Medicaid Administrative Claiming (MAC) Financial Training

Independent School Districts

Federal Fiscal Year (FFY) 2020

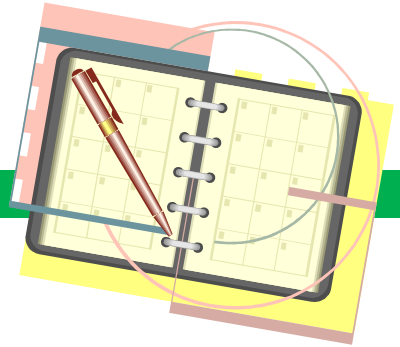
Welcome!!!
MAC Financial "Initial" Training

- Who is eligible to take an "Initial" training?
  - If you have never attended a MAC Financial training, you must attend "Initial" training
    - MAC Financial Overviews do NOT count
- To make it easier to follow along today, we recommend that you download the three presentations from the Health and Human Services Commission (HHSC) MAC website (MAC Training, RMTS Training Overview, and SHARS Overview)
  - http://rad.hhs.texas.gov/time-study/time-study-isd-training-information
- To listen to the presentation, you have two options:
  - Dial in using your **telephone**: you must use the telephone number, access code, and audio pin found on the right side of your screen
  - Listen through your **computer**: you must have speakers to listen and a microphone enabled computer if you wish to ask questions during the training
- **If you experience technical difficulties, please contact Webinar Support at 1-800-263-6317**

Housekeeping

- Training duration
- Short break will be provided
- Ask questions by sending a message through the chat feature or by raising your hand
  - Your hand is raised if the arrow is pointing down
  - Your hand is lowered if the arrow is pointing up
  - Hand/arrow image tells you the action you would like to take
- Must be present and attentive throughout the entire training presentation to obtain credit
  - System tracking (time in session, active screen, and polling questions)
  - Must have registered for the training
- Send email to MAC@hhsc.state.tx.us if:
  - Have dual monitors
  - Sitting with coworkers
  - Using an iPad/tablet

Agenda



- Program Overview
  - School-Based Medicaid Programs
  - Enrollment Process
  - Program Contact Responsibilities
- Random Moment Time Study (RMTS) Overview
- School Health and Related Services (SHARS) Overview
- Financial Reporting
  - Allowable Costs
  - Claim Calculation
  - Claim Submission
- State of Texas Automated Information Reporting System (STAIRS) Demonstration
- Desk Review & Helpful Program Information
- Wrap Up

Medicaid Overview

- Jointly-funded state and federal health care program
  - Entitlement program that is designed to provide health coverage and medical services to several populations – low income families, pregnant women, people age 65 and older, and people with disabilities
- School Setting
  - Enroll eligible children in Medicaid program
  - Assist children already enrolled in Medicaid to access the benefits available to them
  - For many children, schools are the primary entry point for receiving needed health and social services

MAC Program

- Federal Medicaid reimbursement for the costs of administrative activities performed in the school setting
  - Linking students to the appropriate Medicaid/health-related services
  - Separate from but complimentary to SHARS
- Centers for Medicare & Medicaid Services (CMS) administers the MAC program at the federal level and reimburses states for allowable outreach activity performed under the MAC program
- HHSC is the single state Medicaid agency in Texas (responsible for the administration of the MAC program at the state level)

MAC Activities*

- Activities that improve access to Medicaid coverage or improve the use of Medicaid covered services, including but not limited to:
  - Informing Medicaid-eligible and potentially Medicaid-eligible children and families about the benefits and availability of services provided by Medicaid (including preventive treatment and screening), including services provided through the Early and Periodic Screening, Diagnosis, and Treatment program
  - Assisting individuals or families to complete Medicaid eligibility applications
  - Scheduling or arranging transportation to Medicaid covered services
  - Providing translation services for the purpose of accessing Medicaid services
  - Developing strategies to assess or increase the capacity of school medical/dental/mental health programs
  - Arranging for any Medicaid covered service that may be required as a result of a specifically identified medical/dental/mental health condition

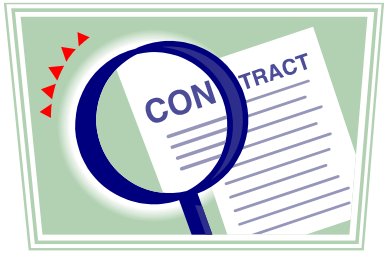
*Additional examples are available on the HHSC MAC website

Medicaid Outreach Examples – School Setting

- Working with school administration to determine what outreach activities the school can perform
- Distributing information about the Medicaid program and available benefits at parent-teacher association meetings, parent-teacher conferences, and athletic events
- Including Medicaid information and applications in report card envelopes and back-to-school packets sent home with students
- Adding health insurance questions to mandatory health forms and applications for free and reduced price school meals
- Presenting enrollment information at workshops and seminars for school staff

MAC Participation Documents

- Required for participation in MAC:
  - Intergovernmental Cooperation Agreement with Amendment
  - Data Use Agreement
  - Application for Texas Identification Number
  - Vendor Direct Deposit Form
  - Vendor Information Form
  - MAC Program Operating Plan (POP)



- Contracting documents must be renewed every five years
- Documents and instructions are available on the HHSC MAC website
  - MUST use current forms

Intergovernmental Cooperation Agreement & Data Use Agreement

District agrees to…

- Account for activities of staff providing Medicaid administration
- Submit quarterly participation data through STAIRS
- Provide expenditure information on a quarterly basis
- Spend an amount equal to the federal match received on health related services for clients
- Designate a liaison to work with HHSC
- Comply with all Health Insurance Portability and Accountability Act (HIPAA) regulations

HHSC agrees to…

- Pass on to the district 95% of Title XIX federal share for Medicaid administration
- Reimburse allowable administrative costs at the appropriate Federal Financial Participation (FFP) rate (50% or 75%)
- Include the district's expenditures for Medicaid administration in the claim it submits to CMS
- Designate a liaison to work with the district
- Comply with all HIPAA regulations

Application for Texas Identification Number

- Formerly known as Texas Payee Identification Number
- Assigned by the Texas Comptroller of Public Accounts for the purpose of identifying any party receiving a payment from the state
- Use of this number on all claims will reduce the processing time required by the state

Vendor Direct Deposit Form

- Set-up direct deposit for MAC
- Change or cancel existing direct deposit information
- Direct deposit allows MAC reimbursements to be posted automatically to a district's account instead of being issued as paper warrants sent by mail

Vendor Information Form

- Form indicates who is legally responsible as well as the point of contact for the contract
- District is the "Contractor"
- Physical address listed on the form must be that of the district submitting the form
  - For districts in a shared services arrangement/cooperative (SSA/Co-Op), do not list the physical address of the SSA/Co-Op
- Follow the instructions listed on the HHSC MAC website

MAC POP

- Details roles and responsibilities for primary contacts
- Cover page must be printed on district letterhead
- All primary contacts listed on the MAC POP must match in STAIRS when initially submitted
- Primary contacts listed on the MAC POP must be district employees of the district submitting the form
  - For districts in a SSA/Co-Op, fiscal agent employees cannot serve as the primary contact for a member district

Required Updates

- Vendor Direct Deposit Form
  - Financial institution, account number, and/or account type changes
  - Must complete again and submit to the HHSC MAC Unit
- System Contacts (Primary and/or Secondary)
  - District is required to update and maintain ALL contact information in STAIRS
    - Manage Contacts Tab
    - Step 1 – MAC Provider Data
  - No longer required to <u>resubmit</u> the MAC POP
    - Primary contact rules apply

Documentation & Recordkeeping

- All MAC participation documents
- Checklist of the minimum documents to collect and maintain quarterly:
  - Financial data used to develop the expenditures and revenues for the claim calculations including local/state match used for certification
    - Copies of computations used to calculate financial costs
    - All revenues offset from the claim, by source
  - Quarterly Summary Invoice (QSI) that has been signed and notarized

Documentation & Recordkeeping (cont.)

- Information must be available upon request by state or federal entities
- Documents must be stored in a readily accessible location and format
- Records should be maintained for a period of no less than five years, or if an audit has started, the records shall be retained until the audit is completed and all issues are resolved

Districts that Contract with Vendors

- If a district chooses to authorize a contractor to enter and certify financial information:
  - District must document the authorization and provide the documentation of authorization upon request to HHSC
  - HHSC recommends that the authorization to enter and certify quarterly financial information be incorporated into the contract with the authorized entity
  - District will be held responsible for the actions or inactions of its authorized contractor

January 2009 directive from the Associate Commissioner for Medicaid/CHIP Division, HHSC

STAIRS Contacts

- MAC Financial Contact **(Today's Focus)**
- RMTS Contact
- SHARS Financial Contact
- Superintendent

Communication is critical!

Primary MAC Financial Contact

- Must be an employee of the district
- Listed as the primary MAC financial contact
- Maintains the accuracy of ALL contacts in STAIRS
- Serves as financial liaison to HHSC and STAIRS
- Communicates with all key stakeholders (RMTS contact, Special Education department, SSA/Co-Op contacts, etc.)
- Attends MAC financial training for each FFY
- Ensures that MAC financial data is certified each quarter
- Ensures that the QSI is signed and notarized by the proper individuals
- Maintains financial documentation and supporting materials

Training

- Primary contacts must attend and receive credit for training every FFY
  - Initial and Refresher training options
- Various types of training
  - MAC, RMTS, and SHARS
- Recommend having **multiple** MAC financial contacts **trained**
  - No trained MAC financial contact = No participation for remainder of the FFY
- Training is from FFY to FFY
  - Not retroactive
  - Districts must train for the FFY in which they wish to participate
- Please notify us when switching districts – request training credit be transferred to the new district
- Training determines the difference between "Full Access" and "View Only" in STAIRS

RMTS Overview

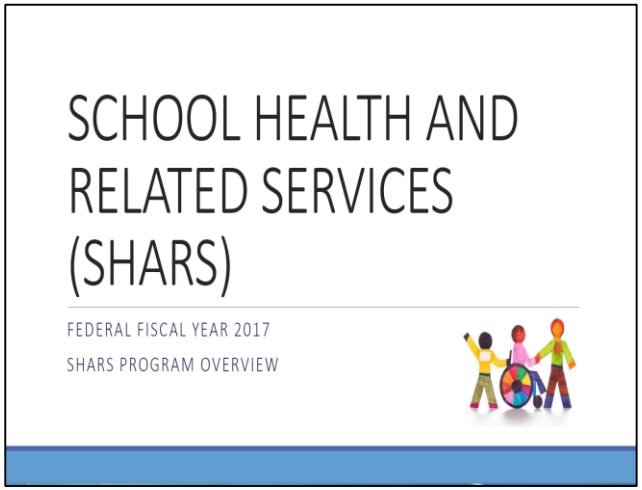
Random Moment Time Study

Presented by the HHSC Time Study Unit

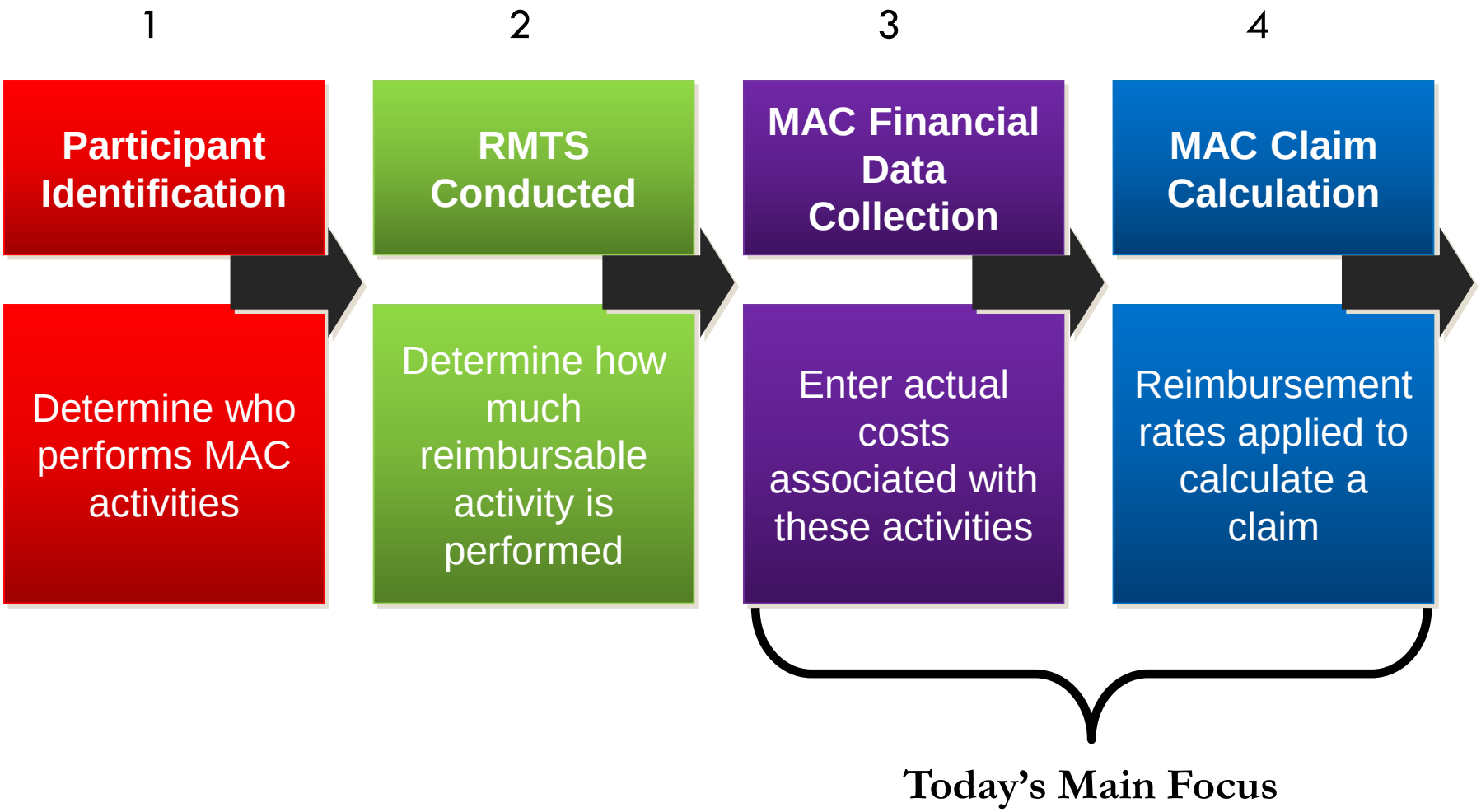
SHARS Overview

School Health and Related Services

Presented by the HHSC SHARS Unit

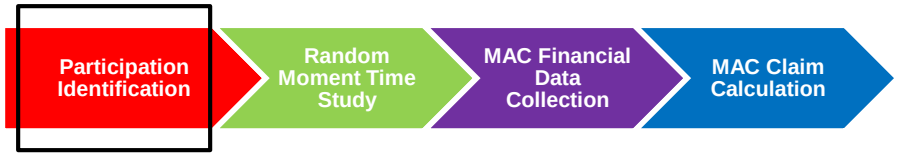


MAC Financial Quarterly Process



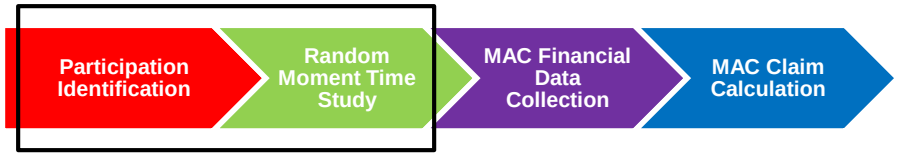
Participant Identification

- Eligible participants identified via the Participant List (PL)
  - Job Category
    - Direct Service and Administrative Providers (Cost Pool #1)
    - Administrative Services Provider Only (Cost Pool #2)
- Cannot report costs for categories and positions that were left off the PL in a given quarter
- Costs reported are "position-specific" not "person-specific"
  - Substitute – individual replacing a provider on leave
  - Direct replacement – individual hired to fill a vacant position



PL Certification & RMTS Results

- Only positions included on the PL are eligible to have costs reported on the MAC Financials during a given quarter
- If a district does not certify its PL for a given quarter, then that district will not be able to participate in the RMTS and will not be able to report its MAC Financials for that quarter
- RMTS results are the basis for the calculation of the administrative time study percentage that is applied to the MAC Financials



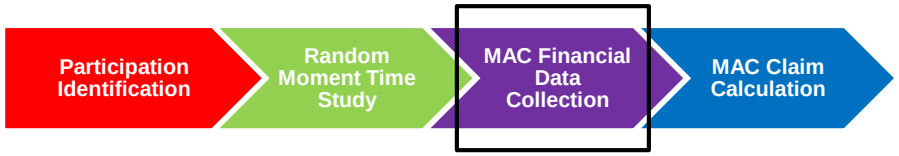
Ineligible Costs & Participants

- Overhead costs/indirect costs are captured in the Indirect Cost Rate (IDCR) on the MAC Financials
- Salaries for staff in accounting, budgeting, employee relations, human resources, payroll, and purchasing are generally indirect costs and should not be entered on the MAC Financials
- Ineligible participants include those in:
  - Function 41 – General Administration
  - Function 53 – Data Processing Services

- Review Administrative Services Provider Only (Cost Pool #2)

MAC Participation Requirements

- MAC Financials will **not** be opened for a given quarter unless the following requirements are met:
  - Active contract with HHSC
    - Effective date (execution date) of the MAC contract is the date signed by the designated HHSC contact
  - Approved MAC POP
  - Received appropriate MAC and RMTS training for the FFY
  - Certified PL
- All participation documents must be approved and a MAC contract must be executed prior to the close of the PL for the quarter in which the district wishes to claim
- If you are unable to access a quarter, please contact the HHSC MAC Unit



Federal Fiscal Year 2020

Federal Fiscal Quarter	Financials Open	Financials Close (6 p.m. CST)
1st Quarter (October – December)	5/11/2020	6/26/2020
2nd Quarter (January – March)	8/17/2020	10/02/2020
3rd Quarter (April – June)	11/16/2020	1/01//2021
4th Quarter (July – September)	2/15/2021	4/02/2021

Claim must be certified and the signed/notarized QSI must be attached in STAIRS by the deadline

MAC Financial Data Collection

- Interim billing is **not** a MAC requirement
- Electronic reporting of the MAC Financials
  - Completed entirely online via STAIRS located on the Fairbanks LLC website
    - https://www.fairbanksllc.com/
- **ONLY trained** MAC financial contacts will have access in STAIRS to enter MAC financial data

Financial Data

- District Employees & Contracted Staff
  - Claim positions (included on the PL) that performed MAC activities at the district on a routine, weekly basis and were paid by the district during the given quarter
  - ONLY positions that meet the criteria listed above may be claimed on the MAC Financials
  - Must evaluate each quarter whether positions (included on the PL) may be claimed on the MAC Financials

District Employees

- Compensation
  - Salaries
    - Allocation of costs not necessary
  - Subject to federal withholdings
  - Reconcile back to general ledger
- Report salaries based on federal fiscal quarters:
  - October – December
  - January – March
  - April – June
  - July – September

Position Specific Example

- Position #85 had the following employee changes during the January-March quarter:
  - Employee A works January 1st through January 19th, earns $800
  - Substitute A works January 20th through February 28th, earns $1,200
  - Employee B works March 1st through March 31st, earns $1,500
  - Total MAC Reportable Expenditures for Position #85 would be: $800 + $1,200 + $1,500 = $3,500

Payroll Taxes and Benefits

- Examples of Employer-Paid Benefits:
  - Employer 403(b) Contribution
  - Health Insurance
  - Liability Insurance
  - Life Insurance
  - Medicare
  - Social Security
  - Unemployment Compensation
  - Worker's Compensation

Payroll Taxes and Benefits (cont.)

- Only report "true" expenditures
  - If your district incurs an insurance cost (premium paid), the district is entitled to report the cost incurred during the given quarter
  - If your district is self-insured and pays a third party administrator for claim administration, the district is entitled to report the cost incurred for administrative fees and claims paid during the given quarter
    - District should not report any assumed liability, such as set-aside funds, as the cost should reflect the true expenditures of the district
- Teacher Retirement System
  - Only costs to the district are allowable
  - "On behalf of" retirement payments cannot be claimed
- District must maintain all supporting documentation

Employee vs. Contracted Staff

- Employee
  - Provider hired by the district (on payroll)
  - Listed on the PL as Part Time or Full Time
  - Report costs under the following columns: Employee Salaries, Payroll Taxes and Benefits, and Federal Revenues
- Contracted Staff
  - Not employee of the district
    - Either outside vendor or through SSA/Co-Op (fiscal agent)
  - Listed on the PL as Contract
  - Report costs under the following columns: Contracted Staff Costs and Federal Revenues

Contracted Staff

- Ensure that the PL is up-to-date
  - Correct employment type
  - Enter costs under appropriate columns
- Request breakdown of costs on invoice from the contractor
  - Correct number of positions are claimed
  - Costs are placed in the correct categories

Example of MAC Activity

- We recommend that the primary MAC Financial Contacts send district staff members the example of MAC activities document (attached)
- Ask staff members to select which activities they performed, to verify whether positions performed the appropriate MAC activities at the district on a routine, weekly basis.

MAC Activity Checklist

Federal Revenues

- Identify ALL federally funded positions on the PL
- Report (local, state, & federal) costs in the appropriate columns
- Federal Revenues column is used to subtract the federal portion of costs that were included in the following columns: Employee Salaries, Payroll Taxes and Benefits, and Contracted Staff Costs

Job Category	Total Employees	Total Contractors	Employee Salaries	Payroll Taxes and Benefits	Contracted Staff Costs	Gross Expenditures	Federal Revenues	Net Expenditures
Nurse – Registered Nurse (RN)	5	0	$63,290	$8,770	$0	$72,060	$0	$72,060
Occupational Therapist – Licensed	3	1	$34,374	$4,527	$3,000	$41,901	$38,901	$3,000
Physical Therapist – Licensed	2	0	$19,868	$2,864	$0	$22,732	$11,366	$11,366

Federal Revenues (cont.)

- Federal funds include, but are not limited to:
  - Federal Grants
  - Matching Funds
- To optimize federal revenue sources, it is recommended that providers are funded with local/state dollars
- MAC and SHARS funds are considered "reimbursement" funds and are <u>not</u> required to be backed out of the MAC Financials as revenue offset

BREAK TIME!

Be back in 10 minutes.

Districts in a SSA/Co-Op

- All "shared" costs must be allocated to each of the member districts
  - Example: If a member district contributed 15.75% of the budget, that district would be allocated 15.75% of the paid hours and payroll costs for each staff member
  - Allocation of costs based on budget contributions is only one way in which a fiscal agent may choose to allocate costs

- Important: Allocation methodologies used to distribute shared costs to member districts of a SSA/Co-Op must be documented and presented to HHSC upon request

Regional Day School Program for the Deaf (RDSPD)

- If host district reports all students on its Public Education Information Management System (PEIMS) data:
  - Host district will report 100% of the salary and benefits of the providers for the RDSPD
  - Allocation of costs is not required
- Member districts will not report any costs associated with the RDSPD
- Contact the HHSC MAC Unit regarding district-specific questions

Reporting Costs

- Two options to enter financial data in STAIRS:
  - Participant Details (Step 3)
    - Detailed basis by individual position
  - Group Summary Schedule (Step 4)
    - Summary of costs by job category
    - Financial detail by individual position must be kept on file
    - Enter Total Employees and Total Contractors claimed that quarter (i.e., positions that have costs entered on the MAC Financials)
    - Total Employees and Total Contractors should not exceed the number of positions listed on the PL for a given category

Participant Details

Physical Therapist – Licensed

Bob	Full Time
Joe	Contract
Mary	Full Time

Group Summary Schedule

Physical Therapist – Licensed

Employee Salaries	$30,000
Payroll Taxes and Benefits	$6,000
Contracted Staff Costs	$8,000

Financial Tips

- If reporting in Group Summary Schedule (Step 4 in STAIRS):
  - Refer back to the certified PL for the given quarter
    - PL is available in advance
  - Ensure that the Total Employees and Total Contractors columns include ONLY positions that have costs entered on the MAC Financials (may differ from the number of positions included on the PL)
    - Example 1: If a district has costs to report for 5 employee positions, then 5 would be entered in the Total Employees column (even though the PL included 10 employee positions)
    - Example 2: If a district has no costs to report in the Contracted Staff Costs column, then 0 would be entered in the Total Contractors column

Financial Tips (cont.)

- Ensure that negative values are NOT entered on the MAC Financials
  - Select "Export to Excel" in Participant Details (Step 3 in STAIRS) and/or Group Summary Schedule (Step 4 in STAIRS) – depending on which level district reports financial data
  - Filter and sort columns
- Do NOT attempt to correct a previous quarter's error(s) while preparing the MAC Financials for the current quarter
  - Contact the HHSC MAC Unit to correct a previous quarter
- Remember – the district is required to maintain all financial data, and records must be made available upon request from state and federal entities

Detailed Explanations – Edit Checks

- STAIRS is designed to perform various edit checks depending on the financial data entered
  - Helps find possible errors
  - Allows the district to correct its current MAC Financials before certifying the data
- Contact the HHSC MAC Unit should you find an error on the district's MAC Financials for a previous quarter
- If you notice an issue with the edit functionality, contact the HHSC MAC Unit

Detailed Explanations – Edit Checks (cont.)

- Three main types of edit checks in STAIRS that flag financial data entries:
  - Employee Salaries and Contracted Staff Costs entered for the current quarter are compared to the previous quarter submitted
  - Payroll Taxes and Benefits entered for the current quarter are compared to the previous quarter submitted
  - Total Positions entered on the MAC Financials are compared to the Total Positions reported on the PL for the current quarter
- District must provide a concise explanation of sufficient detail to the flagged data entry, or correct any error discovered, whichever applies

Edit Checks – Employee Salaries and Contracted Staff Costs

- Explain in detail why costs increased or decreased
- Do not state "more (less) costs to report"
- In the explanation, consider:
  - Bonuses, raises, and/or stipends received
  - Expanded programs
  - Filled vacancies
  - New schools in the district
  - Number of positions reported
  - Number of students requiring services
  - Number of workable days

Edit Checks – Payroll Taxes and Benefits

- Explain in detail why costs increased or decreased
- Refer to payroll taxes and benefits in explanation
- Do not state "more (less) costs to report"
- In the explanation, consider:
  - Administrative fees and claims paid (if district is self-insured and pays a third party administrator)
  - Filled vacancies
  - Number of positions reported
  - Premiums paid (if district incurs an insurance cost)
  - Replacement has greater (lesser) salary or benefits
  - Salaries paid (higher salaries increase payroll taxes, and vice versa)

Edit Checks – Total Positions

- Explanation best described numerically

Total positions on the MAC Financials	+	Number of positions not performing MAC activities	+	Number of positions not providing services	+	Number of unfilled vacancies	+	Number of retirements or terminations	=	Total positions on the PL

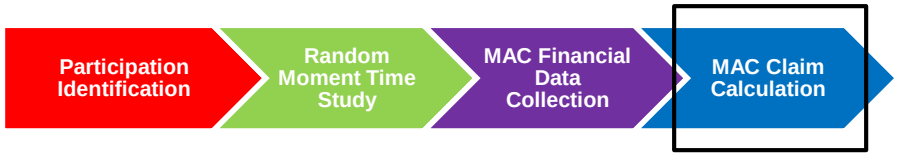
- Example: If the total on the PL is 8 and the total claimed on the MAC Financials is 2, then a good explanation might be:
  - "2 positions did not perform MAC activities, 2 positions did not provide services, 1 position is vacant, and 1 provider terminated prior to quarter"
    - All add up to 8 – the total listed on the PL

MAC Claim Calculation

	(A)	(B)	(C)	(D)	(E)	(F)
Cost Pool	**Net Expenditures**	**Claimable Percentage**	**Claim Amount** (A * B)	**Total Federal Share** (C * FFP)	**5% Retention** (D * 5%)	**Net Claim** (D – E)
Cost Pool #1						
Cost Pool #2						

Direct Service & Administrative

Administrative Only



Claimable Percentage

- RMTS Results
  - State-wide aggregate, quarterly
  - Ratio developed for Cost Pool #1 and Cost Pool #2
- Medicaid Eligibility Rate (MER)
  - District-specific, quarterly
  - Percent of students in district who are Medicaid eligible
- Unrestricted IDCR
  - District-specific, annually
  - Developed by the Texas Education Agency (TEA)

RMTS Results

- Identifies reimbursable and non-reimbursable time
- Used to identify the percent of time providers are participating in MAC activities (as well as participating in direct medical services)
  - Each cost pool has separate and different time study percentages
  - MAC claim is calculated for Cost Pool #1 and Cost Pool #2 using their relevant costs and time study percentages

MER Calculation

- PEIMS enrollment data for the current school year is submitted to TEA by each district
  - District must ensure that PEIMS data is up-to-date
- Medicaid eligibility file for each quarterly period is gathered by HHSC and sent to TEA
- TEA develops an unduplicated Medicaid eligibility file from the quarterly file provided by HHSC
- Unduplicated Medicaid eligibility file is matched against the PEIMS enrollment data
  - Two matches are performed:
    - Based on Social Security Number (SSN)
    - For those who do not match based on SSN, a second run is performed based on the first name, last name, and date of birth

Total # of Matches / Total # of Enrolled Students (by District)
= District's Quarterly MER

IDCR Information

- Districts may choose to obtain an approved IDCR from the TEA
  - New IDCR must be obtained every fiscal year
  - Information about obtaining IDCR
    - http://tea.texas.gov/index2.aspx?id=3842&menu_id=645
- Helps district recover some of its indirect costs
- CMS has approved the use of an unrestricted IDCR
- Districts that need an IDCR should contact TEA – Federal Fiscal Compliance and Reporting Division

QSI Example

QUARTERLY SUMMARY INVOICE FOR MEDICAID ADMINISTRATION

AGENCY:	HHSC ISD
CONTRACT NUMBER:	529-09-9874-56321
PERIOD OF SERVICE:	Q1OD14
CLAIM TYPE:	ORIGINAL

	COST CATEGORIES	COST POOL #1	COST POOL #2
[A]	Total Computable Expenditures	$ 50,000.00	$ 25,000.00
[B]	Total State Share	$ 25,000.00	$ 12,500.00
[C]	Total Federal Share (FFP)	$ 25,000.00	$ 12,500.00
[D]	Total to be reimbursed by Federal Government (Add Line C, Cost Pools #1 + #2)		$ 37,500.00
[E]	5% retention (Contract Sec. II. A. Medicaid Adm) Multiply Line D times 0.05		$ 1,875.00
[F]	Total Federal Government (FFP) to be reimbursed Line D minus Line E		$ 35,625.00

This statement is of expenditures that the undersigned certifies are allocable and allowable to the State Medicaid program under Title XIX of the social Security Act, and in accordance with all procedures, instructions and guidance issued by the single state agency and in effect during the year ended

INTENTIONAL MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION CONTAINED HEREIN MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER FEDERAL AND/OR STATE LAW.

CERTIFICATION STATEMENT BY OFFICER OF THE PROVIDER

I HEREBY CERTIFY that:

1. I have examined this statement, the accompanying supporting exhibits, the allocation of expenses and services, and the attached worksheets for the period from 10/01/2014 to 12/31/2014 and that to the best of my knowledge and belief they are true and correct statements prepared from the books and records of the Provider in accordance with applicable instructions.
2. The expenditures included in this statement are based on the actual cost of recorded expenditures.
3. The required amount of State and/or local funds were available and used to pay for total computable allowable expenditures included in this statement, and such State and/or local funds were in accordance with all applicable Federal requirements for the non-Federal share match of expenditures (including that the funds were not Federal funds in origin, or are Federal funds authorized by Federal law to be used to match other Federal funds, and that the claimed expenditures were not used to meet matching requirements under other Federally funded programs).
4. Federal matching funds are being claimed on this invoice in accordance with the Medicaid Administrative Claiming (MAC) instructions provided by the Health and Human Services Commission effective for the above reporting period.
5. I am the officer authorized by the provider to submit this form and I have made a good faith effort to ensure that all information reported is true and accurate.
6. I understand that this information will be used as a basis for claims for Federal funds, and possibly State funds, and that falsification and concealment of a material fact may be prosecuted under Federal or State civil or criminal law.

Signature - Officer of Provider (Agency) Date

Print Name:

Title: Contact number:

Notary Stamp

STATE OF TEXAS

This instrument was acknowledged before me on the day of , 2

by (Printed Name of Officer of Provider).

Notary Public in and for the State of Texas (signature)

Notary's Name (printed):

Notary's Commission Expires:

JOHN DOE
Notary Public, State of Texas
My Commission Expires
01/01/0000

NOTARY SEAL
(Ink Stamp Only)

Dates must be the same and not expired to be valid.

QSI Certification Statement

- Signing the QSI certifies that the following items are true and correct:
  - I have examined this statement, and that to the best of my knowledge and belief, the expenditures included in this statement are based on the actual cost of recorded expenditures
  - The required amount of State and/or local funds were available and used to pay for total computable allowable expenditures included in this statement
  - I am the officer authorized by the provider to submit this form, and I have made a good faith effort to ensure that all information reported is true and accurate
  - I understand that this information will be used as a basis for claims for Federal funds, and possibly State funds, and that falsification and concealment of a material fact may be prosecuted under Federal or State civil or criminal law

QSI Signatory Information

- Who can sign the QSI?
  - **Must be an employee of the district**
  - **Must have signature authority**
    - Includes the Chief Executive Officer, Chief Financial Officer, Executive Director, Superintendent, or other individual (district employee) designated as the financial contact for the district
  - Does not have to be the primary MAC financial contact
  - Recommend that the Officer of Provider be different than the person completing the MAC Financials
  - Officer of Provider cannot be the Notary

Additional QSI Information

- Does the QSI need to be on district letterhead?
  - No
- Do the Officer of Provider and Notary dates need to be the same?
  - Yes
    - QSI reads: "This instrument was acknowledged before me"
- What are some other important reminders?
  - Notary should <u>not</u> write his/her name in the field marked "Printed Name of Officer of Provider"
  - Keep QSI with supporting documentation

STAIRS Demonstration

State of Texas Automated Information Reporting System

Presented by FAIRBANKS LLC

https://www.fairbanksllc.com/

HHSC MAC Claim Desk Review

- Used to ensure the integrity and accuracy of the claim data
- Discrepancies are brought to the attention of the primary MAC financial contact listed in STAIRS
  - HHSC will contact the district requesting explanation, clarification, and/or correction of discrepancies
  - Failure to provide requested information will affect the district's MAC reimbursement
- District must be able to provide all supporting documentation

MAC Reimbursements

- Timeframe for reimbursement
- Monitor payments via Advance Payment Notification
- MAC reimbursements are Title XIX Medicaid administrative reimbursement funds
  - Not considered American Recovery and Reinvestment Act funds
  - Subject to the Single Audit Act
- Uses of MAC reimbursements
  - Enhance, improve, and/or expand the level and quality of health/medical services provided to all students within the district

STAIRS Reminders

- Passwords
  - Will not change each school year
  - Can be reset at the log-in screen
- Fairbanks can consolidate username/passwords for contacts with multiple accounts
- May access historical financial data if listed as a MAC financial contact and/or Superintendent
- All reference material is on the website
- For system issues or technical questions, contact the Fairbanks Client Information Center
  - Email: info@fairbanksllc.com / Phone: (888) 321-1225

Managing Contacts in STAIRS

- Only one primary contact for each role (RMTS, MAC, SHARS, and Superintendent)
  - Does not have to be the same person
- Primary contacts can:
  - Add and/or delete contacts
  - Assign additional roles to contacts
  - Restrict access of trained contacts
- No limit to the number of secondary contacts in the system
  - Keep the system up-to-date

Allowing Email Messages

- Communication is done predominately via email
- **Role** in STAIRS **determines** what messages you receive
- Critical that your district authorize your email system to accept emails from Fairbanks and HHSC
  - Confirm with your IT staff to ensure that emails with the following extensions pass through firewalls and spam filters:
    - @fairbanksllc.com
    - @hhsc.state.tx.us
    - @tea.texas.gov

Training Credit Information

- Must be listed as a contact in STAIRS in order to receive credit for completing today's training
  - Primary contact at the district can add you as a contact if you are not currently listed
- NO certificates for training credit
  - You will receive an email thanking you for attending today's training; however, this does NOT mean that you will receive training credit
- Training credit can be viewed in STAIRS
  - Remember to filter appropriately (year/district/program/user)
  - Recommend that you print screen for your records
- Allow a maximum of nine business days for your training credit to be processed (i.e., for training credit to be listed in STAIRS)
- Once "Full Access" is indicated in STAIRS, you will be able to update and certify MAC financial data

HHSC MAC Website

http://rad.hhs.texas.gov/medicaid-administrative-claiming/mac-independent-school-districts-isd

- Examples of MAC Activities
- Frequently Asked Questions
- Important Notices
- MAC & SHARS Participation Report
- MAC Video Tutorial
- Participation Documents
- Timestudy Implementation Guide
- Training Materials

Common Acronyms

- CMS – Centers for Medicare & Medicaid Services
- DUA – Data Use Agreement
- FFP – Federal Financial Participation
- FFY – Federal Fiscal Year
- HCAT# – Health and Human Services Contract Administrative Tracking Number
- HHSC – Health and Human Services Commission
- HIPAA – Health Insurance Portability and Accountability Act
- ICA – Intergovernmental Cooperation Agreement
- IDCR – Indirect Cost Rate
- MAC – Medicaid Administrative Claiming
- MER – Medicaid Eligibility Rate
- PEIMS – Public Education Information Management System
- PL – Participant List
- POP – Program Operating Plan
- QSI – Quarterly Summary Invoice
- RDSPD – Regional Day School Program for the Deaf
- RMTS – Random Moment Time Study
- SHARS – School Health and Related Services
- STAIRS – State of Texas Automated Information Reporting System (formerly known as Fairbanks)
- TEA – Texas Education Agency
- TIN – Texas Identification Number (formerly known as Texas Payee Identification Number)
- TS – Time Study

HHSC MAC Unit Contact Information

Mailing:
Health and Human Services Commission
Rate Analysis Department, H-400
P.O. Box 149030
Austin, TX 78714-9030

Email:
MAC@hhsc.state.tx.us

Phone:
(512) 462-6200

Fax:
(512) 730-7475

Additional Contact Information

TEA – Federal Fiscal Compliance and Reporting Division
Phone: (512) 463-9127
Email: compliance@tea.texas.gov

TEA – PEIMS
Phone: (512) 463-9229
Email: PEIMSCustomerSupport@tea.texas.gov

Fairbanks LLC – Client Information Center (STAIRS)
Phone: (888) 321-1225
Email: info@fairbanksllc.com