Independent School Districts

Random Moment Time Study
Texas Health & Human Services (HHSC) Time Study Unit

- Scott Kruse – Manager (512) 490-3194
- Beverly Tackett – Team Lead
- Alexandra Young – Rate Analyst

E-Mail Address: TimeStudy@hhsc.state.tx.us

The HHSC Time Study Unit assists with questions pertaining to:
  - Random Moment Time Study (RMTS)
  - On-line System (Fairbanks, LLC)
  - Participation Eligibility
  - Training
  - Quarterly Participant List
  - Sampled Participants
  - Compliance
  - Disqualification
Agenda

Random Moment Time Study (RMTS)
  RMTS Overview
  RMTS Requirements
  Contacts – Roles and Responsibilities
  Participant List
  Moment Selection
  Moment Response
  System Demonstration
  Polling Questions

School Health and Related Services (SHARS) Cost Reporting Overview
Medicaid Administrative Claiming (MAC) Overview
Wrap up
Overview – What is Random Moment Time Study (RMTS)?

• A federally accepted statistically valid random sampling technique that measures the participant’s time performing work activities.

• A RMTS “Moment” represents one minute of time that is randomly selected from all available moments within the time study period.

• Statewide time study sample
  • Regardless of what district the time study participant is at once the moment has occurred please logon to STAIRS and respond to the series of questions documenting the activity being performed and the name of the district.

• Significantly reduces staff time needed to record participant activities.
Overview – Purpose of RMTS

• Determine the percentage of time the ISD incurs assisting individuals to access medically necessary Medicaid funded services
  • Direct Medical Services
  • Medicaid Outreach
  • Medicaid Eligibility Determination
  • Medicaid Referral, Coordination, and Monitoring
  • Medicaid Staff Training
  • Medicaid Transportation
  • Medicaid Translation
  • Medicaid Program Planning, Development & Interagency Coordination
  • Medicaid Provider Relations

• Reasonably identifies staff time spent on activities during the given quarter.
Overview – Time Study Activities

Direct Medical – Providing care, treatment and/or counseling

Outreach – Informing students, families and groups about available services

Eligibility – Assisting students or families with the Medicaid eligibility process

Referral, Coordination, and Monitoring – Making referrals, coordinating and/or monitoring activities on a student’s IEP

Staff Training – Coordinating, conducting or participating in training pertaining to medical or Medicaid services

Translation – Arranging or providing translation to a student or family to access medical or Medicaid services

Transportation – (Exclude bus drivers) aides and monitors accompanying students in need of personal care services or arranging transportation to medical services

Program Planning, Development & Interagency Coordination – Developing strategies to improve the coordination and delivery of medical or Medicaid services

Provider Relations – Activities to secure and maintain Medicaid providers
Overview – RMTS Process

1. RMTS Contact identifies pool of time study participants
2. HHSC Contractor identifies pool of available time study moments
3. HHSC Contractor randomly matches moments and participants
4. RMTS Contact ensures selected participants are trained
5. HHSC Contractor codes moment
6. Participant responds to selected moment by answering moment online
Requirements for RMTS

- Time Study Periods (Federal Fiscal Quarters)
  1st Quarter - October, November, December
  2nd Quarter - January, February, March
  3rd Quarter - April, May, June
  4th Quarter – No Time Study conducted

- To claim SHARS you must have an active Texas Provider Identifier (TPI) number obtained from TMHP and participate in time study.

- To claim MAC you must have a valid HCAT number obtained from HHSC and participate in time study.

- Participant List (PL) must be certified for ISD to participate in the random moment time study (RMTS).

- To be included on the MAC claim and/or SHARS cost report position must be included on the PL.

- A statewide response rate of 85% for RMTS moments is required.

- There are mandatory training requirements.
## Requirements – Important Dates

<table>
<thead>
<tr>
<th>Event</th>
<th>Opens/Begins</th>
<th>Closes/Ends</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Participant List (PL)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1st Quarter PL</td>
<td>05/16/2018</td>
<td>09/14/2018</td>
</tr>
<tr>
<td>2nd Quarter PL</td>
<td>09/15/2018</td>
<td>12/14/2018</td>
</tr>
<tr>
<td>3rd Quarter PL</td>
<td>12/15/2018</td>
<td>03/08/2019</td>
</tr>
<tr>
<td><strong>Time Study (TS)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1st Quarter TS</td>
<td>10/01/2018</td>
<td>12/11/2018</td>
</tr>
<tr>
<td>2nd Quarter TS</td>
<td>01/09/2019</td>
<td>03/29/2019</td>
</tr>
<tr>
<td>3rd Quarter TS</td>
<td>04/01/2019</td>
<td>05/31/2019</td>
</tr>
</tbody>
</table>

* Dates are subject to change*
Requirements – Training

• Each RMTS Contact must complete HHSC training annually
  
  HHSC recommends that all participating ISD’s have at least 2 employees attend mandatory RMTS Contact training.

• Each Time Study (TS) participant must be trained annually by a HHSC trained RMTS Contact.

• Those who have never attended RMTS training must attend an initial training. Initial training must be interactive and therefore must be conducted via Face-to-Face, Webinar, Skype or Teleconference.

• Those who have ever attended an initial training must attend refresher training or may attend an initial training again. Refresher training may be conducted via CD's, videos, web-based and self-paced training.
Requirements – Training

Full Access versus View Only Access

System Access is limited to “View Only” until training is completed.
STAIRS Contacts –

Four STAIRS Contact Types

Superintendent
RMTS Contacts
MAC Financial Contacts
SHARS Financial Contacts

• MAC and SHARS Contacts will be discussed only briefly during the MAC and SHARS overview presentations

• The mandatory MAC Financial Contact training and SHARS Financial Contact training will both be held separately
STAIRS Contacts –

Other Contacts

Sampled Participants

HHSC Time Study Unit

HHSC Contractor

Fairbanks LLC

Technical Support

Central Coding Staff
Contact – Roles

Superintendent

Superintendent is the first contact currently designated in the Fairbanks system. Username and password will be provided via E-mail.

Superintendent has the ability to add “Primary” RMTS contact.

• Primary RMTS Contact can add Secondary Contacts

When a Primary or Secondary RMTS contact is added it automatically generates an e-mail containing their username and password.
Contact – Roles

RMTS Contact

Must be an employee of ISD or its designee

Primary RMTS Contact must be an employee of ISD
ISD assumes all responsibility for designee’s actions/non-actions

Ensure all contact information is current and accurate

Must attend annual training provided by HHSC

Verify and update quarterly Participant List

Provides RMTS training to sampled participants

Provides ongoing technical assistance to participants

Ensure ISD compliance with 85% required response rate

Receives weekly list of participants that did not respond to their moments (document reason for missed moments)

Contact can enter paid and unpaid time off for the selected participants when they are unavailable
Helpful Hints

If you have a time study participant that is absent on their selected moment and will be returning within the 5 business days, then the participant should respond to the moment. If the time study participant will not returning within the 5 business days, then the RMTS Contact should respond to the moment as “paid or unpaid” leave.

If you have an employee who has terminated/retired or changed positions and has been chosen for a selected moment... If the position is Vacant then the RMTS Contact should respond to the moment as “paid or unpaid” leave. If the position has been filled then the selected moment should be forwarded to the new employee to respond.
RMTS Contacts

Helpful Hints

If you have a VACANT position that is selected for a moment and it has been filled then it should be forwarded to the new employee to respond to the moment. If the position is filled after the 3 day notification has been sent to the vacant position or the employee previously in that position the new employee will have to use the username and password provided on the 3 day notification. Remember the username/password is unique to that moment.

Because this is a STATEWIDE time study sample if you have an employee (contractor or regular) that has been selected for a moment but is working for another district at the time of their moment they still respond to the moment what they were doing.
### Manage Time Study Sample

**Open Quarter: July September 2014**

<table>
<thead>
<tr>
<th>Job Category</th>
<th>Last Name</th>
<th>First Name</th>
<th>Email</th>
<th>Location</th>
<th>Employment Type</th>
<th>Moment</th>
<th>Is Certified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Worker - Licensed Baccalaureate (LBSW)</td>
<td></td>
<td></td>
<td>@esc16.net</td>
<td>5800 Bell, Amarillo</td>
<td>Full Time</td>
<td>07/01/2014, 08:42 AM</td>
<td>Certified</td>
</tr>
<tr>
<td>Speech Language Pathologist - Licensed (SLP)</td>
<td></td>
<td></td>
<td>@esc16.net</td>
<td>5800 Bell St. Amarillo</td>
<td>Full Time</td>
<td>07/23/2014, 04:07 PM</td>
<td>Not Certified</td>
</tr>
<tr>
<td>Director - Program</td>
<td></td>
<td></td>
<td>@esc16.net</td>
<td>5800 Bell St. Amarillo</td>
<td>Full Time</td>
<td>07/29/2014, 02:13 PM</td>
<td>Not Certified</td>
</tr>
<tr>
<td>Social Worker - Licensed Master (LMSW)</td>
<td></td>
<td></td>
<td>@esc16.net</td>
<td>817 W. Ave, Wellington</td>
<td>Full Time</td>
<td>08/05/2014, 04:17 PM</td>
<td>Future Moment</td>
</tr>
<tr>
<td>Early Intervention Specialist (EIS)</td>
<td></td>
<td></td>
<td>@esc16.net</td>
<td>5800 Bell, Amarillo</td>
<td>Full Time</td>
<td>08/05/2014, 06:43 AM</td>
<td>Future Moment</td>
</tr>
</tbody>
</table>

**RMF Information**
- [RMF Information Website (TX - HHSC)](link)

**MAC Information**
- [MAC Information Website (TX - HHSC)](link)

For questions, please contact Fairbanks LLC Client Information Center: (888) 321-1225 or info@fairbanksllc.com

Fairbanks LLC. All Rights Reserved.
Contact – Roles

Time Study Participant

Must answer the following to document the sampled moment:

• Who was with you?
• What were you doing?
• Why were you performing activity?

Must attend annual training provided by trained RMTS Contact

Participant notified of moment 3 days in advance

Enter response within 5 business days of moment

Reminders sent to participants via e-mail at 24, 48, & 72 hrs.

• Primary RMTS Contact copied on the 72 hour reminder

Failure to enter the information will disqualify the moment

Respond to follow-up questions from coders within 3 business days from receipt of e-mail.

• Primary RMTS Contact will be copied on the e-mail
Contact – Roles

HHSC – Time Study Unit

• Provides RMTS support and guidance
• Provides training to RMTS Contacts
• Provides training to Central Coders
• Works with appropriate federal agencies to design and implement programs.
• Conducts ongoing program review to include:
  
  Time Study results
  Compliance with training requirements
  Documentation compliance
• Sends out the non-compliance notification letters
Contact – Roles
Fairbanks, LLC.

Central Coders

• Receives training from HHSC on activity codes
• Review the participant’s response for the sampled moment
• Assigns activity code using uniform time study codes
• When additional information is needed they must obtain clarifying information from time study participants via follow-up e-mail within 3 business days of request.
• Moments and assigned codes are reviewed by a 2nd and 3rd coder for agreement and quality assurance
Contact – Roles

Fairbanks, LLC.

Technical Support

• Contracted by HHSC to operate and administer the web-based RMTS system

• Assist in annual training for RMTS Contacts

• Ongoing system support

• Send e-mail notification to selected participants 3 days prior to the sampled moment

• Send reminder e-mails for non-response to the sampled moment
Participant List (PL)

Participant List

• Development
• Certification
• Who’s In
• Drop Down Options
• System Demonstration
PL - Development

At the beginning of each quarter the trained RMTS Contact provides a comprehensive list of staff eligible to participate in the RMTS.

The Participant List (PL) can only be updated by a HHSC trained RMTS Contact.

Once PL is closed:

- Cannot add/delete participants
- Cannot Change position/function category
- No changes after the 3rd quarter until the next FFY PL opens

If the participant performs more than one function:

- Select function which most closely matches the majority of their time during the quarter

To remove duplicates from the PL do the following:

Export your PL to Excel. Choose the column of data (e.g. address, external ID) that may have duplicates. Highlight that column and choose the “conditional formatting” option. You’ll see an option there to “highlight duplicate values”

It’s easy to identify and remove any duplicates.
PL - Development

An accurate PL is a critical part for ensuring eligibility for MAC and/or SHARS

If an ISD does not update/certify its PL by the deadline:

- They are ineligible to submit a MAC claim for that quarter
- They are ineligible for SHARS reimbursement for the entire FFY 2019

Every time the PL is updated, it is also certified.

- Even if there are no changes to the participant list from the previous quarter the RMTS Contact must open the PL and click the certify the PL button prior to the deadline.

Reminder e-mails will be sent only to those ISDs that have not certified their PL.

The PL provides a basis to identify the positions that may be included in the MAC claim and SHARS cost report.
All staff chosen to participate in RMTS will be categorized in one of two staff pools in the Fairbanks system.

Administrative Services identified on the list as (MAC only)

Direct Service and Administrative

Direct Service and Administrative

Includes eligible staff that provide direct medical services and administrative activities associated with Medicaid

Administrative Services Only

Includes staff that perform administrative activities associated with Medicaid
**PL - Who’s In?**

**Participant List includes:**

Staff who perform SHARS Direct Medical services or MAC activities:

- As a part of their regular duties at least on a weekly basis
- Regular Staff
  
  Include Federally Funded Employees

- Contractors: include all position(s) that provide services for the ISD and are not employees of ISD
  
  - If the district has one position being filled by multiple Contractors it should be listed as one position on the PL.
  
  - If the district has multiple positions being filled by one or more Contractors then each position should be listed on the PL.

- Vacant positions: include those that are anticipated to be filled (with reasonable certainty) during the quarter
The following PL categories can include a mix of job functions and job titles:

- Personal Care Service Provider
- Delegated Nursing
- Service Coordinator/Case Manager
- Outreach Worker
- Behavioral Counselor

These categories must include the functional (or working) job title on the PL.
PL - Category Clarification

SBEC Certified or TEA Certified School Counselor and Educational Diagnostician job titles are not eligible categories for SHARS (unless they perform PCS) but can be included on the Participant List for MAC if the district participates in MAC.

Please note the SBEC Certified or TEA Certified School Counselors and Educational Diagnosticians still have to qualify under the Admin Cost Pool eligible category by performing Medicaid allowable activities to be included in the RMTS.
PL - Drop Down Options
SHARS Direct Medical Categories

Registered Nurses (RN)
Licensed Vocational Nurses (LVN)
Advanced Practical Nurses (APN)

**Delegated Nursing Services**
Physicians (MDs & DOs)
Licensed Audiologist
Licensed Assistant in Audiology
Licensed Occupational Therapist (OT)
Certified Occupational Therapy Assistant (COTA)
Licensed Physical Therapist (LP)
Licensed Physical Therapy Assistant (LPTA)
Licensed Psychological Associate
Licensed Psychologist
Licensed Specialist in School Psychology (LSSP)

Licensed Psychiatrist
ASHA-Equivalent Speech Language Pathologist (SLP) with Texas license and master’s degree
ASHA SLPs with Texas licenses
Grandfathered SLP with Texas license and no master’s degree
TEA- or SBEC-Certified Speech Therapists
Licensed Assistant in SLP
Licensed SLP Intern
Licensed Professional Counselor (LPC)
Licensed Marriage and Family Therapist (LMFT)
Licensed Clinical Social Worker (LCSW)

**Personal Care Service Providers**

---

All inclusive list of SHARS providers approved by Center for Medicare & Medicaid Services (CMS)
PL - Drop Down Options

MAC Only Categories

Behavioral Counselor
Interpreter/Translator/Bilingual Specialist
Licensed Bachelor of Social Work (LSW)
Licensed Master of Social Work (LMSW)
Physician Assistant (PA)
Pregnancy, Education & Parenting Program Personnel
Psychology Intern
Orientation & Mobility Specialist
Outreach Workers
Service Coordinator/Case Managers
Demonstration of RMTS online system:

- Participant List Development
- Managing Contacts
- Designating “Willing to Hire Out”
- Training Tracking
- Time Study Sample
- Monitoring Response Completion
- Documenting non-response
Educational or Direct Medical?

**Educational Services Include:**

- Reading/English/Language Arts
- Writing
- Mathematics
- Science
- Social studies
- Physical education
- Electives
- Activities that do not require human intervention to accomplish the task the student would normally do for themselves if they did not have a disability or chronic medical condition
Educational or Direct Medical?

Direct Medical Services Include:

Medical services that require a licensed, skilled, trained professional

- Nursing
- Psychology
- Counseling
- OT, PT, Speech,
- Evaluations

Personal Care Services

Activities that require human intervention to accomplish the task the student would normally do for themselves if they did not have a disability or chronic medical condition, i.e., hands on assistance, monitoring, cueing, redirection, Activities of Daily Living (ADL)
Updates and Concerns

Personal Care Services are not being documented appropriately when responding to the time study. As a result there will be follow-up questions when this occurs.

As the RMTS Contact you are responsible for training the time study participants on the following as it pertains to personal care services.

• A personal care service is a direct medical service

• A student receiving a personal care service should have an IEP that list the specific activity and personal care service needed

• Personal Care Service providers should know when responding to a time study moment the response should be restricted to the one minute in time. Do not list multiple activities or their job description/responsibilities

• A response should always include the specific PC activity (cueing, monitoring) and the service being provided

• When responding to a time study moment if the “Why” states “to provide a direct medical service as defined on a student IEP” then the “What” should clearly define the personal care service

• In situations where lesson planning is being done please indicate the specific student audience and if it is IEP related.
Personal Care Services

- Personal care services (PCS) are provided to assist a student with a disability or chronic health condition so they may benefit from school/educational services.

- Personal care services include a range of human assistance provided to students to accomplish tasks the student would normally do for themselves if they did not have a disability.

  A student may be physically capable of eating lunch but is unable to independently eat in the cafeteria because of functional, cognitive, or behavioral impairments.

- PCS may be provided by a wide range of school personnel:
  - Teacher Aides
  - Health Care Aides
  - Instructional Aides
  - Bilingual Aides
  - Bus Aides/Monitors
  - Orientation/Mobility Specialists
  - Teachers
  - Clerks
Personal Care Services

• Include but are not limited to:

  Eating/feeding
  Meal preparation
  Personal hygiene
  Toileting
  Maintaining continence
  Dressing
  Grooming
  Transferring

  Monitoring
  Redirection
  Cueing
  Positioning
  Ambulation
  Intervening with behaviors
  Respiratory assistance
  Assisting with self administering medication
Personal Care Services

Personal Care Services are often provided in Life Skills/Self-Contained classrooms because:

• The Life Skills class consists of students with Moderate to Severe disabilities, showing limitations in communication, social skills, and activities of daily living (ADL)

• The course curriculum is driven by the student’s needs as stated in each student’s IEP

• These classes may have different skill areas addressed based on student needs, like
  
  Domestic skills
  Daily living skills
  Pre-vocational skills
  Vocational skills
  Social skills
A teacher helping a student solve a math problem that they are having difficulty understanding.

A PCSP is assisting a student solve a math problem by providing hand over hand assistance using a calculator.

A teacher demonstrating sounding out words during a reading lesson.

A Speech Therapist is working with a student on an articulation exercise.

A teacher in an inclusion class is teaching a Social Studies lesson.

A teacher’s aide is monitoring and cueing students in an inclusion class during a Social Studies lesson to stay seated.
Educational vs. Direct Medical/PCS

- A Licensed Specialist in School Psychology providing academic counseling to a student.
- A Licensed Specialist in School Psychology providing relaxation therapy to a student as part of their defined BIP.
- A Nurse teaching students in a health class the benefits of proper hand washing.
- A Delegated Nurse assisting a diabetic student in washing their hands prior to checking their blood sugar per the IEP.
- A PCSP in the cafeteria monitoring all students.
- A PCSP in the cafeteria cueing a student to swallow between bites during lunch.
What Is Monitoring?

Monitoring is a Direct Medical Service when:

• The student just received medication as indicated on his/her IEP. The participant is monitoring the student for a reaction.
  This activity is a delegated nursing service

• Student’s IEP requires that he/she receive continuous monitoring due to a behavior problem.
  This activity is a personal care service (PCS)

• The teacher’s aide is monitoring a student in a wheelchair to ensure they do not slide down in their wheelchair.
  This activity is a personal care service (PCS)

Monitoring is an Educational Service when:

• General monitoring of students in a cafeteria to ensure all students’ behaviors are in accordance with school policy.
  This activity is general supervision of students
Moment - General

• Total pool of moments calculation:
  \((\text{work days in quarter}) \times (\text{work hours each day}) \times 60 \times (\# \text{ of participants})\)

• Time study “moments” are randomly selected throughout the entire quarter.

• A time study “moment” represents one minute at the selected time.

• If a participant is sampled for a “moment,” their only responsibility is to document what they were doing at that precise minute.

• Some options have hover-overs or question marks that provide additional information that helps the participant make the best selection.
RMTS Moment

- Sampling and Notification
- Participant Questions
- System Demonstration
- Moment Completion
RMTS Moment – Notification
Example of E-mail sent to selected participants

Name: [redacted]
District: [redacted]
District Contact: [redacted]
RMTS Category: Personal Care Service Provider
Random Moment: 01:52 PM on 04/03/2015

You have been selected to participate in the Random Moment Time Study (RMTS) which is a brief online survey on behalf of your school District. Your participation is mandatory and assists your school District in obtaining reimbursement for school-based health and outreach activities.

In order to complete the Random Moment Time Study, you will need to go to www.fairbanksllc.com and select CLIENT LOGIN (in upper right hand corner). You will then need to login with the information below and answer three simple questions to report the activity you were performing at your sampled moment of 01:52 PM on 04/03/2015.

User Name: [redacted]
Password: [redacted]

If you need any assistance or have any questions, please contact your District Contact listed above or the Fairbanks support line at (888) 321-1225 or at info@fairbanksllc.com.
Uncompromised quality and client service.

Fairbanks provides a depth of industry, programmatic, and technology expertise as well as an extensive geographical reach. We are a firm that is dedicated to each client's success, the excellence of our people, and a spirit of partnership. More about Fairbanks LLC >

What We Do

Fairbanks partners with government agencies to provide strategic, operational, and technology solutions to support Medicaid and other claiming programs.

Who We Work With

Fairbanks understands and is focused on the public sector. Our major clients include State Medicaid agencies and local government agencies.

www.fairbanksllc.com
Moment - Login Screen
Random Moment Time Study

Welcome to the Random Moment Time Study. Your participation in the random moment Time Study is an integral component for your program to receive Federal reimbursement and should only take a few minutes to complete.

Please complete the following screen indicating the activity that you were performing during your sampled date and time, providing as much detail as possible. If you have any questions, do not hesitate to contact the Fairbanks Client Information Center at (888) 321-1225.

Start Random Moment Time Study

Reference Materials

- RMITS Information Website (TX - HHSC)

Do You Need Help?

For any additional questions, please contact the Fairbanks Client Information Center at (888) 321-1225.

For questions, please contact Fairbanks LLC Client Information Center (888) 321-1225 or info@fairbanksllc.com
Random Moment Time Study
RMTS Training & Completion Instructions
You have been selected to participate in the Random Moment Time Study (RMTS) on behalf of your center/district. You are required to complete the following RMTS screens, which will ask a series of questions you will need to answer for your sampled moment. It is important that you complete the RMTS screens as accurately as possible.

1. Keep in mind that you are responding for one precise minute in time. Document what you were doing at the sampled moment of time.

2. Dropdowns and/or optional activity descriptions are provided to assist you. If you do not see a response that applies, choose "other" and you will be provided an explanation box in which you can describe what you were doing.

3. If a blue question mark icon appears at the end of an optional activity description, you may click on the "?" to obtain additional information.

4. The person who will be reviewing your response has no idea of your job description, tasks you perform, or how you perform them, so it is up to you to ensure the proper information needed to adequately describe what you were doing at the time of your moment. If you provide insufficient information, you will receive a follow-up email or telephone call requesting additional information.

5. Responses such as the following do not provide sufficient information and should be avoided:
   - "I was doing my job."
   - "I was completing my job responsibilities."
   - "I was completing this time study response."

6. It is best to avoid the use of acronyms and to instead spell out the definition, description, or title.

7. Do not provide client/student-specific names. Instead, your response should state that you were working with a client/student or a group of clients/students, if that were the case.

8. If you were performing at the time of your sampled moment, please include a description of the activity you will be performing upon arrival.

9. If you were not working at the time of your moment, please indicate if it was paid or unpaid leave/time off.

For the purposes of this time study:

Direct Medical Services
Include:
- Activities that require human interventions such as hands-on assistance, supervision, or curing of a student with a disability or chronic medical condition, to accomplish tasks that the student would not normally do for themselves if they did not have a disability or chronic medical condition;
- Personal care services;
- Specialized transportation services;
- Psychological services;
- Physical therapy;
- Speech therapy; and

For additional examples click here.

Educational Services
Include activities associated with traditional courses that do not require human intervention to accomplish tasks such as:
- Reading/English/language arts;
- Math;
- Science;
- Social studies; and
- Physical education.

Please click on the button below to continue.

Welcome, (Login)

Reference Materials
- RMTS Information Website (TS - RMTS)
- RMTS Participant Manual 2.11.49

Do You Need Help?
For any additional questions, please contact the Fairbanks Client Information Center at (800) 321-1226.

For questions, please contact Fairbanks LLC Client Information Center: (888) 321-1225 or info@fairbanllc.com

Fairbanks LLC. All Rights Reserved.
Moment - Responses

WHO Was With You?

WHAT Were You Doing?

WHY Were You Doing It?
Moment - System Demonstration

Demonstration of RMTS online system

- Sampled Participant’s Response to Moment
Response

Question: Who was with you?

1. Who was with you?

   Please select an answer...

   Please select an answer...

   Special Ed student

   Student - Not Special Ed

   Student with learning disability (dyslexia, language difficulty, reading difficulty, math difficulty, etc.)

   Multiple students

   Teachers, Aides, or School Administrator(s)

   Related Service Provider

   Parent, Guardian, or Caregiver

   No one, alone

   Not Working

   Other - please specify below
Response – Drop Downs

Question: Who Was With You?

1. Special Ed student
   - With health impairment (chronic medical condition)
   - With physical disability
   - With intellectual disability (IDD)
   - With mental health/psychological disability (emotionally disturbed, etc.)
   - With autism

2. Student not Special Ed

3. Student with learning disability (dyslexia, language difficulty, reading difficulty, math difficulty, etc.)

4. Multiple students
   - All with either a disability or medical impairment
   - Some with disability or medical impairment and some with no disability or impairment
   - All without any disability or medical impairment
Question: Who Was With You?

5. Teachers, Aides, or School Administrator(s)
6. Related Service Provider
7. Parent, Guardian or Caregiver
8. No one, alone
9. Not Working
   - Paid time off
   - Unpaid time off
10. Other
Response –

Question: What were you doing?

2. What were you doing?

Please provide a 2-4 sentence description of the ONE activity/service that you were MOST involved in (i.e. teaching, therapy, supervision, cueing, staff meeting, prompting, reading, lunch, monitoring, testing, redirection, evaluation, etc.) DO not use proper names or acronyms.
Response –

Question: What were you doing? (Text Box)

Please provide a 2-4 sentence description of the ONE activity/service that you were MOST involved in (teaching, therapy, supervision, cueing, staff meeting, prompting, reading, lunch, monitoring, testing, redirection, evaluation, etc.)

Please keep in mind:

• When providing PCS the “WHAT” is more about why the student needs your support rather than what is going on in the class.

• You are describing exactly what took place only in the 60 seconds of the moment

• The person coding the moment has no background or knowledge of ISD job descriptions; tasks performed or what Special Education is.

• Don’t use acronyms in the description

• Don’t use people’s names in the responses

• If not working, indicate if it was paid or unpaid time off
Question: Why were you performing this activity?

<table>
<thead>
<tr>
<th>Please select an answer:</th>
</tr>
</thead>
<tbody>
<tr>
<td>To ensure safety for student(s) from self, others, environment that they cannot perceive independently</td>
</tr>
<tr>
<td>To keep the student on task, in seat, awake that they cannot manage independently</td>
</tr>
<tr>
<td>To assist the student physically</td>
</tr>
<tr>
<td>To assist the student intellectually (read or repeat instructions, demonstration, hand over hand)</td>
</tr>
<tr>
<td>To assist the student toileting</td>
</tr>
<tr>
<td>To monitor the student that requires supervision or physical assistance</td>
</tr>
<tr>
<td>To transition the student that requires supervision or physical assistance</td>
</tr>
<tr>
<td>To assist the student feeding/eating that requires supervision or physical assistance</td>
</tr>
<tr>
<td>To monitor/intervene with behaviors (aggression, self-stimulation, verbal interference, etc.)</td>
</tr>
<tr>
<td>To provide classroom instruction</td>
</tr>
<tr>
<td>To supervise students in general population</td>
</tr>
<tr>
<td>To provide medication/medical care/first aid</td>
</tr>
<tr>
<td>To provide therapy (Speech, OT, PT, Sensory stimulation)</td>
</tr>
<tr>
<td>To conduct assessment/evaluation</td>
</tr>
<tr>
<td>To provide or obtain information to or from a student's family</td>
</tr>
<tr>
<td>To determine student's/family's eligibility for Medicaid/Health benefits</td>
</tr>
<tr>
<td>To determine student's/family's eligibility for other programs/benefits</td>
</tr>
<tr>
<td>To upgrade professional skills through training</td>
</tr>
<tr>
<td>To improve social/vocational/educational services for the district's students</td>
</tr>
<tr>
<td>To improve health related services for the district's students</td>
</tr>
<tr>
<td>To coordinate/provide transportation</td>
</tr>
<tr>
<td>To coordinate/provide translation</td>
</tr>
<tr>
<td>To provide counseling</td>
</tr>
<tr>
<td>To participate in a meeting</td>
</tr>
<tr>
<td>Not Working</td>
</tr>
<tr>
<td>Other - please specify below</td>
</tr>
</tbody>
</table>
Response – Drop Downs

Question: Why were you performing this activity?

1. To ensure safety for student(s) from self, others, environment that they cannot perceive independently
   - Per IEP
   - Without IEP

2. To keep the student on task, in seat, awake that they cannot manage independently
   - Per IEP
   - Without IEP

3. To assist the student physically
   - Per IEP
   - Without IEP

4. To assist the student intellectually (read or repeat instructions, demonstration, hand over hand)
   - Per IEP
   - Without IEP
Response – Drop Downs

Question: Why were you performing this activity?

5. To assist the student toileting
   - Due to disability (cognitive, physical, or mental health) – Per IEP
   - Due to disability (cognitive, physical, or mental health) – Without IEP
   - As part of age appropriate toilet training (Pre-K and Kindergarten)

6. To monitor the student that requires supervision or physical assistance
   - Per IEP
   - Without IEP

7. To transition the student that requires supervision or physical assistance
   - Per IEP
   - Without IEP

8. To assist the student feeding/eating that requires supervision or physical assistance
   - Per IEP
   - Without IEP
Response – Drop Downs

Question: Why were you performing this activity?

9. To monitor/intervene with behaviors (aggression, self stimulation, verbal interference, etc.)
   - With BIP (Behavioral Intervention Plan) Per IEP
   - With BIP (Behavioral Intervention Plan) Without IEP
   - Without BIP - Per IEP
   - Without BIP - Without IEP

10. To provide classroom instruction

11. To supervise students in general population

12. To provide medication/medical care /first aide
   - Per IEP
   - Without IEP

13. To provide therapy (Speech, OT, PT, Sensory stimulation)
   - Per IEP
   - Without IEP
Response – Drop Downs

Question: Why were you performing this activity?

14. To conduct assessment/evaluation
   - Full Individual Evaluation (FIE) for Special Ed determination
   - Academic Assessment
   - Hearing/Vision Assessment
   - Speech, OT, PT, Nursing or Nutritional Assessment

15. To provide or obtain information to or from student’s family
   - Regarding SHARS (School Health and Related Services)
   - Regarding all other services

15. To determine student’s/family’s eligibility for Medicaid/Health benefits

16. To determine student’s/family’s eligibility for other programs/benefits

17. To upgrade professional skills through training
   - Through medical/health related training
   - Through educational training
**Response – Drop Downs**

**Question: Why were you performing this activity?**

18. To improve social/vocational/educational services for the district’s students
19. To improve health related services for the district’s students
20. To coordinate/provide transportation
   - For medical services for a specific student
   - For social/vocational/educational purposes
21. To coordinate/provide translation
   - For medical services for a specific student and/or student’s family
   - For social/vocational/educational purposes
22. To provide counseling
   - Academic Counseling
   - Vocational Counseling
   - Mental Health Counseling per IEP
   - Mental Health Counseling without IEP
   - Other
Response – Drop Downs

Question: Why were you performing this activity?

23. To participate in a meeting
   - Staff – Academic discussion
   - Staff – SHARS Medical/Medicaid discussion
   - IEP – Academic discussion
   - IEP - SHARS Medical/Medicaid discussion
   - Other

24. Not working
   - Paid Time Off
   - Unpaid Time Off

25. Other

  Please explain why you chose the answer “Other” – please specify below
Complete Time Study - Review and Submit (Print)

FAIRBANKS LLC

Random Moment Time Study

CONGRATULATIONS KIM KASNER, YOU HAVE COMPLETED THE TIME STUDY!

Random Moment Time: 04/01/2015, 08:41 AM Central Time

Thank you for participating in the time study! You have now completed the necessary steps required for participation. We appreciate your participation in this important program. You may now logout or close this window.

Print Confirmation Receipt

Reference Materials
- RMTS Information Website (TX - HHSC)
- RMTS Participant Manual 2-11-09

Do You Need Help?
For any additional questions, please contact the Fairbanks Client Information Center at (888) 321-1225.

For questions, please contact Fairbanks LLC Client Information Center: (888) 321-1225 or info@fairbanksllc.com

Fairbanks LLC. All Rights Reserved.
Complete Time Study - Review and Submit (Confirmation Receipt)

Random Moment Time Study

TARA MADRIGAL, YOUR TIME STUDY IS COMPLETE AND WAS CERTIFIED BY FAIRBANKS AT 04/10/2015, 09:10 AM CENTRAL TIME.

Random Moment Time: 04/08/2015, 08:59 AM Central Time

Here are your answers:

Who was with you?
Student, Special Ed (Age 3-20)

What were you doing?
I was providing a direct medical service to the child.

Why were you performing this activity?
To provide an educational service as defined on a student's IEP

For questions, please contact Fairbanks LLC Client Information Center: (888) 321-1225 or info@fairbanksllc.com

Welcome: [Redacted] (Logout)
Contact Information

Time Study
Beverly Tackett
Alexandra Young

(512) 490-3194

E-Mail Address
TimeStudy@hhsc.state.tx.us

Web site
https://rad.hhs.texas.gov/time-study/time-study-independent-school-district-isd

Fairbanks, LLC.
info@fairbanksllc.com

(888) 321-1225
E-Mail Messages

Communication is managed predominantly via e-mail, i.e.

- RMTS moment notifications and follow ups
- Participant list updates
- Compliance follow-ups
- MAC Financial notifications and follow-ups

Role in Fairbanks dictates what messages you receive

It’s critical that your district authorize your e-mail system to accept emails from Fairbanks.

Confirm with your IT staff to make sure that e-mails with info@fairbanksllc.com, and @hhsc.state.tx.us extensions pass through firewalls and spam filters.
Helpful Hints

Passwords

Passwords will not change

If you forget your password, you can reset it at the log-in screen

Manage Contacts

Delete contacts if they are no longer with your district

Do not back space and type over the name

To add a contact in system use the “Add a new contact”

Username & Password will be emailed

The primary contact can change primary status from themselves to a secondary. A secondary contact cannot change primary contact status

There can be only one Primary contact for each role (RMTS, MAC and SHARS)

There is no limit to the number of secondary contacts

For system questions contact Fairbanks support line: (888) 321-1225
WRAP UP

If you are not listed in the Fairbanks system as a Contact then you cannot receive credit for completing this training until you have been added by the Primary RMTS contact or Superintendent.

There are no certificates for training:

• You will receive an email thanking you for attending today’s training, however this does not mean that you will receive training credit.

• RMTS Contacts can view attendance information via Fairbanks by clicking the "Training" tab on the top far right portion of the screen.

• A maximum of 9 days processing time is required after attending training before the session attended will be listed next to the RMTS Contact's name and the "status" column will then show full access.

• Once “Full Access” is indicated you will be able to update/certify the participant list.

• You can print this screen using the printer icon located on the top right corner of the screen for your records.