when the student may not be present), for example, paperwork, or staff travel directly related to the direct client services.

This includes all IDEA/IEP/IFSP direct client services with the Student/Client present including:

- Providing health/mental health services as covered in the student's IEP/IFSP
- Conducting medical/health assessments/evaluations and diagnostic testing and preparing related reports as covered in the student's IEP/IFSP.

Examples include:

1. Audiologist services, including evaluation and therapy services (only if included in the student's IEP/IFSP);

2. Physical Therapy services, including evaluation and therapy services (only if included in the student's IEP/IFSP);

3. Occupational Therapy services, including evaluation and therapy services (only if included in the student's IEP/IFSP);

4. Speech Language Pathology Therapy services, including evaluation and therapy services (only if included in the student's IEP/IFSP);

5. Behavioral Health Services, including counseling, evaluation, and therapy services (only if included in the student's IEP/IFSP);

6. Nutritional Assessments and Counseling (only if included in the student's IEP/IFSP);

7. Nursing Services on the IEP/IFSP and time spent administering/monitoring medication only if it is included as part of an IEP/IFSP and documented in the IEP/IFSP. Medicaid administration would not include those that are provided to the entire student population, i.e. administration of aspirin, but are specifically those called for in the IEP/IFSP;

8. Case Management Services, including medical/functional assessments and developing a comprehensive plan of care;

9. Physician services and evaluation, including therapy services (only if included in the student's IEP/IFSP);

10. Performing developmental assessments if in conjunction with development of an IEP/IFSP

11. Specialized Transportation Services (only if included in the student's IEP/IFSP);

12. Hearing and vision screening services that precipitate psychological, educational or speech/language evaluation services [The assessment services are not in the student's IEP/IFSP because assessments are performed before the students IEP/IFSP is developed.]; and

13. Hearing evaluation services administered by a licensed audiologist to beneficiaries who have been

or are in the process of being identified as hearing impaired.

This code also includes pre and post time directly related to providing direct client care services when the student/client is not present. Examples of pre and post time activities when the student/client is not present include: time to complete all paperwork related to the specific direct client care service, such as preparation of progress notes, translation of session notes, review of evaluation testing/observation, planning activities for the therapy session, travel to/from the therapy session, or completion of billing activities.

General Examples that are considered pre and post time:

1. Pre and post activities associated with physical therapy services, for example, time to build a customized standing frame for a student or time to modify a student's wheelchair desk for improved freedom of movement for the client.
2. Pre and post activities associated with speech language pathology services, for example, preparing lessons for a client to use with an augmentative communicative device or preparing worksheets for use in group therapy sessions.
3. Travel to the direct service/therapy.
4. Paperwork associated with the delivery of the direct care service, as long as the student/client is not present. Such paperwork could include the preparation of progress notes, translation of session notes, or completion of billing activities.
5. Interpretation of the evaluation results and/or preparation of written evaluations, when student/client is not present. (Assessment services are billed for testing time when the student is present, for interpretation time when the student is not present, and for report writing when the student is not present.)

4C. Direct Medical Services, Covered on a Plan of Care – U

This code will be assigned when school district staff (employees or contracted staff) provides direct client services as covered services delivered by school districts under the Direct Service Program when documented on a plan of care other than an IEP or where medical necessity has been otherwise established. These direct client services may be delivered to an individual and/or group in order to ameliorate a specific condition and are performed in the presence of the student(s). It also includes functions performed pre and post of the actual direct client services (when the student may not be present), for example, paperwork, or staff travel directly related to the direct client services.

This includes all medical services with the Student/Client presenting:

- Providing health/mental health services as covered in the student's plan of care other than an IEP/IFSP
- Conducting medical/health assessments/evaluations and diagnostic testing and preparing related reports as covered in the student's plan of care other than an IEP/IFSP; and
- Covered services for which medical necessity has been determined.

Examples include:

1. Providing routine or mandated child health/medical Screenings (including scoliosis), Vision Screenings, Hearing Screenings, Dental Screenings, EPSDT Screenings, and nurse consults for non-Direct Service services;

2. Audiologist services, including evaluation and therapy services that is included in the student's plan of care);

3. Physical Therapy services, including evaluation and therapy services (only if included in the student's plan of care);

4. Occupational Therapy services, including evaluation and therapy services (only if included in the student's plan of care);

5. Speech Language Pathology Therapy services, including evaluation and therapy services (only if included in the student's plan of care);

6. Behavioral Health Services, including counseling, evaluation, and therapy services (only if included in the student's plan of care or where medical necessity has been established);

7. Nutritional Assessments and Counseling (only if included in the student's plan of care);

8. Nursing Services, evaluations and administering / monitoring medication (only if medical necessity has been determined including skilled nursing services on the student's plan of care and time spent administering/monitoring medication);

9. Case Management Services, including medical/functional assessments and developing a comprehensive plan of care that is not related to an IEP/IFSP;

10. Physician services and evaluation, including therapy services (only if included in the student's plan of care);

11. Performing developmental assessments if in conjunction with development of a plan of care that is not related to an IEP/IFSP;

12. All EPSDT covered services such as screenings, immunizations, etc. or services in which medical necessity has been determined;

13. Hearing and vision screening services that precipitate psychological, educational or speech/language evaluation services [The assessment services are not in the client's non-IEP plan of care because assessments are performed before the students plan of care is developed.]; and

14. Hearing evaluation services administered by a licensed audiologist to beneficiaries who have been or are in the process of being identified as hearing impaired if in conjunction with a student's non-IEP plan of care

This code also includes pre and post time directly related to providing direct client care services when the student/client is not present. Examples of pre and post time activities when the student/client is not present include: time to complete all paperwork related to the specific direct client care service, such as preparation of progress notes, translation of session notes, review of evaluation testing/observation, planning activities for the therapy session, travel to/from the therapy session, or completion of billing activities.

General Examples that are considered pre and post time:

1. Pre and post activities associated with physical therapy services, for example, time to build a customized standing frame for a student or time to modify a student's wheelchair desk for improved freedom of movement for the client.
2. Pre and post activities associated with speech language pathology services, for example, preparing lessons for a client to use with an augmentative communicative device or preparing worksheets for use in group therapy sessions.
3. Travel to the direct service/therapy.
4. Paperwork associated with the delivery of the direct care service, as long as the student/client is not present. Such paperwork could include the preparation of progress notes, translation of session notes, or completion of billing activities.
5. Interpretation of the evaluation results and/or preparation of written evaluations, when student/client is not present. (Assessment services are billed for testing time when the student is present, for interpretation time when the student is not present, and for report writing when the student is not present.)

5A. Transportation for Non-Medicaid Programs – U

School district employees should use this code when assisting an individual to obtain transportation to services not covered by Medicaid or accompanying the individual to services not covered by Medicaid. Includes related paperwork, clerical activities or staff travel required to perform these activities.

1. Scheduling or arranging transportation to social, vocational, and/or educational programs and activities.

5B. Transportation-Related Activities in Support of Medicaid-Covered Services – PM/50 Percent FFP

School district employees should use this code when assisting an individual to obtain transportation to services covered by Medicaid. This does not include the provision of the actual transportation service or the direct costs of the transportation (bus fare, taxi fare, etc.), but rather the administrative activities involved in providing transportation. Includes related paperwork, clerical activities or staff travel required to perform these activities. See Section VI for a more detailed and thorough discussion of Medicaid transportation policy.

1. Scheduling or arranging transportation to Medicaid covered services.

6A. Non-Medicaid Translation – U

School employees who provide translation services for non-Medicaid activities should use this code. Includes related paperwork, clerical activities or staff travel required to perform these activities.

1. Arranging for or providing translation services (oral or signing services) that assist the individual to access and understand social, educational, and vocational services.

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

3. Developing translation materials that assist individuals to access and understand social, educational, and vocational services.

6B. Translation Related to Medicaid Services – PM/75 Percent FFP

Translation may be allowable as an administrative activity, if it is not included and paid for as part of a medical assistance service. However, translation must be provided either by separate units or separate employees performing solely translation functions for the school, and it must facilitate access to Medicaid covered services. School employees who provide Medicaid translation services should use this code. Includes related paperwork, clerical activities or staff travel required to perform these activities.

1. Arranging for or providing translation services (oral and signing) that assist the individual to access and understand necessary care or treatment covered by Medicaid. This includes alternative languages, Braille, sign language and translation due to illiteracy.

2. Developing translation materials that assist individuals to access and understand necessary care or treatment covered by Medicaid.

7A. Program Planning, Policy Development and Interagency Coordination Related to Non-Medical Services – U

School staff should use this code when performing activities associated with developing strategies to improve the coordination and delivery of non-medical services to school age children. Non-medical services may include social services, educational services, vocational services, and state or state education mandated child health screenings provided to the general school population. Employees who position description includes program planning, policy development, and interagency coordination may use this code. If schools so choose, they may be explicit in the position descriptions with respect to the specific functions. Includes related paperwork, clerical activities or staff travel required to perform these activities.

1. Identifying gaps or duplication of non-medical services (e.g., social, vocational educational and state mandated general health care programs) to school age children and developing strategies to improve the delivery and coordination of these services.

2. Developing strategies to assess or increase the capacity of non-medical school programs.

3. Monitoring the non-medical delivery systems in schools.

4. Developing procedures for tracking families' requests for assistance with non-medical services and the providers of such services.

5. Evaluating the need for non-medical services in relation to specific populations or geographic areas.

6. Analyzing non-medical data related to a specific program, population, or geographic area.

7. Working with other agencies providing non-medical services to improve the coordination and delivery of services and to improve collaboration around the early identification of nonmedical problems.

8. Defining the relationship of each agency's non-medical services to one another.

9. Developing advisory or work groups of professionals to provide consultation and advice regarding the delivery of non-medical services and state-mandated health screenings to the school populations.

10. Developing non-medical referral sources.

11. Coordinating with interagency committees to identify, promote and develop non-medical services in the school system.

7B. Program Planning, Policy Development and Interagency Coordination Related to Medical Services – PM/50 Percent FFP

This code should be used by school staff when performing activities associated with the development of strategies to improve the coordination and delivery of medical/dental/mental health services to school age children and adolescents, and when performing collaborative activities with other agencies and/or providers. Employees who position description includes program planning, policy development, and interagency coordination may use this code. If schools so choose, they may be explicit in the position descriptions with respect to the specific functions. This code refers to activities such as planning and developing procedures to track requests for services; the actual tracking of requests for Medicaid services would be coded under Code 9B. Includes related paperwork, clerical activities or staff travel required to perform these activities.

1. Identifying gaps or duplication of medical/dental/mental services to school age children and developing strategies to improve the delivery and coordination of these services.

2. Developing strategies to assess or increase the capacity of school medical/dental/mental health programs.

3. Monitoring the medical/dental/mental health delivery systems in schools.

4. Developing procedures for tracking families' requests for assistance with medical/dental/mental services and providers, including Medicaid. (This does not include the actual tracking of requests for Medicaid services.)

5. Evaluating the need for medical/dental/mental services in relation to specific populations or geographic areas.

6. Analyzing Medicaid data related to a specific program, population, or geographic area.

7. Working with other agencies and/or providers that provide medical/dental/mental services to improve the coordination and delivery of services, to expand access to specific populations of Medicaid eligibles, and to increase provider participation and improve provider relations.

8. Working with other agencies and/or providers to improve collaboration around the early identification of medical/dental/mental problems.

9. Developing strategies to assess or increase the cost effectiveness of school medical/dental/mental health programs.
10. Defining the relationship of each agency's Medicaid services to one another.

11. Working with Medicaid resources, such as HSD/MAD and Medicaid managed care organizations, to make good faith efforts to locate and develop EPSDT health services referral relationships.

12. Developing advisory or work groups of health professionals to provide consultation and advice regarding the delivery of health care services to the school populations.

13. Working with HSD/MAD to identify, recruit and promote the enrollment of potential Medicaid providers.

14. Developing medical referral sources such as directories of Medicaid providers and managed care organizations, which will provide services to targeted population groups.

15. Coordinating with interagency committees to identify and promote recipients' access to Medicaid EPSDT services.

8A. Non-Medical/Non-Medicaid Related Training – U

School staff should use this code when coordinating, conducting, or participating in training events and seminars for outreach staff regarding the benefit of the programs other than the Medicaid program. For example, training may include how to assist families to access the services of education programs, and how to more effectively refer students for those services. Includes related paperwork, clerical activities, or staff travel required to perform these activities.

1. Participating in or coordinating training that improves the delivery of services for programs other than Medicaid.

2. Participating in or coordinating training that enhances IDEA child find programs.

8B. Medical/Medicaid Related Training – PM/50 Percent FFP

School staff should use this code when coordinating, conducting, or participating in training events and seminars for Medicaid training staff regarding the benefits of medical/Medicaid related services, how to assist families to access such services, and how to more effectively refer students for services. Include related paperwork, clerical activities, or staff travel required to perform these activities.

1. Participating in or coordinating training that improves the delivery of medical/Medicaid related services.

2. Participating in or coordinating training that enhances early identification, intervention, screening and referral of students with special health needs to such services (e.g., Medicaid EPSDT services). (This is distinguished from IDEA child find programs.)
3. Participating in training on Medicaid school-based direct services and administrative requirements.

9A. Referral, Coordination & Monitoring of Non-Medicaid Services – U

School staff should use this code when making referrals for, coordinating, and/or monitoring the delivery of non-Medicaid covered services or the delivery of non-medical services, such as educational services. Includes related paperwork, clerical activities or staff travel required to perform these activities.

1. Making referrals for and coordinating access to social and educational services such as childcare, employment, job training, and housing.

2. Making referrals for, coordinating, and/or monitoring the delivery of state education agency mandated child health screens (e.g., vision, hearing, scoliosis).

3. Making referrals for, coordinating, and monitoring the delivery of scholastic, vocational, and other non-health related examinations.

4. Making referrals for, coordinating, and monitoring the delivery of services that are provided to all students in the school.

5. Gathering any information that may be required in advance of these non-Medicaid related referrals.

6. Participating in a meeting/discussion to coordinate or review a student's need for scholastic, vocational, and non-health related services not covered by Medicaid.

7. Monitoring and evaluating the educational components of the individualized plan of care as appropriate.

9B. Referral, Coordination and Monitoring of Medicaid Services – PM/50 Percent FFP

School staff should use this code when making referrals for, coordinating, and/or monitoring the delivery of medical (Medicaid covered) services. Referral, coordination and monitoring activities related to services included in an IEP/IFSP or other plan of care are reported in this code. Activities that are part of a direct service are not claimable as an administrative activity. Furthermore, **activities that are an integral part of or an extension of a direct medical service, e.g., patient follow-up, patient assessment, patient counseling, patient education, patient consultation, and billing activities, should be reported under Code 4A/4B/4C, Direct Medical Services.** Includes related paperwork, clerical activities, or staff travel necessary to perform these activities.

1. Identifying and referring adolescents who may be in need of Medicaid family planning services.

2. Making referrals for and/or coordinating medical or physical examinations and necessary medical/dental/mental health evaluations.

3. Making referrals for and/or scheduling EPSDT screens, periodic screens, and appropriate immunization.

4. Referring students for necessary medical health, mental health, or substance abuse services covered by Medicaid.

5. Arranging for any Medicaid covered medical/dental/mental health diagnostic or treatment services that may be required as the result of a specifically identified medical/dental/mental health need.

6. Gathering any information that may be required in advance of medical/dental/mental health referrals.

7. Participating in a meeting/discussion to coordinate or review a student's needs for health-related services covered by Medicaid.

8. Providing follow-up contact to ensure that a child has received the prescribed medical/dental/mental health services covered by Medicaid.

9. Coordinating the delivery of community based medical/dental/mental health services for a child with special/severe health care needs.

10. Coordinating the completion of the prescribed services, termination of services, and the referral of the child to other Medicaid service providers as may be required to provide continuity of care.

11. Providing information to other staff on the child's related medical/dental/mental health services and plans.

12. Monitoring and evaluating the Medicaid service components of the IEP/IFSP or other plan of care, as appropriate.

13. Coordinating medical/dental/mental health service provision with managed care plans as appropriate.

10. General Administration – R

This code should be used by time study participants when performing activities that are not directly assignable to program activities. Includes related paperwork, clerical activities, or staff travel required to perform these activities. 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. Below are typical examples of general administrative activities, but they are not all inclusive.

1. Taking lunch, breaks, leave, or other paid time not at work.

2. During a state of emergency or the COVID-19 pandemic, moments received by *district employees* during time off work due to an approved alternative work schedule.

3. Establishing goals and objectives of health-related programs as part of the school's annual or multi-year plan.

4. Reviewing school or district procedures and rules.

5. Attending or facilitating school or unit staff meetings, training, or board meetings.

6. Performing administrative or clerical activities related to general building or district functions or operations.

7. Providing general supervision of staff, including supervision of student teachers or classroom volunteers, and evaluation of employee performance.

8. Reviewing technical literature and research articles.

9. Other general administrative activities of a similar nature as listed above that cannot be specifically identified under other activity codes.

11. Not-Paid/Not-Worked – R

Non-paid time/non-work time is time during the school work day for which a participant in the time study is not working AND is not being compensated. Examples of activities reported under this code:

1. Part-time/Contracted staff whose sampled moment occurs during non-scheduled work hours, including *Contracted staff* on approved alternative work schedules

2. Staff member takes an unpaid day off during the sampled moment

3. Non-paid sick time.

4. Non-paid leaves of absence.

5. No longer employed by the program

6. Any sampled moments during a quarter for unfilled vacant positions