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INTRODUCTION
The purpose of this Health Care Authority (HCA) Medicaid Administrative Claiming (MAC) Random Moment Time Study (RMTS) Coordinator Manual (Manual) is to provide an overview of the MAC program and the roles and responsibilities of the Washington State Courts Juvenile Service Divisions (WSCJSD) MAC Coordinator/backup for the RMTS. This Manual also provides step-by-step instructions for completing the Coordinator’s duties.

PURPOSE OF THE WASHINGTON STATE MAC PROGRAM
Federal funds are available through the HCA MAC program to reimburse WSCJSD for the cost of activities that support the efficient administration of the Washington State Medicaid Plan. HCA contracts with multiple local governmental entities in addition to WSCJSD to carry out the goals of the MAC program, which include:
- Outreach to residents with no or inadequate medical coverage
- Explaining benefits of Washington Apple Health (Medicaid)
- Assisting residents in applying for Apple Health
- Linking residents to appropriate Apple Health covered services
- Informing individuals about Apple Health and the benefits or services offered through Medicaid.

Note: Application assistance activities solely for the purpose of determining eligibility for a qualified health plan within the Exchange will be coded as Non-Medicaid application assistance (see activity code 2a).

APPLICABLE LAWS, REGULATIONS AND PUBLISHED GUIDANCE
To participate in MAC the WSCJSD must comply with applicable federal and state laws, regulations, published guidance, or their successors. These include, but are not limited to:
- Section 1902 (a) of the Social Security Act
- Code of Federal Regulation (CFR) Title 42 and Title 45
- Medicaid School-Based Administrative Claiming Guide May 2003
- Revised Code of Washington (WAC)
- This Manual
- Uniform Administrative Requirements Cost Principles and Audit Requirements for Federal Awards
- OMB Circular A-133, Audits of States, Local Governments and Non-Profit Organizations
- Washington State Medicaid Plan

MAC PARTICIPATION REQUIREMENTS
INTERLOCAL AGREEMENT WITH HCA
WSCJSD must enter into an Interlocal Agreement with HCA in order to participate in the MAC program. The contract must be fully executed (signed by both parties) prior to the first calendar quarter in which WSCJSD first participates in the MAC Program.

HCA-UMASS AGREEMENT
HCA has entered into a contract with the University of Massachusetts Chan Medical School (UMass) for the operation of the statistically valid RMTS model and for the day-to-day administration of the time study and claim calculations. HCA and UMass meet on a regular basis and have worked closely to develop and implement the RMTS model for WSCJSD.
HCA ADMINISTRATIVE FEES

The administrative fee for the MAC program and the UMass contract fee is intended to cover the cost of staff effort at the HCA and UMass to administer the program. WSCJSD is responsible for paying HCA this fee and the process for HCA to collect will be automated and will be two line items withholding from each quarterly claim.

HCA can provide more information if you have any questions.

SUBCONTRACTORS

Subcontracting is not permitted for WSCJSD in the MAC Program.

MAC COORDINATOR AND BACKUP

WSCJSD is required to establish a MAC Coordinator and Backup Coordinator. These coordinators are responsible for monitoring the MAC program to ensure compliance with all applicable laws, regulations, and guidelines specific to MAC, and are required to comply with all roles, responsibilities, limitations, restrictions, and documentation requirements described in the HCA MAC contract, manuals, training materials or other documentation provided. The MAC coordinator is responsible for ensuring all aspects of the time study are functioning and in compliance in addition to ensuring all aspects of the claiming/invoicing process are functioning and in compliance. HCA expects the MAC program to be managed similarly to other federal awards and expects the Coordinator to report to, or work closely, with an administrator assigned oversight authority within the Washington State Courts Juvenile Service Divisions system.
THE ROLE OF THE MAC COORDINATOR

The MAC Coordinator is responsible for the participation of WSCJSD in the MAC program. This portion of the Manual provides step-by-step instructions for managing the time study components of the MAC program.

The MAC Coordinator responsibilities are best understood as a set of tasks which are generally time-limited to before, during, and after the quarter, as well as annual and ongoing tasks. There are many resources available to help you understand your responsibilities and ensure you meet program requirements and deadlines.

MAC PARTICIPATION TASKS

This list of tasks offers a step-by-step process for the successful management of your MAC program. As laid out below, the list includes explanations of why the tasks must be completed and refers to more detailed sections of the Manual and supporting documents.

BEFORE THE QUARTER STARTS

STEP 1: Identify staff who will participate in the time study.

STEP 1a: Review Current Time Study Participants
- Update participant information and/or status in the RMTS system.
- Verify that no participants are 100% federally funded.
- Verify or update the participant’s work schedule

STEP 1b: Identify New Time Study Participants
- Verify the participant has an “Eligible Job Classification.” If the classification is not listed but the participant regularly performs MAC activities, it must be submitted to HCA for review and approval.
- Remove any participants that are 100% federally funded or have 100% of their costs in your agency’s indirect rate.
- Enter participant demographics, work schedule and other data into the RMTS system.

STEP 2: Update the WSCJSD Calendar in the RMTS
- Update the quarterly calendar in the RMTS system. This calendar sets the standard business days, holidays, and closures.

STEP 3: Certify the Participant List
- You must certify the participant data entered is in compliance and accurate by checking the certification box in the RMTS. You cannot change the participant list once it has been certified. You must be sure all participant data (work schedules and demographics) is entered for new participants or updated for current participants, and that the agency calendar has been updated. The RMTS system will then auto generate a master list of RMTS participants for the quarter and store it. This list cannot be changed once it is certified.

STEP 4: Verify all staff participating in the MAC program have completed the required training prior to answering their first moment.
- New participants are notified of the training requirements via their RMTS “welcome” emails. The coordinator is responsible for ensuring all participants have completed the required trainings on time.

STEP 4a: Verify all participants have completed the annual online training.
- Staff cannot participate in the MAC program until they have completed the online training.

STEP 5: Have your IT staff review the latest version of the Technical Notes/System Requirements to ensure computer operating systems and browser versions are current.
DURING THE QUARTER

STEP 1: Monitor the RMTS to ensure moments are answered within 5 business days.
- You may view moments in the RMTS and e-mail participants asking them to complete their random moments.
- Follow up with participants who have not completed their moments in a timely manner; stress the importance of completion for the statistical validity of the RMTS.
- Use the “RMTS Participant Not Completed Report” to track the number of expired moments in the RMTS, by individual participant.

STEP 2: Update Participant Data as needed and submitting Change of Status Forms
- Limited participant data can be updated during the quarter. This includes updating email addresses or the participant’s work/employment status (termination, retirement, extended leave). “Extended leave” means the participant will be absent from work for the majority of the quarter (two or more months). These changes will not affect moments already drawn for the current quarter. Updates are made on the “participant” page in the RMTS.
- **Complete Change of Status (COS) form (See section on Change of Status Form)**
  If a participant’s status changes during a quarter complete and submit a COS. For example, if a participant is:
  - No longer employed
  - Retired
  - On extended leave / vacation
  - Change of job position

AFTER THE QUARTER ENDS

Confirm and enter actual staff salary and benefits into RMTS.
- This information is to be used for claim calculation within 120 days after the close of the quarter. (All salaries and benefits entered into the RMTS must be reconciled with WSCJSD Financial statements.)

ANNUALLY

STEP 1: Enter the WSCJSD Calendar for the year.
- Ensure all holidays and other known dates of closure are captured on the Calendar.
  **Note:** The calendar may also be updated before each quarter.

STEP 2: Ensure all MAC Participants Complete the Annual online Training
- Remind current RMTS participants of the annual online refresher training requirement.
- Verify participants received the RMTS notifications for accessing the training and the deadline.

ONGOING

- Provide training and technical assistance to staff participating in the MAC program as needed.
  - Follow up with participants who have incomplete moments
  - Monitor participation and minimum response rates
  - Participate in scheduled Medicaid meetings/trainings
  - Answer general participant questions throughout the quarter
  - Maintain required documentation
  - Serve as liaison between HCA
  - Assist with providing HCA with any requested documentation
The RMTS system (System) is a web-based program designed to determine the amount of time and corresponding cost that can be claimed to the MAC program. The System uses a common set of activity codes.

MAC ACTIVITY CODES

In order to determine the amount of time spent performing MAC activities and their related costs, staff participate in an RMTS. This method identifies the amount of time staff spent performing one or more federally-approved MAC activity codes. The activity codes represent all the work performed by KCSCJPS staff participating in the MAC program. Some of these activities are allowable for MAC reimbursement; others are not. The activity codes are summarized in the following chart. The Activity Code Descriptions provide detailed information on each code, as well as activity examples, and is available on the HCA website.

**SUMMARY OF MAC ACTIVITY CODES**

| Code 1a | Non-Medicaid Outreach |
| Code 1b | Medicaid Outreach |
| Code 2a | Facilitating Application for Non-Medicaid Programs |
| Code 2b | Facilitating Medicaid Eligibility Determination |
| Code 3 | Non-Medicaid Other Program Activities |
| Code 4 | Direct Medical Services |
| Code 5a | Arranging Transportation for Non-Medicaid Services |
| Code 5b | Arranging Transportation for Medicaid Services |
| Code 6a | Arranging or Coordinating Non-Medicaid Translation or Interpretation |
| Code 6b | Arranging or Coordinating Translation or Interpretation Related to Medicaid Services |
| Code 7a | Program Planning, Policy Development, and Interagency Coordination Related to Non-Medicaid Services |
| Code 7b | Program Planning, Policy Development, and Interagency Coordination Related to Medical/Medicaid Services |
| Code 8a | Non-Medical/Non-Medicaid Related Training |
| Code 8b | Medical/Medicaid Related Training |
| Code 9a | Referral, Coordination, and Monitoring of Non-Medicaid Services |
| Code 9b | Referral, Coordination, and Monitoring of Medical/Medicaid Services |
| Code 10 | General Administration |

**ELIGIBLE JOB CLASSIFICATIONS**

The following job classifications have been approved to participate in the MAC program. Staff in these job classifications who perform allowable MAC activities as part of their regular work may be included in the MAC program. These examples are not all-inclusive. If you have a job classification that is not listed below, please consult with HCA. The HCA will work with UMass to evaluate the job classification to determine if it is allowable in the MAC program.
THE RANDOM MOMENT TIME STUDY

The RMTS is the primary basis of allocating allowable costs to the MAC program. The System allows participants to record their work activities at random moments during their standard work hours throughout the quarter. These random moments represent a one (1) minute interval of time.

When participants are responding to a moment, they will use the internet to log into the web-based System to record their activities. The participant will respond to four main questions in the System to document what they were doing during that moment. The questions will have several predefined responses to choose from, or the participant may free-type a response. The System will randomly assign moments throughout the entire quarter to all staff who are participating in the RMTS.

The System is comprised of the web-based time study and claiming systems. After the end of the quarter, the System calculates all the random moments to determine the percentage of time staff spent performing various activities. These time study results are used in the claiming system to calculate the amount of time staff spent performing various activities including MAC activities and calculate the MAC reimbursement amount. The System uses this data in conjunction with the WSCJSD specific expenditure data to generate the quarterly A19-1A Invoice Voucher (A19).

RMTS RESPONSE RATE AND STATISTICAL VALIDITY

It is a federal requirement that any RMTS used for the MAC program must be statistically valid and it must achieve 2,401 valid moments each quarter. To ensure there are enough valid moments to reach statistical validity, the RMTS includes a 15% oversample, for a total of 2,761 moments. The moments in each quarterly RMTS consist of all scheduled time within the individual work schedules of all participating staff. Agency holidays and weekends are excluded from the sample.

The RMTS generates a random sample of 2,761 moments prior to the start of the quarter. No participants will be assigned moments outside their work schedules. All moments must be completed within five (5) business days (Monday-Friday, excluding holidays), and be certified as true and accurate by the participant. Any moment completed after the five (5) business day deadline, not returned at all, or if HCA has requested additional information from a participant and the information has not been received within two (2) weeks, will be counted as invalid unless there is supporting documentation why the moment was not answered.

NON-COMPLIANCE AND CORRECTIVE ACTION

HCA and UMass will monitor the response rate of WSCJSD by reviewing the RMTS Compliance Status Report. If the 85% compliance rate is not met, the invalid moments are reported to a non-Medicaid time study code, and included in the calculation of time study results. Any non-response rate greater than 15% is unacceptable, and HCA will require remedial action:

- **Non-response rates greater than 15%:**
  - HCA will send written notification to the WSCJSD MAC Coordinator requesting a corrective action plan.
  - WSCJSD must develop and submit the corrective action plan to HCA for approval within 30 working days of HCA’s notification.
- Failure to provide a timely corrective action plan may result in contract termination.
  - 85% compliance rate must be met in the following quarter.
- **Non-response rates greater than 15% for two (2) consecutive quarters:**
  - HCA will reduce reimbursement by 35% when WSCJSD does not meet the 85% compliance rate for two consecutive quarters.
  - WSCJSD will be notified via certified mail of the reduced reimbursement.
  - 85% compliance rate must be met in the following quarter.
- **Non-response rates greater than 15% for three (3) consecutive quarters:**
  - HCA will deny all reimbursement for the third consecutive quarter.
  - HCA will evaluate on individual basis the WSCJSD continue participation in the MAC program.
  - The WSCJSD will be notified via certified mail of the withheld reimbursement and HCA decisions regarding continue participation of the MAC program.

WSCJSD must abide by all rules and limitations as outlined in the contract and this Manual. HCA may perform on-site monitoring visits at the WSCJSD when not in compliance, and/or need any additional support at any time in the program.
OVERVIEW OF THE RMTS SYSTEM

This section of the Manual contains an overview of the components of the RMTS, with a goal of providing a better picture of how the tasks that must be completed by the MAC coordinator fit into the larger RMTS system. Detailed instructions for using the RMTS site are also included in this section.

THE LOG IN

Each participant has a unique user ID and password that is used to log into the RMTS site to respond to moments and to access training videos and other resources.

Login with your User ID and password

RMTS PASSWORD RESET

Lost passwords can be reset quickly and easily. Just follow the step by step directions and screen shot examples:

STEP 1: Navigate to the UMass website or from any of the RMTS emails you have received notifying you of a random moment, click on the hyperlink to take you to the RMTS website.
STEP 2: From the login page of the RMTS website, click on the “Forgot/Reset Password” hyperlink.

STEP 3: Enter your e-mail address where indicated, and click the ‘reset’ button.

STEP 4: An automated email will be delivered to your email box within a few minutes. This email contains your user ID and a temporary password that you can use to access the website. Copy the temporary password from the email, and then click on the website link in the email to return to the website.
STEP 5: At the login page of the RMTS website, paste in the temporary password where indicated (your User ID will be pre-populated if you accessed the URL from an email) and click the ‘login’ button.

STEP 6: If you have never logged in before, you will need to accept the User Access Agreement. Whether you have logged in before or not, you will be prompted to change your password. Choose a password you will easily remember and click the ‘save’ button.

PARTICIPANT MANAGEMENT

If you are logged into the WSCJSO Claiming system, select ‘RMTS Admin’ from the left-hand navigation menu to transfer to Participant Management.

The My Participants grid for the Random Moment Time Study (RMTS) identifies individuals that you have named to participate in the RMTS. Prior to the start of a quarter, the MAC Coordinator uploads or updates information about each RMTS participant into the RMTS system. The information includes the participant’s name, job description, claiming unit, supervisor, work schedule, and employment status.
From this screen, you will be able to:

- Add new participants
- Update information about current participants who will be continuing to participate
- De-activate staff members who will no longer be participating
- Re-activate staff who participated in the past, but did not participate in the most recent RMTS quarter

The system allows more than one way to complete most functions, including clicking on an action icon in the left hand column of the participant grid, opening a form by clicking on the Employee ID, making changes directly in the participant grid, or importing and exporting files.

**CONFIRM THAT YOU ARE WORKING IN THE CORRECT QUARTER**

The RMTS System will default to displaying participant information related to the Next Quarter. But it’s always a good practice to double check that the Next Quarter is displayed in the ‘Quarter’ navigational field near the top left of the screen.

**GENERAL INFORMATION ABOUT USING THE ‘MY PARTICIPANTS’ GRID**

On the grid, you will notice that the first four columns will freeze as you scroll to the right, and filters at the top of every field will help you search for information as you type in the field. Find what works best for you.

Maximize your screen to see as many fields as possible. Fields listed include: Employee ID, Last Name, First Name, Email Address, Job Description, Job Pool and Federally Funded %.
CREATING A PARTICIPANT LIST

UMass provides an Excel file template to complete the initial upload process. Dropdown menus, where provided, must be used to populate information (no manual entry allowed). For subsequent uploads the MAC Coordinator can use the extraction function to make any changes to future quarter participant lists.

**Note:** WSCJSJD may only include staff on the participant upload file if they are eligible to participate in the RMTS. Each field must be completed. If the System does not recognize any data entered, it will not allow the file to upload. Rather than completing a brand new spreadsheet each quarter, the MAC Coordinator extracts the current participant list from the system. Once extracted, new staff can be added, and updates to any of the fields made. After the spreadsheet is updated it must be uploaded for use in the upcoming quarter.

The following is an example of the participant spreadsheet:
Note there is no special naming convention requirement for the file name. We suggest you name the file something that will be helpful and meaningful to you so that you can accurately identify the file when you browse for it.

For example:

- Uploaded files names should include FY and the quarter.
  Example:  HP_EXT_KCSCIPS_ALL_1_2017_01.xls

- In order to upload an additional file, change the version number at the end of the file name.
  Example:  HP_EXT_KCSCIPS_1_2017_02.xls

### EXPLANATION OF THE INFORMATION NEEDED FOR THE PARTICIPANT UPLOAD FILE

<table>
<thead>
<tr>
<th>Title</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Court Name</td>
<td>KC Superior Court</td>
</tr>
<tr>
<td>Employee ID:</td>
<td>This is a number that is assigned by UMass. The participant will be identified by this number across participating quarters. Example UMMS26749</td>
</tr>
<tr>
<td>Last Name:</td>
<td>The last name of the participant.</td>
</tr>
<tr>
<td>First Name:</td>
<td>The first name of the participant.</td>
</tr>
<tr>
<td>Email address:</td>
<td>The worksite email address of the participant. No personal email addresses.</td>
</tr>
<tr>
<td>Job Pool:</td>
<td>All Participants</td>
</tr>
<tr>
<td>Job Description:</td>
<td>Employee of the KCSCIPS or a contracted staff</td>
</tr>
<tr>
<td>Active Yes or No:</td>
<td>Enter “Y” or “N” - This indicates the participant is actively participating in the time study.</td>
</tr>
<tr>
<td>Fed Fund %:</td>
<td>The percentage of salary that is paid from federal funds.</td>
</tr>
<tr>
<td>Supervisor email #1:</td>
<td>This is the first person other than the participant to receive a reminder if a participant fails to complete their moment 24 hours, 48 hours and 72 hours before the moment’s expiration date.</td>
</tr>
<tr>
<td>Supervisor email #2:</td>
<td>This is the second person other than the participant to receive a reminder at if a participant fails to complete 24 hours, 48 hours and 72 hours before the moment’s expiration date.</td>
</tr>
<tr>
<td>Supervisor email #3:</td>
<td>This is the third person other than the participant to receive a reminder if a participant fails to complete their moment 24 hours, 48 hours and 72 hours before the moment’s expiration date.</td>
</tr>
</tbody>
</table>

### EDITING INFORMATION

**STEP 1:** Click on the ‘pencil’ in the left hand column.

- As you tab across each field, it becomes interactive and you can update information.
- After your edits are complete, save your changes by clicking on the ‘green check mark icon’ in the left column, or cancel your changes and return to the grid view without saving by clicking on the ‘black reverse arrow’.
STEP 2: Click on the 'Employee ID'.

a. Edit Participant form opens. Make edits and click ‘Save’.

INACTIVATING PARTICIPANTS

If someone is no longer going to participate in the RMTS program for the next quarter or indefinitely, they can be marked as inactive. If someone leaves during the quarter and moments have been generated, see the section on Change of Status (COS) forms.
a. You will see a confirmation box. Click ‘Yes’.

![Confirmation Box]

b. The person’s information will no longer be displayed on the grid (unless you choose the option to display inactive participants).

**STEP 2: Click on the ‘Employee ID’**.

![Employee ID Grid]

a. Edit Participant form opens. Change ‘Active Yes or No’ field to ‘No’. Click ‘Save’.

![Edit Participant Form]

---

**RETURNING INACTIVE PARTICIPANTS**

When a prior RMTS participant returns to the RMTS program for the next quarter, you can reactivate their participant information to include them. This prevents having to re-enter information.

**Option 1:** Click on the box labeled ‘Include Inactive Participants’ on the right side, above the grid.
a. Click on the ‘green arrows’ in the left hand column.

b. You will see a confirmation box. Click ‘Yes’.

c. The person’s information will be displayed on the grid as an active participant.

Option 2: Click on the ‘Employee ID’.
a. Edit Participant form opens. Change ‘Active Yes or No’ field to ‘Yes’. Click ‘Save’.

**ADDITION NEW PARTICIPANTS**

**STEP 1**: Click on the ‘Add New Participant’ link at the top of the grid.

a. Add Participant form opens. Add the appropriate information. Click ‘Save’.
**EXTRACTING PARTICIPANT FILES**

Following the initial quarter, the MAC Coordinator can extract a file listing all of the time study participants from the System. This file can be edited to create the next quarter’s eligible participant list and uploaded.

**STEP 1:** Select ‘RMTS Admin’ from the left-hand navigation menu to transfer to Participant Management.

**STEP 2:** From the ‘Quarter’ dropdown menu, select the quarter you want to extract your participant file from.

**STEP 3:** Click on the ‘Export to Excel’ icon on the right-side of the screen.

**STEP 4:** Make any required changes to participant’s information.

**STEP 5:** Add new participants.

**STEP 6:** Delete any participant as necessary

**STEP 7:** Name and save your file:

i. Note there is no special naming convention requirement for the file name.

ii. We suggest you name the file something that will be helpful and meaningful to you so that you can accurately identify the file when you browse for it.

iii. File names cannot exceed 45 characters in length.

iv. The file format cannot be changed (i.e., the file must be in the latest version of Excel (.xlsx))
Example: (HP_EXT_KCSCJPS_ALL_1_2017_01.xls)

This file is ready for upload

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
<th>G</th>
<th>H</th>
<th>I</th>
<th>J</th>
<th>K</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Employee ID</td>
<td>Last Name</td>
<td>First Name</td>
<td>Email Address</td>
<td>Job Pool</td>
<td>Job Description</td>
<td>Active Yes or No Fed Fund %</td>
<td>Supervisor Email #1</td>
<td>Supervisor Email #2</td>
<td>Supervisor Email #3</td>
</tr>
<tr>
<td></td>
<td>HHM012666</td>
<td>Amarylin</td>
<td>Flower</td>
<td><a href="mailto:blue.amarylin@testemail.gov">blue.amarylin@testemail.gov</a></td>
<td>All Participants</td>
<td>Juvenile Probation Supervisor</td>
<td>YES</td>
<td>0</td>
<td><a href="mailto:super@pretend.mail">super@pretend.mail</a></td>
<td></td>
</tr>
<tr>
<td></td>
<td>HHM016686</td>
<td>Amarylin</td>
<td>Flower</td>
<td><a href="mailto:blue.amarylin@testemail.gov">blue.amarylin@testemail.gov</a></td>
<td>All Participants</td>
<td>Juvenile Probation Counselor</td>
<td>YES</td>
<td>0</td>
<td><a href="mailto:super@pretend.mail">super@pretend.mail</a></td>
<td></td>
</tr>
<tr>
<td></td>
<td>HMM027648</td>
<td>Boughinville</td>
<td>Ruby</td>
<td><a href="mailto:Ruby.Boughinville@testemail.gov">Ruby.Boughinville@testemail.gov</a></td>
<td>All Participants</td>
<td>Social Worker</td>
<td>YES</td>
<td>0</td>
<td><a href="mailto:super@pretend.mail">super@pretend.mail</a></td>
<td></td>
</tr>
</tbody>
</table>

UPLOADING PARTICIPANT FILES

Participant files must be uploaded 30 days before the start of each quarter, even if there are no changes from the current quarter. All participant files must be uploaded before moments are generated. This ensures an accurate pool of participants.

STEP 1: Click on the ‘Import’ icon on the right-side of the screen.

STEP 2: Confirm the Year and Quarter and then click ‘Browse’.

STEP 3: Select your file based on the name you assigned it and click ‘Upload’.

STEP 4: Review the Import Report to verify the changes. This report identifies all changes that your upload file will make to your participant list. These changes are detailed in three (3) sections:

- New Participants Added
- Deactivated Participants
- Upload Changes
### Confirmation Report

**Confirmation Date:** 12/12/2017 8:40:02 AM

**State/Entity:** KCSCIPS

**Unit:** K C Superior Court

**Quarter:** 2018 Q3 FY18

**File Name:** KCSC IPS FY18 Q3.xlsx

#### New Participants Added:

<table>
<thead>
<tr>
<th>Employee ID</th>
<th>First Name</th>
<th>Last Name</th>
<th>Email Address</th>
<th>Job Pool</th>
<th>Job Description</th>
<th>Active</th>
<th>Yes or No</th>
</tr>
</thead>
<tbody>
<tr>
<td>UJMMS99791</td>
<td>Blue</td>
<td>Berry</td>
<td><a href="mailto:berry.blue@tesmail.gov">berry.blue@tesmail.gov</a></td>
<td>All Participants</td>
<td>Social Worker</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

#### Deactivated Participants:

<table>
<thead>
<tr>
<th>Employee ID</th>
<th>First Name</th>
<th>Last Name</th>
<th>Email Address</th>
<th>Deactivated Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>UJMMS09999</td>
<td>Dahlia</td>
<td>Azure</td>
<td><a href="mailto:Azure.Dahlia@tesmail.gov">Azure.Dahlia@tesmail.gov</a></td>
<td>1/1/2018 12:00:00 AM</td>
</tr>
</tbody>
</table>

#### Upload Changes:

<table>
<thead>
<tr>
<th>Employee ID</th>
<th>First Name</th>
<th>Last Name</th>
<th>Field Name</th>
<th>New Value</th>
<th>Old Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>UJMMS26963</td>
<td>Peony</td>
<td>Climbing-Ivy Last Name</td>
<td>Climbing-Ivy Ivy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UJMMS26963</td>
<td>Peony</td>
<td>Climbing-Ivy Email Address</td>
<td><a href="mailto:Peony.Climbing-Ivy@tesmail.gov">Peony.Climbing-Ivy@tesmail.gov</a></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**STEP 5:** Review the changes to make sure that everything is accurate. Then select one of the following actions:

- **Review:** Click this button to export an Excel version of the report for further review. **Note:** If you select this option, you will need to return to the ‘Import Status’ tab to confirm or reject the upload file.
- **Confirm:** Click this button to confirm that the changes in the file are accurate and to process those changes.
- **Reject:** Click this button to reject the upload file if errors have been found. You will need to correct any errors and re-upload a new file.

**STEP 6:** Click on the ‘Import Status’ tab, click on the Excel Report icon to open the Imported Report and ‘Confirm’ the report if it is still in ‘Review’ status. The report should be displayed as ‘Successful’ when done.

---

**Note:** Changes and additions in the file will not be made to the system until this step has been completed. Participants who are not listed on the upload file will be deactivated for the upcoming quarter and will be reported on the “Deactivated Health Personnel” report.

**Note:** Files should not be left in Review status. If any files are left in Review status, they must be deleted in order to upload future files.

---

**COMPLETE QUARTER – FINALIZING PARTICIPANT MANAGEMENT**

When all updates have been completed, and before the submission deadline (One month before each RMTS quarter), click ‘Complete Quarter’ in the lower right hand corner. This will confirm that you have completed your updates for the next quarter and it will lock the system. If for any reason you realize you need to make changes after you have already marked a quarter as complete, contact UMass to open the Participant Management screens for you.
CHANGE OF STATUS REQUEST DURING THE QUARTER

If someone is not able to participate in the Random Moment Time Study after moments have been generated, you can submit a Change of Status Request using the ‘My Participants’ screens.

STEP 1: Locate the participant for the Change of Status and click on the ‘Employee ID’ for that person.

<table>
<thead>
<tr>
<th>Employee ID</th>
<th>Last Name</th>
<th>First Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>UMMS26652</td>
<td>Amaryllis-flower</td>
<td>Blue</td>
</tr>
<tr>
<td>UMMS76516</td>
<td>Aster</td>
<td>Fuchsia</td>
</tr>
<tr>
<td>UMMS26648</td>
<td>Bougainvillea</td>
<td>Ruby</td>
</tr>
</tbody>
</table>

STEP 2: Click ‘New Change of Status Request’
STEP 3: Select Change of Status Type from the drop-down menu.

STEP 4: Depending upon the Change of Status Type, other questions will be asked. When completed, click ‘Submit’.
STEP 5: You will receive a confirmation message. Click ‘Confirm’.

RMTS CALENDAR MANAGEMENT

The purpose of this section is to provide an overview of the calendaring feature within the RMTS System. This section also provides step-by-step instructions for how to successfully set up the work schedules specific, and participant-level calendars.

CALENDAR OVERVIEW

The System follows the state fiscal year which runs from July 1st through June 30th. The following table lists the dates for each quarter of a fiscal year.

<table>
<thead>
<tr>
<th>First Quarter</th>
<th>Second Quarter</th>
<th>Third Quarter</th>
<th>Fourth Quarter</th>
</tr>
</thead>
<tbody>
<tr>
<td>July’18 – Sept ’18</td>
<td>Oct.’18 – Dec.’18</td>
<td>Jan.’19 – March’19</td>
<td>April’19 – June’19</td>
</tr>
</tbody>
</table>

Prior to beginning the time study, WSCJSD must identify their general work hours, workdays, scheduled closures such as holidays and typical employee work shifts. The MAC Coordinator enters this calendar information into the System prior to the beginning of each quarter. All calendar changes must be made before moments are generated. Moments will only be generated during the days and hours the MAC Coordinator enters in the System’s calendar.

One month before each RMTS quarter, you will complete the following tasks:

- Annually, by June 10, enter your general calendar
- Quarterly, create any new Work Schedules
- Quarterly, edit your Work Schedule date and time information
- Review system-generated reports to ensure the accuracy of your Work Schedules

TASK ONE: ENTER HEALTH PERSONNEL CALENDARS

1. Click on the ‘Health Personnel’ Tab
2. Select ‘KC Superior Court’ from the Unit drop down menu
3. Select a participant from the ‘Health Personnel’ drop down menu
4. Select the correct Fiscal Year from the ‘Fiscal Year’ drop down menu
5. Click on the ‘Show Calendar’ button
6. Click on the ‘Generate Calendar’ button

The Work Schedule calendar is automatically populated with the non-moment days that were set up on the WSCJSD calendar. Enter any additional days off, or change days off as needed.

7. In the Shifts section, you may change the default start time and end time. Highlight the current time in the start/end field and enter the updated information. Select the save icon.
To change the hours for a specific day, follow the steps below:

- Select the day, (if multiple days, simply click on the selected days to turn them blue) highlighting it blue means it is selected. In the example above, all Thursdays are selected.
- To modify the hours, click on ‘Modify Shifts’
- The ‘Modify Shifts’ dialog box will appear. Select the red X to delete the current shift times
- Then enter the new start and end times. Carefully review the data entry. You must specify AM/PM.
- Select the ‘Add’ button
- Select the ‘Close’ button
8. To change days that are marked as Non-Moment Days (pink) and make them working days, simply click on the selected days so that they turn blue, then click on the button ‘Mark as Working Days’.

WELCOME EMAIL AND TRAINING

Prior to the start of the quarter, “welcome” emails are automatically sent to all new RMTS participants with instructions on how to login and establish a unique password. The welcome email lets new participants know they must complete online training before the quarter begins. All participants must complete online refresher training annually. The online training will help participants to:

- Log into the RMTS System
- Understand RMTS
- Answer a moment

As the RMTS Coordinator, you can monitor the completion of the online quarterly training (for new participants) and annual training (for all participants) using the RTMS training reports. Participants will be prevented by the System from answering moments until they have completed the online training.

If you have not yet completed the Online Training for RMTS Participants, you can do so by following these step by step directions and screen shot examples:
STEP 1: Clicking on ‘Online Training’ from the left navigation bar.

### Online Training Materials

<table>
<thead>
<tr>
<th>Title</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>KCSCJPS RMTS Training</td>
<td>KCSCJPS RMTS Participant Training</td>
</tr>
</tbody>
</table>

STEP 2: To complete the Online Training module, click on the Hyperlink for ‘WA RMTS’.

### Online Training Links

To access online training, select the appropriate link.

<table>
<thead>
<tr>
<th>Title</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>KCSCJPS RMTS Training</td>
<td>KCSCJPS RMTS Participant Training</td>
</tr>
</tbody>
</table>

EMAIL NOTIFICATION

Participants will receive an email notification at the exact designated moment. The notice will include the date and time of the random moment as well as a unique URL that links the participant to the moment in question. Participants have up to five (5) working days to complete moments. Moments are no longer available after the five (5) working day grace period. If a moment is not completed, participants will receive email reminders from the System at 24 hours, 48 hours, and 72 hours before the moment expires. The email reminders are also sent to the MAC Coordinator and/or supervisor(s).

ANSWERING AND COMPLETING A RANDOM MOMENT

VIEWING MOMENTS

Once participants log into the system they will see two tabs: ‘Active Moments’ and ‘Prior Moments’. All unanswered moments will be listed under the Active Moments tab. All moments that have either been answered or have expired moments that were not answered within five (5) working days will be listed under Prior Moments. Below is an example of active moments:
ANSWERING A MOMENT

A moment consists of a series of questions the participant will complete according to the activity they performed precisely at the random moment. The questions, in chronological order, are:

- What type of activity were you doing?
- What specifically were you doing?
- What did this activity relate to?

PREDEFINED DROPODOWN RESPONSES

Each question has a set of predefined dropdown responses which correspond with activities they may be performing. Only one response is allowed for each question. If none of the predefined responses apply to that given moment, select 'other activity not listed above' and you will have the option to free type a response.

Note: Predefined dropdown responses are preferable to free-typed responses as this allows the System to allocate the correct activity code to the moment.
NARRATIVE DESCRIPTION

In addition to answering the three above questions, participants must provide a narrative description of the activity they recorded through the predefined dropdown responses. Once the participant selects a response for each question, a free type box appears, and the participant may enter up to 250 characters in the space provided to record their narrative.

Narratives must clearly describe why the activity was being performed and who was involved. Referral activities should specifically state to whom or where a referral was made, and coordination activities should clearly explain what services were being coordinated and specifically state who was involved. Example narratives include, but are not limited to:

- I was attending professional development training for license renewal.
- I was meeting with a client to follow-up on compliance with Court order.
- I was completing the daily attendance report to be forwarded to the front office.

Note: Due to public disclosure, HIPAA, and FERPA policies, the use of Personally Identifiable Information (PII) is prohibited in moment narratives.

COMPLETING A MOMENT

Once finished answering the three questions and entering a narrative, participants must check the box indicating they certify the answers are true and complete, and select submit. Participants must complete moments within five (5) working days after the sampled moment. The MAC Coordinator is responsible for monitoring and ensuring all participants complete moments in a timely manner. They can follow up with the participant and monitoring the RMTS Participant Moment Not Completed Report.
DOCUMENTATION TO SUPPORT AN RMTS MOMENT

HCA requires all participants maintain documentation for the activities they were performing during all time study moments. This documentation must be sufficiently detailed in order for HCA to determine whether the activities were necessary for the proper and efficient administration of the state Medicaid plan. It is the MAC Coordinator’s responsibility to ensure participants maintain adequate documentation and ensure it is accessible for review for a minimum of six (6) years as per **RCW 40.14.060**. Examples of supporting documentation include, but are not limited to:

- Calendars
- Chart notes
- Activity log

EDITING AN ANSWERED MOMENT

Participants have five (5) working days after the moment to edit responses. All moments previously completed within the quarter will be listed under the ‘Prior Moments’ tab. Participants select the moment they wish to edit to make changes.

QUALITY ASSURANCE AND PROGRAM ADMINISTRATION

A collaborative effort is required between HCA, UMass, and the WSCJSD to run a successful MAC program. HCA is responsible for administration and oversight of all MAC programs in the State of Washington. UMass provides technical assistance to HCA and the WSCJSD regarding the System. It is the responsibility of the WSCJSD to ensure their MAC program and participating staff comply with all HCA, state, and federal guidelines.

HCA ADMINISTRATION

HCA will provide oversight to the WSCJSD MAC program by:

- Training the primary and backup MAC Coordinators
- Monitoring MAC related training
- Collecting time study and claims data for review
- Identifying areas of concern and requesting corrective action plans, if necessary
- Managing all activity coding
- Reviewing ‘real time’ time study results
- Reviewing quarterly invoices and claimed costs
- Reviewing the WSCJSD supporting documentation for the time study and claim calculations
- Conducting a fiscal monitoring review at least once every three (3) years. The HCA fiscal review will consist of an in depth analysis of the local match funding source and prescribed revenue account codes to ensure CPE complies with all federal, state, HCA and MAC regulations. HCA may select additional quarters for further claims review as needed.
UMASS TECHNICAL SUPPORT

UMass provides technical support to HCA and their MAC Contractors. UMass has built this time study and claiming systems based on the unique needs of WSCJSD. UMass supports the dynamic needs in Washington by updating the System as needed and producing reports that consolidate various data elements. These reports are used for monitoring and reviewing time study and claiming results. The reports provide information such as:

Total numbers of:
• Participants
• Moments per participant
• Moments not answered

Identification of:
• Sampled participant
• Job title/description
• Assigned moments
• Participant responses

Trends in time study results:
• Incomplete or contradictory responses
• Non-responders
• Manually coded moments

WSCJSD OVERSIGHT

The WSCJSD is required to ensure their MAC program complies with all HCA, state, and federal guidelines, and is in support of the State Medicaid Plan. Major components of proper oversight include but are not limited to:

Training:
• Required for MAC Coordinators, backups, and participants
• Must be provided by UMass and/or HCA
• Proof of training must be documented
• Completion of moments is critical

Monitoring:
• Participant list for accuracy
• Salary and benefit data for accuracy
• Minimum response rates
• Resolving issues related to participation rates that fall below 85%
• Reports related to participation

RMTS MANAGEMENT REPORTS

The System generates many reports for the MAC Coordinator to review which assist in RMTS management. The reports display a range of historical or real-time information including moments, participant demographics, and compliance rates.

ACCESSING THE REPORTS

Once logged into the System the MAC Coordinator can review reports of the online training and time study. This section describes how to access and run reports for the online training and time study.
• To access training reports, select ‘Online Training’ then ‘Training Summary’.
• To access RMTS reports, select ‘Administrative Claiming’ then ‘Reports’. A list of all available reports will be displayed. Simply click on the report you wish to run.
TRAINING DOCUMENTS VIEWED REPORT

This report is located under ‘Online Training’, ‘Training Summary’ details the online training that RMTS participants have viewed and completed.

Example:

<table>
<thead>
<tr>
<th>Unit</th>
<th>Last Name</th>
<th>First Name</th>
<th>Employee ID</th>
<th>Job Type</th>
<th>Job Description</th>
<th>Email Address</th>
<th>Training Material Title</th>
<th>Date Accessed</th>
<th>Certification Date</th>
<th>Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>K C Superior Court</td>
<td>Amanda</td>
<td>Brown</td>
<td>UM0000357</td>
<td>Employee</td>
<td>Juvenile Probation Counselor</td>
<td><a href="mailto:brown.amanda@state.gov">brown.amanda@state.gov</a></td>
<td>KCS005-Rmts Training</td>
<td>10/12/2017 11:00 AM PT</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>K C Superior Court</td>
<td>Janet</td>
<td>Jones</td>
<td>UM0000358</td>
<td>Employee</td>
<td>Juvenile Probation Counselor</td>
<td><a href="mailto:jones.janet@state.gov">jones.janet@state.gov</a></td>
<td>KCS005-Rmts Training</td>
<td>10/12/2017 11:00 AM PT</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>K C Superior Court</td>
<td>Mark</td>
<td>Miller</td>
<td>UM0000359</td>
<td>Employee</td>
<td>Juvenile Probation Counselor</td>
<td><a href="mailto:miller.mark@state.gov">miller.mark@state.gov</a></td>
<td>KCS005-Rmts Training</td>
<td>10/12/2017 11:00 AM PT</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>K C Superior Court</td>
<td>John</td>
<td>Smith</td>
<td>UM0000360</td>
<td>Employee</td>
<td>Juvenile Probation Counselor</td>
<td><a href="mailto:smith.john@state.gov">smith.john@state.gov</a></td>
<td>KCS005-Rmts Training</td>
<td>10/12/2017 11:00 AM PT</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

TRAINING DOCUMENTS NOT VIEWED REPORT

This report is located under ‘Online Training’, ‘Training Summary’ and lists participants who have not completed the RMTS on-line training. It includes participant email addresses for the MAC Coordinator to send reminders.

Example:

<table>
<thead>
<tr>
<th>Unit</th>
<th>Last Name</th>
<th>First Name</th>
<th>Employee ID</th>
<th>Job Type</th>
<th>Job Description</th>
<th>Email Address</th>
<th>Training Material Title</th>
<th>Date Accessed</th>
<th>Certification Date</th>
<th>Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td>K C Superior Court</td>
<td>Fudge</td>
<td>Brenda</td>
<td>UM0000361</td>
<td>Employee</td>
<td>Juvenile Probation Counselor</td>
<td><a href="mailto:brenda.fudge@state.gov">brenda.fudge@state.gov</a></td>
<td>KCS005-Rmts Training</td>
<td>10/12/2017 11:00 AM PT</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>K C Superior Court</td>
<td>Spring</td>
<td>Hope</td>
<td>UM0000362</td>
<td>Employee</td>
<td>Social Worker</td>
<td><a href="mailto:hope.spring@state.gov">hope.spring@state.gov</a></td>
<td>KCS005-Rmts Training</td>
<td>10/12/2017 11:00 AM PT</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>K C Superior Court</td>
<td>John</td>
<td>Smith</td>
<td>UM0000363</td>
<td>Employee</td>
<td>Juvenile Probation Counselor</td>
<td><a href="mailto:smith.john@state.gov">smith.john@state.gov</a></td>
<td>KCS005-Rmts Training</td>
<td>10/12/2017 11:00 AM PT</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>K C Superior Court</td>
<td>Lisa</td>
<td>Patel</td>
<td>UM0000364</td>
<td>Employee</td>
<td>Social Worker</td>
<td><a href="mailto:patel.lisa@state.gov">patel.lisa@state.gov</a></td>
<td>KCS005-Rmts Training</td>
<td>10/12/2017 11:00 AM PT</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

RMTS PARTICIPANT MOMENTS COMPLETED TO DATE REPORT

This report is located under ‘Administrative Claiming’, ‘Reports’ and gives information on moments already completed by the participants and the final status of the moment.

Example:

<table>
<thead>
<tr>
<th>Name</th>
<th>Emp ID</th>
<th>Job Desc</th>
<th>Job Code</th>
<th>Work Schedule</th>
<th>Moment Date</th>
<th>End of Grace Period</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashley Fuller</td>
<td>UMM0056510</td>
<td>Juvenile Probation Counselor</td>
<td>1</td>
<td>Full</td>
<td>10/10/2017</td>
<td>01:22 PM</td>
<td><a href="mailto:fuller.ashley@state.gov">fuller.ashley@state.gov</a></td>
</tr>
<tr>
<td>Michael Adameaux</td>
<td>UMM0056511</td>
<td>Juvenile Probation Counselor</td>
<td>1</td>
<td>Full</td>
<td>10/10/2017</td>
<td>01:22 PM</td>
<td><a href="mailto:adameaux.michael@state.gov">adameaux.michael@state.gov</a></td>
</tr>
<tr>
<td>Holly Greene</td>
<td>UMM0056512</td>
<td>At-Risk Youth Case Manager</td>
<td>1</td>
<td>Full</td>
<td>10/10/2017</td>
<td>01:22 PM</td>
<td><a href="mailto:green.holly@state.gov">green.holly@state.gov</a></td>
</tr>
<tr>
<td>Javiera Hysen</td>
<td>UMM0056513</td>
<td>Juvenile Probation Counselor</td>
<td>1</td>
<td>Full</td>
<td>10/10/2017</td>
<td>01:22 PM</td>
<td><a href="mailto:hysen.javiera@state.gov">hysen.javiera@state.gov</a></td>
</tr>
<tr>
<td>Gladys Baeza</td>
<td>UMM0056514</td>
<td>Juvenile Probation Counselor</td>
<td>1</td>
<td>Full</td>
<td>10/10/2017</td>
<td>01:22 PM</td>
<td><a href="mailto:baeza.gladys@state.gov">baeza.gladys@state.gov</a></td>
</tr>
</tbody>
</table>

RMTS PARTICIPANT MOMENT NOT COMPLETED REPORT

This report is located under ‘Administrative Claiming’, ‘Reports’ and provides details of moments the participant has not completed. It allows the MAC Coordinator to identify participants who have not completed a moment so they can follow up with the participant.
PARTICIPANT QUARTERLY UPDATE REPORT

This report is located in RMTS Admin under the Reports drop down menu, and shows the completion status of the participant list.

Example:

RMTS CALENDAR CONFIGURATION REPORT

This report is located under ‘Administrative Claiming’, ‘Reports’, and confirms that individual work schedules have been entered into the system for the quarter.

Example:
CALENDAR DATA ENTRY REPORT

Example:

<table>
<thead>
<tr>
<th>MAC Contractor</th>
<th>KCSJPS</th>
<th>User Id</th>
<th>Calendar?</th>
<th>Quarter</th>
<th>Date</th>
<th>In Data Scrubbed?</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year</td>
<td>2018</td>
<td>12/14/2017</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Minutes for Moments</td>
<td>0</td>
<td>10,905</td>
<td>14,885</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day</td>
<td>10/01/2017</td>
<td>10/02/2017</td>
<td>10/03/2017</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unit</td>
<td>Work Schedule</td>
<td>Health Personnel Available for Moments</td>
<td>Minutes/Day</td>
<td>Start/End Time</td>
<td>Minutes/Day</td>
<td>Start/End Time</td>
<td>Minutes/Day</td>
</tr>
<tr>
<td>KC Superior Court</td>
<td>Arizona, Tucson</td>
<td>Blue</td>
<td>540 08:00 AM - 05:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KC Superior Court</td>
<td>Arizona, Tucson</td>
<td>540 08:00 AM - 05:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KC Superior Court</td>
<td>Arizona, Tuscon</td>
<td>480 08:30 AM - 04:30 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KC Superior Court</td>
<td>Arizona, Tucson</td>
<td>480 08:30 AM - 04:30 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KC Superior Court</td>
<td>Arizona, Tucson</td>
<td>540 08:00 AM - 05:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KC Superior Court</td>
<td>Arizona, Tucson</td>
<td>540 08:00 AM - 05:00 PM</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

RMTS PARTICIPATION COMPLIANCE STATUS REPORT

This report is located under ‘Administrative Claiming’, ‘Reports’, and provides the following details:

- How many moments generated during the quarter
- How many moments have occurred to date
- How many moments are completed, and the percentage of completed moments to total quarterly moments
- Number of moments not completed and expired
- Number of moments not completed and not expired
- Number of moments completed to date and total number of moments for the quarter

Example:

| KCSCJPS RMTS Participation Compliance Status Report |
|----------------|--------------------------------------------------|
| Run Date: | 12/12/2017 |
| Run Time: | 07:10 AM PT |
| MAC Contractor | KCSJPS |
| Unit | KC Superior Court |
| Year | 2018 |
| Quarter | 2 |
| Job Code: | 1 |
| Total Number of Moments | 2762 |
| Number of Moments occurred to date | 2162 |
| Number of Moments completed to date | 1870 |
| Number of Moments "Left/LOA" for quarter | 132 |
| Number of Moments "Left/LOA" to date | 105 |
| Number of Moments not completed and expired | 107 |
| Number of Moments not completed and not expired | 553 |
| Compliance Tracking To Date: |
| (Number of Moments Completed to date) / (Number of moments Occurred to Date - "Left/LOA" to date): | 91% |
| End of Quarter Compliance Rate: |
| (Number of Moments completed to date) / (Total Number of Moments for quarter - Number of Moments "Left/LOA" for quarter): | 92% |
**TECHNICAL NOTES | SYSTEM REQUIREMENTS**

UMass recommends that all computer operating systems and browser versions be supported by their software vendor. Each vendor’s policy varies so it is important to keep current with the supported software.

### WORKSTATION REQUIREMENTS

Operating Systems - Windows XP and newer Macintosh

### WEB BROWSERS

Internet Explorer 10 – 11.0 with MS Windows XP, Windows 7, or Vista
Microsoft Edge
Safari 4.1 or Higher
Mozilla Firefox 46.0 or Higher; utilize all their automatic updates
Google Chrome 54 or Higher

**Note:** Internet Explorer web browser is not supported on Macintosh operating system. Safari should be used instead of IE. Lifecycle policy and supported versions


**Note:** A change in support occurred on January 12, 2016,

https://support.microsoft.com/en-us/gp/microsoft-internet-explorer

### COOKIES

Workstations: Enable cookie in browser.
See “Instructions for Finding your Browser/Enabling Cookies”

### WEB FILTERS

Workstations should allow access to the following URL
Production Secure connection: [https://www.chcf.net/chcfweb/](https://www.chcf.net/chcfweb/) and [https://cbe-rmts.chcf-umms.org/](https://cbe-rmts.chcf-umms.org/)

### EMAIL

Email should allow delivery from MAC@HCA.WA.gov and MedicaidAdmMatch@umassmed.edu in large quantities on a single day.

### INSTRUCTIONS FOR ONLINE TRAINING APPLICATION

Flash Player is needed to run the Instructions for online training program. The following link [http://www.adobe.com/software/flash/about/](http://www.adobe.com/software/flash/about/) has a connection to Player Download Center, which will walk you through the process of downloading the most recent version of Player. It takes about two minutes. MP4 files can be opened with Windows Media Player, and other multi-format media players like VLC, QuickTime, and more.

### SYSTEM ADMINISTRATION REQUIREMENTS

**COOKIES**

System administrator: If there is a proxy server, set proxy NOT to cache the www.chcf.net domain.

**ACTUAL WEB SITE URL**

[https://www.chcf.net/chcfweb/](https://www.chcf.net/chcfweb/) and [https://cbe-rmts.chcf-umms.org/](https://cbe-rmts.chcf-umms.org/)

**Note:** www.chcf.net cookies (sessions) are tied to the URL and IP address
ROUTERS

If SBC IP address needs to be explicitly defined on routers, SBC IP address is 146.189.217.25, 146.189.217.92 and 146.189.217.21

EMAIL

Email servers should allow email delivery from MAC@HCA.WA.gov and MedicaidAdmMatch@umassmed.edu

Email server IP – emails may be sent through the following mail gateways:
- 146.189.195.117
- 146.189.195.118
- 146.189.144.105
- 146.189.144.106
- 146.189.144.107
- 146.189.144.147
- 146.189.144.148
- 146.189.144.149

WEB FILTERS

Allow access to the following URL
Production Site Secure Connection: https://www.chcf.net/chcfweb/ and https://cbe-rmts.chcf-umms.org/

INSTRUCTIONS FOR FINDING YOUR BROWSER/ENABLING COOKIES

Internet Explorer
Choose Help > About Internet Explorer
Find out Internet Explorer version.

Safari
Choose Help
Find out Safari version

Mozilla Firefox
1. Choose Help
2. Find out Mozilla version

ENABLING COOKIES

Internet Explorer 10 - 11 Choose Tools > Internet Options
Click the Privacy tab
Click the Default and choose Medium level

Mozilla Firefox
Choose Tools > Options
Select Privacy
Click Accept cookies from sites
DOWNLOAD INTERNET BROWSER

Use the following web sites to download a free copy of the latest browser for:

**Internet Explorer**  

**Safari**  

**Mozilla Firefox**  

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CLAIMING PROCESS

OVERVIEW

The following describes how to complete and submit a Medicaid Administrative Claiming (MAC) claim.

CLAIMING PROCESS OVERVIEW

The quarterly Medicaid Administrative Claiming process is designed to utilize the participant data and time study results from the RMTS as the building blocks for calculating an Administrative Activity Claim. Additional data on actual costs/expenditures per quarter are uploaded and/or entered into the system and the system performs the calculations.

Elements of the claim include:

- Quarterly state-wide time study results for each RMTS group are calculated following the end of the quarter.
- The WSCJSD MAC Coordinator enters quarterly claim data (participant salary/benefits).
- WSCJSD prepares the Certificate of Indirect Costs, Certified Public Expenditures (CPE), and the A19 Invoice Voucher to assure they’re signed and dated by the authorized WSCJSD official.
- The WSCJSD emails the Certificate of Indirect Costs, Certified Public Expenditures (CPE), and A19 Invoice Voucher to HCA for processing and approval.
- HCA staff will enter the Indirect Costs in the RMTS System and will review and approve the quarterly CPE and A19. The CPE and A19 is forwarded to HCA fiscal to process.
  - If there are questions regarding the claim, HCA will notify the WSCJSD MAC Coordinator.
- Approved A19 invoices will be processed by HCA within thirty (30) calendar days.

EXTRACTS AND UPLOADS

This section will go over how to add quarterly salary and benefit data into the system. To create and manage data manually, please refer to the Data Submission Section below.

EXTRACTING FILES

By the time an Administrative Activity Claim is being processed, the entities have already completed the RMTS for the quarter. Therefore, a list of active participants for that quarter can be extracted from the system. This list can be used to create an editable template to update in order to be uploaded with salary and benefit data.

**STEP 1:** Under the ‘Administrative Claiming’ tab, select ‘File Extract’.

**STEP 2:** Using the drop-down menus, select **Extract Type:** “Health Personnel Extract”,  
**MAC Contractor:** “KCSCJPS”,  
**Unit:** “All”, Year, and Quarter. Year and Quarter are based on fiscal year.
For example:

Q1 2017 = July-September 2016
Q2 2017 = October-December 2016
Q3 2017 = January-March 2017
Q4 2017 = April-June 2017

STEP 3: Click ‘Submit’. The file can be opened or saved in Excel.

Example:

CREATING AN UPLOAD FILE

Use the extracted data to populate the file to be uploaded.

Example:


Tip: Remove the ‘Email Address’ and ‘Job Pool’ columns from the extract file first, then remove the columns to the right including all 3 ‘supervisors’. Then simply add ‘Salary’ and ‘Employer Paid Benefits’.

When saving the file to upload, the naming convention is: HP_CC_state_VendorID_Qtr_Year_Version#. Please ensure that your system has the latest Microsoft Excel product, at least Microsoft excel 1997-2003 or above.

Example:

HP_CC_KCSCJPS_KCSC_1_2018_01.XFR
UPLOADING FILES

Upload the file to add salary and benefits data to the claim.

STEP 1: Under the ‘Administrative Claiming’ tab, select ‘File Upload’.

![File Upload Screenshot]

STEP 2: Click on either ‘Unit’ or ‘Year’ to change the unit and fiscal year.

STEP 3: Select ‘HP_CC’ under component. Click ‘Browse’ to find your file. Click ‘Open’.

Note: Files must follow the naming convention described on the previous page.

![File Upload Screenshot]

STEP 4: Click ‘Upload’. The file will show up on the uploaded list below and will take some time before it is ready to be checked. You will need to click ‘Refresh’ after a few minutes for the file status to change.

![Uploaded Files Table]

STEP 5: After the file is uploaded and there are no errors, click ‘Review’ to review the file for errors and changes.

Note: If your file has errors, you will need to click on ‘Error’ and then ‘View Detailed Report’ to review the issues that caused the file to fail. Once you have fixed the problems in the file, delete the error file by checking the box next to the file and clicking ‘Delete’. Then upload the corrected file.

![File Status Table]

STEP 6: Review the New Health Personnel, Deactivated Health Personnel, and Updates by clicking on the appropriate ‘View Detailed Report’ link. If changes need to be made to the file, the file will need to be deleted and re-uploaded.
and checked again. Once everything is correct, check the ‘Verified Upload File Results’ box and click ‘Upload’ to upload the file.

**Note:** Changes and additions in the file will not be made to the system until this step has been completed.

**STEP 7:** When the file is submitted and uploaded, the status will change to ‘Successful’ when completed. You will need to click ‘Refresh’ after a few minutes for the file status to change. You may review the detailed reports at any time by clicking ‘Successful’ and ‘View Detailed Report’.

<table>
<thead>
<tr>
<th>File Name</th>
<th>Quarter</th>
<th>Date</th>
<th>Status</th>
<th>Uploaded By</th>
</tr>
</thead>
<tbody>
<tr>
<td>HP_CC_KCSCIPS_KCSC_2_2018_01.XFR</td>
<td>1</td>
<td>12/12/2017 11:42:15 AM</td>
<td>Successful</td>
<td>Gebet07</td>
</tr>
</tbody>
</table>

**DATA SUBMISSION**

The previous section, ‘Extracts and Uploads’ explains how to upload a large amount of information at one time. This section will go over how to review and/or manually enter salary data and other claim data if needed. If you are beginning a new claim each component will show ‘NOT Received’ and will change depending on the status of the claim. ‘Received’ will show after data is submitted, ‘Calculated’ if the claim has been calculated, ‘Approved’ if the claim is approved, and ‘Final’ after the claim has been finalized.

Example:
**SALARY DATA**

**STEP 1:** Under the ‘Administrative Claiming’ tab, select ‘Data Submission’.

**STEP 2:** Click on either ‘Quarter’ or ‘Year’ to change the quarter and fiscal year.

**STEP 3:** If no data has been entered or uploaded, you will click ‘NOT Received’ otherwise you will click ‘Received’ next to the name of the claim component you wish to enter. In this case, choose the Salary component.

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Job Position</th>
<th>HP ID Number</th>
<th>Full Time Equivalency</th>
<th>Fed. Fund. %</th>
<th>Salary Amount ($)</th>
<th>Total Benefits ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ackerman</td>
<td>Blue</td>
<td>1</td>
<td>UMMS26652</td>
<td>1</td>
<td>0</td>
<td>17347.07</td>
<td>7940.43</td>
</tr>
<tr>
<td>Aster</td>
<td>Fuchsia</td>
<td>1</td>
<td>UMMS75515</td>
<td>1</td>
<td>0</td>
<td>15114.44</td>
<td>7482.09</td>
</tr>
<tr>
<td>Boudreau</td>
<td>Ruby</td>
<td>1</td>
<td>UMMS26448</td>
<td>1</td>
<td>0</td>
<td>1803.63</td>
<td>8033.61</td>
</tr>
<tr>
<td>Cernahan</td>
<td>Blue Azure</td>
<td>1</td>
<td>UMMS26540</td>
<td>1</td>
<td>0</td>
<td>20393.54</td>
<td>8497.42</td>
</tr>
<tr>
<td>Chervenblom</td>
<td>Carleen</td>
<td>1</td>
<td>UMMS26702</td>
<td>1</td>
<td>0</td>
<td>20207.97</td>
<td>8463.65</td>
</tr>
<tr>
<td>Chervenblom</td>
<td>Eggelin White</td>
<td>1</td>
<td>UMMS93687</td>
<td>1</td>
<td>0</td>
<td>18794.03</td>
<td>8266.71</td>
</tr>
<tr>
<td>Chervenblom</td>
<td>Penn</td>
<td>1</td>
<td>UMMS26503</td>
<td>1</td>
<td>0</td>
<td>15351.52</td>
<td>8080.55</td>
</tr>
<tr>
<td>Cloud</td>
<td>Stormy</td>
<td>1</td>
<td>UMMS99784</td>
<td>1</td>
<td>0</td>
<td>21296.03</td>
<td>8338.59</td>
</tr>
<tr>
<td>Croset</td>
<td>Tangerine</td>
<td>1</td>
<td>UMMS26649</td>
<td>1</td>
<td>0</td>
<td>17347.07</td>
<td>7940.43</td>
</tr>
<tr>
<td>Dahlia</td>
<td>Azure</td>
<td>1</td>
<td>UMMS80099</td>
<td>1</td>
<td>0</td>
<td>15114.44</td>
<td>7482.09</td>
</tr>
</tbody>
</table>

**STEP 4:** Click on the first employee you want to add/edit data for.

<table>
<thead>
<tr>
<th>Salary Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Name: Aster</td>
</tr>
<tr>
<td>First Name: Fuchsia</td>
</tr>
<tr>
<td>Job Position Code: 1</td>
</tr>
<tr>
<td>PTE: 1</td>
</tr>
<tr>
<td>FTE: 1</td>
</tr>
<tr>
<td>Original Salary ($)</td>
</tr>
<tr>
<td>Quarterly Salary ($)</td>
</tr>
</tbody>
</table>

**Benefit Details**

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Amount ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare</td>
<td>0.00</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>0.00</td>
</tr>
<tr>
<td>Dental Insurance</td>
<td>0.00</td>
</tr>
<tr>
<td>Social Security Tax - Employer</td>
<td>0.00</td>
</tr>
<tr>
<td>Employer Paid Benefits ($)</td>
<td>7,482.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Amount ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workers Compensation</td>
<td>0.00</td>
</tr>
<tr>
<td>Unemployment</td>
<td>0.06</td>
</tr>
<tr>
<td>Unemployment</td>
<td>0.00</td>
</tr>
<tr>
<td>Disability Insurance</td>
<td>0.06</td>
</tr>
<tr>
<td>Disability Insurance</td>
<td>0.06</td>
</tr>
</tbody>
</table>

**STEP 5:** Enter data in the ‘Original Salary’ and employer paid fringe benefits in any of the ‘Other’ fields and click ‘Next’. This will save the data submitted and open the next employee’s screen. If you are done entering data or want to review the data before the end of the list of employees, click ‘Close’ to return to the front screen.
STEP 6: When you have completed and checked all of the salary data, enter the date at the bottom of the screen and click 'Save'. This will generate a note in the system which includes who saved the data and the date it was saved.

Note: If salary data was uploaded this screen, including the Received Date and Notes History, will be populated.

MATERIALS AND SUPPLIES COSTS

STEP 1: From the data submission screen, click the hyperlink next to the Other Components. If no data has been entered, you will click 'NOT Received' otherwise you will click 'Received'.

Example:

STEP 2: Enter Materials and Supplies Amount. Example:

STEP 3: Enter Received Date and click 'Save'.
MEDICAID ELIGIBILITY RATE

STEP 1: The Medicaid Eligibility Rate and Indirect Cost Rate percentages are entered by HCA and will be pre-populated into the claim. You can view the information by clicking on ‘Received’ next to the Medicaid Eligibility Rate Component.

Example:

![Claim Calculation and Approval](image)

STEP 2: View the Medicaid Eligibility Rate on the screen. You cannot change this rate.

CLAIM CALCULATION AND APPROVAL

When all of the claim data has been entered and checked, the claim will need to be calculated.

Note: You will not be able to calculate the claim until the RMTS percentages have been calculated. WSCJSD MAC Coordinator will receive e-mail notification from HCA informing when this has been completed and the claim can be calculated. However, you do not need to wait for this notification in order to enter your claim data.

CLAIM CALCULATION

Step 1: Under the ‘Administrative Claiming’ tab, select ‘Claim Calculation’.

Step 2: Click on either ‘Quarter’ or ‘Year’ to view the claim you wish to calculate.
Step 3: Click ‘Calculate’. While the claim calculates, the screen will give the following prompt. You will not be able to do anything on the screen until the message closes, however, it should only appear for a few moments.

Step 4: When the claim has finished calculating, the screen will show that the Claim Status is ‘Calculated’, the date it was calculated, and the User Name of the person who calculated the claim.

Note: Claims are finalized by HCA. The Claim Status will reflect this.
APPROVING THE CLAIM

Note: If any changes are made to the claim, you will need to ‘Recalculate’ the claim. Only when the claim is complete, the data has been checked, and calculated for the last time should you approve the claim.

STEP 1: Click ‘Approve’. When prompted, click ‘OK’. While the claim calculates, the screen will give the following prompt. You will not be able to do anything on the screen until the message closes, however, it should only appear for a few moments.

STEP 2: When the claim is approved, the screen will show that the Claim Status is ‘Approved’, the date it was approved, and the User Name of the person who approved the claim. You must notify your HCA MAC Program Specialist that your claim is ready for their review in an email. Please attach your CPE/Local Match Form to the email so that your claim can be processed.

Note: If there are changes that need to be made to the claim before it is submitted to HCA, you may “Unapprove” the claim. After making any changes, be sure to “Recalculate” the claim before Approving.
CLAIM REPORTS

Under ‘Administrative Claiming’ and ‘Reports’, click on the report you wish to view. Each report is run by clicking ‘View in Excel’ or ‘View as PDF’ and can be saved. To return back to the list of reports, click ‘Back to Reports’.

Note: Once HCA has reviewed your claim including the Certified Public Expenditures (CPE) /Local Match form, you will be notified by HCA if your claim is approved or rejected so you can make the appropriate correction. If the claim is approved, click the A19 form, print it, obtain the appropriate signature and send it to HCA via email to the HCA Program Specialist or to (MAC@hca.wa.gov).
CLM SUMMARY REPORT

Use the dropdown menus to select the MAC Contractor, year, and quarter you wish to view. This report can be viewed as a PDF.

Claim Summary Report

<table>
<thead>
<tr>
<th>State</th>
<th>KCSCJPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year</td>
<td>2017</td>
</tr>
<tr>
<td>Quarter</td>
<td>Fourth Quarter</td>
</tr>
</tbody>
</table>

Quarterly Claim Calculation Summary Report

<table>
<thead>
<tr>
<th>Claim Year:</th>
<th>2017</th>
<th>Print Date: 12/14/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAC Contractor:</td>
<td>King County Superior Court JPS</td>
<td></td>
</tr>
</tbody>
</table>

1. Indirect Cost Rate: 31.99%
2. Medicaid Eligibility Rate: 100.00%

<table>
<thead>
<tr>
<th>Administrative Cost Pools' Total Gross Claim Amounts From Quarterly Calculation Detail Report</th>
<th>Costs For Which The FFP = 50%</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 SUM Subtotal Gross Claim Amount</td>
<td>$21,531.22</td>
</tr>
<tr>
<td>4 SUM of Quarterly Material and Supplies Costs and Administrative Staff Costs</td>
<td>$0.00</td>
</tr>
<tr>
<td>5 Adjusted Quarterly Material and Supplies Costs and Administrative Staff Costs</td>
<td>$0.00</td>
</tr>
<tr>
<td>6 Indirect Costs</td>
<td>$6,887.84</td>
</tr>
<tr>
<td>7 SUM of Quarterly Consultant Services Costs</td>
<td>$0.00</td>
</tr>
<tr>
<td>8 Adjusted Quarterly Consultant Services Costs</td>
<td>$0.00</td>
</tr>
<tr>
<td>9 Total Gross Claim Amount</td>
<td>$28,419.06</td>
</tr>
<tr>
<td>10 Total Net Claim Amount</td>
<td>$14,209.53</td>
</tr>
</tbody>
</table>
The ‘General Administration Factor’ is calculated to allocate costs for performing general administration activities by MAC activity code. The formula for calculating the General Administration Factor is as follows:

\[
[1b\% + 2b\% + (MER \times (5b\% + 6b\% + 7b\% + 8b\% + 9b\%))] \\
[1a\% + 1b\% + 2a\% + 2b\% + 3\% + 4\% + 5a\% + 5b\% + 6a\% + 6b\% + 7a\% + 7b\% + 8a\% + 8b\% + 9a\% + 9b\%]
\]
COST POOL CALCULATION REPORT

Change the MAC Contractor, year, and quarter. This report can be opened as a PDF or in Excel.

Sample Report:

<table>
<thead>
<tr>
<th>Participant</th>
<th>Last Name</th>
<th>First Name</th>
<th>Participant Unique ID</th>
<th>Job Code</th>
<th>Job Description Title</th>
<th>Job Description Title</th>
<th>Quarterly Salary Amount</th>
<th>Salary Reduced by Federally Funded Amount</th>
<th>Quarterly Employer Paid Benefit Amount</th>
<th>Employer Paid Reduced by Federal Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hostler</td>
<td>Javier</td>
<td>Rodriguez</td>
<td>KN0245063</td>
<td>1</td>
<td>Juvenile Probation Supervisor</td>
<td>1 Juvenile Probation Supervisor</td>
<td>$10,614.23</td>
<td>$9,109.23</td>
<td>$1,505.00</td>
<td>$200.00</td>
</tr>
<tr>
<td>Hostler</td>
<td>Javier</td>
<td>Rodriguez</td>
<td>KN0245063</td>
<td>2</td>
<td>Juvenile Probation Counselor</td>
<td>2 Juvenile Probation Counselor</td>
<td>$25,672.92</td>
<td>$23,750.92</td>
<td>$1,922.00</td>
<td>$150.00</td>
</tr>
<tr>
<td>Hostler</td>
<td>Javier</td>
<td>Rodriguez</td>
<td>KN0245063</td>
<td>3</td>
<td>Juvenile Probation Counselor</td>
<td>3 Juvenile Probation Counselor</td>
<td>$35,672.92</td>
<td>$33,750.92</td>
<td>$1,922.00</td>
<td>$150.00</td>
</tr>
<tr>
<td>Hostler</td>
<td>Javier</td>
<td>Rodriguez</td>
<td>KN0245063</td>
<td>4</td>
<td>Juvenile Probation Counselor</td>
<td>4 Juvenile Probation Counselor</td>
<td>$40,672.92</td>
<td>$38,750.92</td>
<td>$1,922.00</td>
<td>$150.00</td>
</tr>
<tr>
<td>Hostler</td>
<td>Javier</td>
<td>Rodriguez</td>
<td>KN0245063</td>
<td>5</td>
<td>Juvenile Probation Counselor</td>
<td>5 Juvenile Probation Counselor</td>
<td>$45,672.92</td>
<td>$43,750.92</td>
<td>$1,922.00</td>
<td>$150.00</td>
</tr>
<tr>
<td>Hostler</td>
<td>Javier</td>
<td>Rodriguez</td>
<td>KN0245063</td>
<td>6</td>
<td>Juvenile Probation Counselor</td>
<td>6 Juvenile Probation Counselor</td>
<td>$50,672.92</td>
<td>$48,750.92</td>
<td>$1,922.00</td>
<td>$150.00</td>
</tr>
<tr>
<td>Hostler</td>
<td>Javier</td>
<td>Rodriguez</td>
<td>KN0245063</td>
<td>7</td>
<td>Juvenile Probation Counselor</td>
<td>7 Juvenile Probation Counselor</td>
<td>$55,672.92</td>
<td>$53,750.92</td>
<td>$1,922.00</td>
<td>$150.00</td>
</tr>
<tr>
<td>Hostler</td>
<td>Javier</td>
<td>Rodriguez</td>
<td>KN0245063</td>
<td>8</td>
<td>Juvenile Probation Counselor</td>
<td>8 Juvenile Probation Counselor</td>
<td>$60,672.92</td>
<td>$58,750.92</td>
<td>$1,922.00</td>
<td>$150.00</td>
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<tr>
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<td>15 Juvenile Probation Counselor</td>
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<tr>
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<td>16</td>
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<tr>
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<tr>
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<td>Juvenile Probation Counselor</td>
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<td>$1,922.00</td>
<td>$150.00</td>
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<td>Rodriguez</td>
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<td>20</td>
<td>Juvenile Probation Counselor</td>
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<td>$120,750.92</td>
<td>$1,922.00</td>
<td>$150.00</td>
</tr>
</tbody>
</table>

Total: $993,420.41
Use the dropdown menus to select the MAC Contractor, year, and quarter you wish to view. This report can be viewed in Excel.
CPE FORM AND INSTRUCTIONS

The CPE form must be submitted every quarter. The form can be found at the Health Care Authority website; please follow the link: CPE local match certification. A sample CPE form and corresponding instructions can be found in the appendix.

MEDICAID ELIGIBILITY RATE (MER) AND MER CALCULATION

Part of the MAC claiming requires the application of a MER:

- HCA staff then enters the MER into the claiming system.

LOCAL MATCH CERTIFICATION, SOURCES OF FUNDING, AND CERTIFIED PUBLIC EXPENDITURES (CPE)

FEDERAL GUIDELINES

The federal government (Medicaid) provides partial Federal Financial Participation (FFP) reimbursement for allowable MAC activities through the Certified Public Expenditure (CPE) process. Federal regulations permit state, local, and tribal governments to provide the non-federal share of Medicaid expenditures. The funding of the non-federal share may be directly appropriated to government units by their legislature or other authority, transferred between the government units or actual expenditures incurred by the government unit may be certified as expenditures eligible for Medicaid reimbursement.

CMS policy is authorized by Section 1903(w) (6) (A) of the Social Security Act which specifically identifies States, and units of government within a State, as the appropriate agencies to fund the non-federal share of Medicaid costs. The non-federal share may be funded with proceeds derived from:

- State and local taxes.
- Funds appropriated to State University teaching hospitals.
- Funds transferred from or certified by units of government within a State.
- Funds of the unit of government not considered to be provider-related donations.
- Funds of the unit of government not derived from an impermissible health care related-tax.

Funds of the unit of government that are not considered to be provider-related donations, or are not derived from an impermissible health care related-tax, may only be used as the non-federal share of MAC expenditures when these funds have been approved by CMS’ Center for Medicaid and State Operations’ National Institutional Reimbursement Team (NIRT).

THE CERTIFICATION PROCESS

Quarterly, WSCJSD must identify the allowable local matching funds that pay for MAC activities by certifying them as public expenditures. HCA provides a CPE form that should be filled out by WSCJSD listing the allowable funding sources used.

INDIRECT RATE

WSCJSD certifies they have reviewed the indirect cost rate allowable for the quarter with the requirements of the Federal award(s) to which they apply. All staff included in operating costs or an approved indirect rate is prohibited from participating in the time study. WSCJSD then informs HCA of the Indirect Rate and submits via e-mail the “Certificate of Indirect Costs.” The HCA MAC Program Specialist adds the Indirect Cost Proposal Rate in the RMTS System for the time period the rate covers prior to the claim approval. The following is an example of the “Certificate of Indirect Costs.”
REVENUE OFFSET

Certain revenues must be offset to reduce costs to determine the total amount of costs in which the federal government will participate. (Federal Regulations (2CFR), Part 225).

Sample categories of revenue offset may include the following (not all inclusive):

- All federal funds
- All state expenditures which have been previously matched by the federal government (includes Medicaid funds for medical assistance, such as payments for services under fee-for-service)
- Insurance and other fees collected from non-governmental sources
- All applicable credits such as receipts or reduction of expenditure type transactions offsetting or reducing expense items allocable to federal awards as direct or indirect costs.
NON-DUPLICATION OF PAYMENT

Federal, state, and local government resources should be expended in the most cost effective manner possible.

WSCJSD may not claim any FFP for administrative activities if related costs have already been paid by another revenue source. A government program may not be reimbursed in excess of its actual costs, i.e., make a profit.

Example activities where costs may not be claimable due to the potential for duplicate payments include but are not limited to:

- An activity that is an integral part or extension of a direct medical service, such as patient follow-up, patient assessment, patient education, or counseling.
- An activity that has been, or will be, paid for as a service of another non-Medicaid program.
- An activity that has been, or will be, paid for as a Medicaid administrative cost through another MAC program.
- An activity that is included as part of a managed care rate and is reimbursed by a managed care organization.
- Costs for activities that are included in a direct medical service encounter rate.

It is important to distinguish between duplicate payments for the same activity and an inefficient use of resources, which may result in the unnecessary repeated performance of an activity. Duplicate performance of services or administrative activities must be mitigated through coordination of activities.
• **A19-1A Invoice Voucher (A19)** - The State of Washington Invoice Voucher used by the WSCJSD to submit claims for reimbursement of allowable MAC costs. It certifies that all costs, including CPE and the indirect cost rate are certified as accurate, allowable and in accordance with applicable federal regulations.

• **Activity** - Job duties and responsibilities performed by a time study participant.

• **Administrative Fee** - The dollar amount charged to a contractor by HCA based on a percentage of each Contractor’s billing for Federal Financial Participation (FFP) claimed at the federally approved match rate. The fee is used to offset HCA’s costs incurred in administering the MAC program. Administrative fees charged to Contractor are used to provide the state share of match required to operate the program.

• **Apple Health** - The Washington State Medicaid program funded by the federal and state government, which pays for medical coverage for children and adults who meet specific income criteria.

• **Apple Health Application Assistance** - To assist Apple Health clients in completing the application process.

• **Audit** - An investigation of a contractor’s MAC program and financial information to ensure compliance with state, federal, and local laws.

• **Billing Quarter** - A consecutive three (3) calendar month period during the contractor fiscal year. Most MAC contractors utilize the State Fiscal year, July – June, with billing quarters beginning on the first day of month one (1) and ending on the last day of month three (3).

<table>
<thead>
<tr>
<th>Quarter(s)</th>
<th>Months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qtr. 1</td>
<td>July – September</td>
</tr>
<tr>
<td>Qtr. 2</td>
<td>October – December</td>
</tr>
<tr>
<td>Qtr. 3</td>
<td>January – March</td>
</tr>
<tr>
<td>Qtr. 4</td>
<td>April - June</td>
</tr>
</tbody>
</table>

• **Centers for Medicare and Medicaid Services (CMS)** - The federal agency with oversight responsibility for the Medicare and Medicaid programs within the Department of Health and Human Services (DHHS).

• **Certified Public Expenditure (CPE)** - The sources of funds certified as actual expenditures by a local or public governmental entity and used as the State share in order to receive federal matching Medicaid funds, or Federal Financial Participation (FFP).


• **Cognizant Agency** - The federal agency responsible for reviewing, negotiating, and approving Indirect Cost Rates.

• **Consultant or Billing Agent** - Any subcontractor to include any individual or organization hired by the Contractor to provide support with the System. The Contractor is responsible for all work done by the subcontracted consultants or billing agents or both.

• **Contractor or MAC contractor** - The individual, entity, or claiming unit performing MAC services pursuant to this agreement and includes the contractor’s owners, members, officers, directors, partners, employees, or
agents, or all, unless otherwise stated in this agreement. For purposes of any permitted subcontract, “contractor” includes any subcontractor and its owners, members, officers, directors, partners, employees, or agents, or all.

- **Corrective Action** - A plan developed after completion of an audit, evaluation, or review where a finding(s) of deficiency are identified. The plan specifies actions the facility or contractor must take to correct the finding of deficiency; the person responsible for developing the plan; the date when the correction will be completed, and the person responsible for correcting the deficiency.

- **Direct Cost** - Costs in direct support of MAC as reported on the quarterly A19 which are not already included in the indirect cost rate.

- **Eligible participants** - Contractor staff, subcontracted individuals or subcontractor individuals that are in compliance with regulations, meeting guidelines, and the Manual criteria, to participate in the Medicaid Administrative Claiming (MAC) Random Moment Time Study (RMTS).

- **Federal Financial Participation (FFP)** - The level of federal funding to which the federal government will participate to reimburse government agencies for certain Medicaid administrative activities.

- **HCA MAC RMTS Coordinator Manual (Manual)** - The Manual or its successor(s), including any updates that describe how to manage the MAC program including the time study and claiming.

- **Health Care Authority (HCA)** - The single state Medicaid agency that has complete authority and responsibility for administration of the State Medicaid Plan and Medicaid Administrative Claiming.

- **Indirect Cost(s)** - An operating expense that is allocated across more than one program.

- **Indirect Cost Rate** - The ratio, expressed as a percentage, of the indirect costs to a direct cost base as approved by the Contractor’s Cognizant Agency.

- **Job Title** - A short description of a job position.

- **Job Description** - A summary of specific duties and responsibilities of a job position.

- **Linkage** - Connecting clients to services.

- **Local Matching Funds** - The contractor’s non-federal tax dollars that are not otherwise obligated and are designated or certified to match the FFP rate of reimbursement. This revenue must be in the contractor’s budget and under the contractor’s control. These funds cannot be contributed by healthcare providers as local matching funds and subcontractor cannot certify local match funding. All local match funds must meet CPE requirements.

- **Medicaid** - The federal aid Title XIX program of the Social Security Act under which medical care is provided to eligible persons.

- **Medicaid Administrative Claiming Program (MAC)** - The source of funding for reimbursements provided in this agreement is shared between the contractor and the Federal Financial Participation (FFP).

- **MAC Coordinator** - An employee of the contractor assigned MAC RMTS oversight responsibilities and to act as liaison between HCA and the contractor for purposes of a MAC agreement.

- **Medicaid Client** - A person who is eligible to receive Medicaid Covered Services.

- **Medicaid Covered Services** - The array of federally required and Washington State legislatively appropriated medical and social services available to Medicaid Clients.
• **Medicaid School-Based Administrative Claiming Guide** - The CMS MAC manual issued May 2003 produced by CMS, and any supplements, amendments, or successor, incorporated here by reference into this agreement.

• **Monitoring** - Review of a contractor’s MAC program to ensure program integrity.

• **Office of Management and Budget (OMB)** - A division under the Executive Office of the President of the United States.

• **Outreach** - Activities undertaken by the contractor to inform families about services available and encourage access to these services.

• **Random Moment Time Study (RMTS)** - A statistically valid time study system that asks each participant to report the activity he or she was performing during a specific moment.

• **Referral** - Providing information and support to clients that will assist them in accessing medical, social, education, or other services.

• **State Fiscal Year (SFY)** - A twelve (12) month period beginning on July 1st of one calendar year and ending on June 30th of the following calendar year. The SFY is broken into four (4) billing quarters.

• **State Medicaid Plan** - The comprehensive written commitment by HCA, submitted under 1902(a) of the Social Security Act and approved by CMS, to administer the Washington State Medicaid program in accordance with federal and state requirements.

• **University of Massachusetts Chan Medical School (UMass)** - The HCA contracted vendor who oversees the RMTS.
# QUARTERLY MAINTENANCE CHECKLIST

<table>
<thead>
<tr>
<th>Status</th>
<th>Due Date</th>
<th>Task</th>
<th>Who’s responsible at the WSCJSD?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Before the Quarter Begins</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 days before the quarter begins</td>
<td>Update calendar and participant work schedules</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 days before the quarter begins</td>
<td>Pull participant extract upload and update as needed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 to 30 days before the quarter begins</td>
<td>Schedule and conduct additional staff training, if necessary</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>During the Quarter</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First working day of quarter</td>
<td>Participants will begin to receive and respond to moments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ongoing</td>
<td>Monitor RMTS Participant Moment Not Completed Report to remind participants to complete all moments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Continuous throughout the quarter, within 5 working days of change</td>
<td>See Change of Status process above</td>
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</tr>
<tr>
<td>Ongoing</td>
<td>Monitor the RMTS Participant Moment Not Completed Report to remind participants to complete all moments. <em>This report should be kept with your audit file.</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>After the Quarter Ends</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within 120 days after the close of the quarter</td>
<td>Upload and/or update staff salary and benefits to the System</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within 120 days after the end of the quarter</td>
<td>Enter quarterly MAC related materials, supply costs, and administrative staff costs into the System</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within 120 days after the end of the quarter</td>
<td>Submit quarterly Local Match Certification and CPE forms with the signed A19 (original) to HCA for reimbursement.</td>
<td></td>
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</table>
**MEDICAID ADMINISTRATIVE CLAIMING (MAC) SUBCONTRACTOR REVIEW**

WSCJSD is not allowed to subcontract in the MAC Program.

**MEDICAID ADMINISTRATIVE CLAIMING (MAC) AUDIT FILE CHECKLIST**

<table>
<thead>
<tr>
<th>Present Y/N</th>
<th>Location Identified Y/N</th>
<th>Required Documentation</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td><strong>Current Interagency/Interlocal Agreement with HCA</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Dun and Bradstreet Data Universal Numbering System (DUNS) number</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Statewide Vendor (SWV) number</strong></td>
</tr>
</tbody>
</table>
|             |                         | **WSCJSD MAC Organization Chart**  
  • Administrator  
  • CFO and/or Business Manager  
  • MAC Program Administrator  
  • Consultant and/or billing agent  
  • MAC Coordinator and Backup Coordinator  
  • Participating staff by claiming group(s) with names and job titles |
|             |                         | **All MAC related contracts with consultants/billing agents** |
|             |                         | **All MAC Contracts/Grants related to outreach and linkage such as:**  
  • WSCJSD  
  • Outreach organizations  
  • Community based organizations  
  • Washington Healthplanfinder |
|             |                         | **MAC Subcontractor Documentation:**  
  • List of all MAC subcontracts  
  • Copy of contract  
  • Subcontractor information form (as submitted to HCA)  
  • HCA approval notification from HCA |
|             |                         | **MAC Financial claiming documentation**  
  • Copies of signed quarterly A-19 invoice vouchers and all detailed documents in support of that quarterly claim  
  • MAC Subcontractor invoices for services provided under the MAC Contract  
  • Signed copy of the quarterly Local Match Certification form  
  • Signed Certified Public Expenditure worksheet listing funding sources, description and back-up documentation  
  • Copy of Indirect Cost Rate Certification, methodology description and back-up documentation  
  • Listing of all participants’ salary/wages and benefits |
|             |                         | **All HCA MAC Monitoring Report(s)** |
|             |                         | **All quarterly Compliance Status Reports as described in the Manual** |
|             |                         | **All State and/or federal audit reports**, including the most recent OMB Circular A-133 Audit and any related documents and corrective action plans that relate to the MAC program |
|             |                         | **All MAC related training documents** (rosters and materials) |
|             |                         | **All quarterly participant lists** |
# Health Care Authority (HCA)

**Certification of Public Expenditures (CPE)**

**Local Match Certification**

This form must be completed and submitted per the terms of the contract.

<table>
<thead>
<tr>
<th>HCA Contractor Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>HCA Contract #:</td>
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<tr>
<td>Sub Unit (if applicable):</td>
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<tr>
<td>Invoice Time Period:</td>
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</table>

### Federal Financial Participation (FFP) @ 50%/50% Split

<table>
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<th>FFP (50%)</th>
<th>Local Match (50%)</th>
<th>Total Comprable</th>
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</thead>
<tbody>
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<td>$0.00</td>
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### Enhanced Federal Financial Participation (FFP) @ 75%/25% Split

<table>
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<th>FFP (75%)</th>
<th>Local Match (25%)</th>
<th>Total Comprable</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
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</table>

**Total**: $0.00 $0.00 $0.00

List only the non-federal funds eligible to be used as local matching funds per CFR 42 Sec 433.51

<table>
<thead>
<tr>
<th>Name of Local Match (Funding Source)</th>
<th>Prescribed Revenue Account Code</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

$0.00

Check Point: Not Zero

As the Designated Authorizing Representative, I certify the expended amount shown on this document is accurate, valid, and represents expenditures eligible for federal financial participation (FFP) in accordance with certification of Public Expenditure (CPE) CFR 42 Sec 433.51; that applied matching funds are not already used as matching funds in other federal programs and being reimbursed by other federal grants, and any applied donated matching funds have been preapproved for use by Centers for Medicare and Medicaid (CMS).

Authorizing Representative’s Signature

Date

Title

Printed Name of Authorizing Representative

Telephone Number (including Area Code)

64
# CPE Local Match Certification Instructions

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCA Contractor Name</td>
<td>The name of the contractor.</td>
</tr>
<tr>
<td>HCA Contract Number</td>
<td>The contract number of the entity.</td>
</tr>
<tr>
<td>Sub Unit (If applicable)</td>
<td>A cost center or budget unit within the claiming unit.</td>
</tr>
<tr>
<td>Invoice Time Period</td>
<td>Period of time the services were provided (e.g., January-March 2015).</td>
</tr>
<tr>
<td>Federal Financial Participation (FFP)</td>
<td>Enter the FFP dollar amount in the appropriate FFP box. Dollars reported must agree with amount on the invoice.</td>
</tr>
<tr>
<td>Local Match</td>
<td>Enter the dollar amount used to match federal funds in the appropriate local match box.</td>
</tr>
<tr>
<td>Name of Local Match (Funding Source)</td>
<td>List the name of the Local Match funding source.</td>
</tr>
<tr>
<td>Prescribed Revenue Account Code</td>
<td>List the prescribed account coding for the local match (funding source)</td>
</tr>
<tr>
<td>Prescribed revenue account coding for:</td>
<td><strong>State Auditor’s Office (SAO) Budgeting, Accounting and Reporting</strong></td>
</tr>
<tr>
<td>Local Health Jurisdictions, King County</td>
<td><strong>System (BARS) Manual for Cities, Counties, Special Purpose Districts</strong></td>
</tr>
<tr>
<td>Superior Court Juvenile Probation Services</td>
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</tr>
<tr>
<td>County and City correctional facilities,</td>
<td></td>
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<tr>
<td>Area Agency on Aging</td>
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</tr>
<tr>
<td>Prescribed revenue account coding for:</td>
<td><strong>State Auditor’s Office (SAO) Budgeting, Accounting and Reporting</strong></td>
</tr>
<tr>
<td>Public school districts.</td>
<td><strong>System (BARS) Manual for Cities, Counties, Special Purpose Districts</strong></td>
</tr>
<tr>
<td>Prescribed revenue account coding for:</td>
<td><strong>Office of the Superintendent of Public Instruction (OSPI) School</strong></td>
</tr>
<tr>
<td>UW School of Dentistry, DSHS Special</td>
<td><strong>Appportionment &amp; Financial Services Accounting Manual for School Districts</strong></td>
</tr>
<tr>
<td>Commitment Center, Washington State</td>
<td></td>
</tr>
<tr>
<td>Department of Corrections.</td>
<td></td>
</tr>
<tr>
<td>Authorized Representative’s Signature</td>
<td>The signature of the entity’s authorized representative.</td>
</tr>
<tr>
<td>Date</td>
<td>Date when form was completed.</td>
</tr>
<tr>
<td>Title</td>
<td>Title of entity’s authorized representative.</td>
</tr>
<tr>
<td>Printed Name</td>
<td>Printed name of authorized representative.</td>
</tr>
<tr>
<td>Telephone Number (Including Area Code)</td>
<td>Telephone number with area code of authorized representative.</td>
</tr>
</tbody>
</table>