

Random Moment Time Studies – a Guideline for Designated Case Managers

- The time study gathers information on the activities that school staff provide students and classifies them as educational or related to case management services that could be reimbursed by the Medicaid program.
- Notification is via email from miaop@pcgus.com. For compliance, responses are expected within 24-48 hours.
- It is important that the person who reviews and assigns a code to your answers understands your activity, so please follow these important guidelines.

Using detail and being specific helps to avoid follow-up questions.

Question 1 - Who was with you?

Too Vague	Detailed Response
A student	A student who is severely, multiply impaired
A parent	A parent of a student with autism
A teacher	The SXI classroom teacher
A principal and staff	The principal of our center program for special ed. students, along with the OT, PT and Social Worker

Question 2 – What were you doing?

Too Vague	Detailed Response
Talked with staff	Consulted with the OT concerning the student’s wheelchair needing repair; leg locks are missing internal bolts; front wheel wobbly.
Discussion with parent	Talked to parent about the effects of new medication that I have observed. Student is calmer in the classroom. Parent reporting that behavior is improving at home as well. I will update the school nurse.
Phone call home	Received update from parent after student’s hospital visit. Parent received prescription for new medication and a script for OT and PT services.

Question 3 - Why were you doing this activity

Too Vague	Detailed Response
Wheelchair is shaky	Student is wheelchair bound and personal care providers are having a difficult time moving student. There is difficulty for our transportation staff as well.
Monitoring behavior	Student receives nursing services and medication is monitored at school. The student’s behavior in the classroom is affected by the medication.
Follow up on services	Student is to receive OT and PT services per the IEP. Script needed to begin services at school

Question 4 - Is the service you provided part of the child’s medical plan of care or for which medical necessity has been determined? Options include: (pick one)

- Yes – IEP/IFSP
- Yes – Medical Plan of Care other than an IEP/IFSP (i.e. 504 plan, student health plan, nursing plan, physician’s order, crisis intervention services)
- Medical necessity established in other method
- No, or N/A

Question 5 - Are you this student’s Designated Case Manager?

For students on your caseload who have an ancillary service on their IEP (even those over age 21) the answer is **YES**. The student does not need to be Medicaid eligible for you to answer yes to this question.