

New Job Classification Assessment Tool For Medicaid Administrative Claiming in Local Health Jurisdictions

Not all job classifications are included in the CMS approved Cost Allocation Plan. If you have a job classification that is not included but performs MAC activities, please complete the following information. The HCA-LHJ Workgroup will complete a review and determine if the new job classification is allowable for participation in the MAC program.

Please complete the following and submit to Jon Brogger, Medical Assistance Program Specialist at Jon.brogger@hca.wa.gov, and copy Carrie Riemann, Hansine Fisher & Associates at carrie@hfa3.org.

Your name	Date
Your phone number	Your email
Name of Agency (LHJ/Claiming Unit)	Cost Pool
Job Classification/Position Title	Subunit or Subcontractor
<p>1. Does this classification require the employee to have Skilled Professional Medical Professional (SPMP) education and training? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Does this classification directly support Skilled Professional Medical Professional (SPMP) staff? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Does a Skilled Professional Medical Professional (SPMP) staff directly supervise staff in this classification? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. Is this classification responsible for program planning, project development, and /or interagency coordination of services? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>5. Is this classification responsible for program planning, project development, and /or interagency coordination of services? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Provide a brief description of the duties and responsibilities for this classification. Please summarize the MAC and non-MAC activities.</p>	

Below is a list of the MAC activities and a brief summary of each MAC code. Please select each activity that this classification is likely to perform as part of the daily work responsibilities.

Medicaid Outreach (Code 1b)

- Outreach to Medicaid Providers to Accept Medicaid Patients (Code 2b)
- Facilitating Applications for the Medicaid Program (Code 3b)
- Arranging Transportation for Medicaid Services (Code 6b)
- Interpretation for Medicaid Services for Adults (Code 7b)
- Interpretation for Medicaid Services for Children under 21 (Code 7d)
- Program Planning, Policy Development and Interagency Coordination Related to Medicaid Services (Code 8b)
- Medical/Medicaid Related Training (Code 9b)
- Referral, Coordination, and Monitoring of Medicaid Services (Code 10b)
- Medicaid Pediatric Immunizations Activities (Code 11b)
- SPMP Activity in Support of the Medicaid State Plan (Code 12b)
- Coordination, Claims Administration, and Oversight of MAC Programs (code 13b)

Summary of Activity Codes

See the coordinator manual for full descriptions.

Code 1b. MEDICAID OUTREACH: Activities that inform eligible or potentially eligible individuals about Medicaid and how to access the program; such activities include bringing potential eligibles into the Medicaid system for the purpose of the eligibility process. Both written and oral methods may be used. This includes related clerical work, correspondence, and travel.

Code 2b. OUTREACH TO MEDICAID PROVIDERS TO ACCEPT MEDICAID PATIENTS: Targeted outreach activities that encourage Medicaid providers to accept Medicaid beneficiaries into their care (encouraging dentists to accept Medicaid children as their patients, for example). This includes related clerical work, correspondence, and travel. Use the Medicaid program planning code (Code 19b) when working with other agencies to increase provider participation in the Medicaid program.

Code 3b. FACILITATING APPLICATIONS FOR MEDICAID PROGRAMS: Activities that assist individuals and families in the Medicaid eligibility process. This includes related clerical work, correspondence, and travel. This activity does not include the actual determination of Medicaid eligibility.

Code 6b. ARRANGING TRANSPORTATION FOR MEDICAID SERVICES: Assisting individuals and families in obtaining 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 obtaining transportation. This includes related clerical work, correspondence, and travel.

Code 7b. INTERPRETATION FOR MEDICAID SERVICES FOR ADULTS: Arranging for or providing translation or interpretation services (oral and signing) for adults as part of a Medicaid service. This includes related clerical work, correspondence, and travel. NOTE: Employees of or interpreters under contract to the LHJ may only use Codes 7a-7d if they meet HCA qualifications to be an “authorized interpreter”.

Code 7d. INTERPRETATION FOR MEDICAID SERVICES FOR CHILDREN UNDER 21 YEARS: Arranging for or providing translation or interpretation services (oral and signing) for children under 21 as part of a Medicaid service. This includes related clerical work, correspondence, and travel. NOTE: Employees of or interpreters under contract to the LHJ may only use Codes 7b & 7d if they meet HCA qualifications to be an “authorized interpreter”.

Code 8b. PROGRAM PLANNING, POLICY DEVELOPMENT, AND INTERAGENCY COORDINATION RELATED TO MEDICAL SERVICES: Activities associated with the development of strategies to improve the coordination and delivery of medical, dental, and mental health services, and when performing collaborative activities with other agencies and/or providers.

Employees whose position descriptions include program planning, policy development, and interagency coordination may use this code. 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 10b, Referral, Coordination and Monitoring of Medicaid Services. This includes related clerical work, correspondence, and travel.

Code 9b: MEDICAL/MEDICAID RELATED TRAINING: Coordinating, conducting, or participating in training events regarding the benefits of Medicaid related services, and how to assist individuals and families to access such services and how to more effectively refer them for services. This includes related clerical work, correspondence, and travel.

Code 10b. REFERRAL, COORDINATION, AND MONITORING OF MEDICAID SERVICES: Making referrals for, coordinating, and monitoring the delivery of Medicaid covered services such as medical, dental, mental health, substance abuse, or family planning. This includes related clerical work, correspondence, and travel. Activities that are an integral part of or an extension of a medical service or targeted case management (e.g., patient follow-up, assessment, counseling, education and/or consultation, and billing activities) must be reported under Code 5, Direct Medical Services.

Code 11b. MEDICAID PEDIATRIC IMMUNIZATION PROGRAM ACTIVITIES: Activities related to the Medicaid Pediatric Immunization Program. This includes related clerical work, correspondence, and travel.

Code 12b. SPMP ACTIVITY RELATED TO THE ADMINISTRATION OF THE MEDICAID STATE PLAN: Only staff that meet the criteria for Skilled Professional Medical Personnel may use this code when their skilled professional medical education and training are required to perform the activity, and the activity is in support of the Medicaid State Plan. Medicaid providers must use Code 5 (Direct Medicaid Service) when performing any SPMP activity that is integral to or an extension of direct patient care, and reimbursed through the Medicaid program.

Use when skilled professional medical education and training is required to perform medically related activities in support of the Medicaid State Plan. Includes assessing the need for or consulting with Medicaid providers about the need for and/or adequacy of an individual’s medical care and treatment. Includes related clerical work, correspondence, and travel.

Code 13b. Coordination, Claims Administration, and Oversight of MAC Program: Reserved for use by the individuals designated by the LHJ to manage or coordinate components of the claiming unit’s MAC program – the time surveys, invoicing, or overall program administration. This Includes initiating or responding to emails or voicemails, paperwork, clerical activities, staff travel, and training directly related to performing these activities.