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Policy

Tribal Medicaid Administrative Claiming Tribal Consultation October 9, 2018



Medicaid Administrative Claiming

- Federal regulations allow states and localities to receive reimbursement by the federal government for administrative costs not associated with direct services
- These administrative costs may be eligible for reimbursement through Medicaid Administrative Claiming (MAC)
- Mac allows reimbursable costs incurred by a jurisdiction to be matched with federal dollars through federal financial participation (FFP)



Covered and Noncovered Costs

- MAC can be applied toward salaries, benefits, and other costs of staff that provide administrative activities. Examples may include:
 - Medicaid outreach
 - Arranging transportation
 - Medicaid eligibility intake
 - Referral, coordination and monitoring
 - Cost of consultants and vendors may be applicable as well



Covered and Non Covered Costs, cont.

- Reimbursement cannot be made for direct services that are reimbursable through Medicaid.
- There is no reimbursement for expenditures that already receive federal funding.



Other examples of Administrative Activities

- Discussing access to health care with Tribal members, families and others
- Assisting in early identification of children who could benefit from health services provided by Medicaid
- Contacting pregnant and parenting teens about the availability of Medicaid prenatal and well baby programs
- Providing referral assistance to Tribal members, families and others where Medicaid can be provided.



Participation Requirements

- To participate in MAC claiming, the entity needs to submit a Cost Allocation Plan (CAP) that will then be passed on to the Centers for Medicare and Medicaid Services (CMS) for approval.
- The plan needs to include a time study to determine the amount of time spent on MAC reimbursable activities versus unallowable activities.
- The time study will determine what percentage of administrative costs are related to covered Medicaid activities and can be claimed for reimbursement under MAC.
- Once CAP is approved by CMS, the eligible entity can submit eligible expenses on a quarterly basis for MAC reimbursement.



Requirements of MAC

- An interagency agreement with the Nevada Division of Health Care Financing and Policy
- Time studies will be completed at prescribed intervals
- Statistically valid time study results will be verified
- Cost determinations and allocations will be performed
- A quarterly Medicaid administrative claim will be prepared and submitted to DHCFP.
- Tribes may create a consortium for the Random Moment Time Study and share the burden by the State to ensure consistent application of the requirements of the time study process.
- Monitoring of administrative claiming documentation is required by DHCFP and CMS. MAC payments are from federal funds and must make MAC documentation available for periodic DHCFP and CMS audits



Administrative Claiming requirements

- Costs must be proper and efficient for the state's administration of its Medicaid state plan
- Costs related to multiple programs must be allocated in accordance with the benefits received by each participating program. This is accomplished by developing a method to assign costs based on the relative benefit to the Medicaid program and the other government or non government programs
- Costs must be supported by an allocation methodology that appears in the state's approved Public Assistance Cost Allocation Plan (42 CFR 433.34)
- Costs must not include funding for a portion of general public health initiatives that are made available to all persons, such as public health education campaigns
- Costs must not include the overhead costs of operating a provider facility
- Costs must not duplicate payment for activities that are already being offered or should be provided by other entities, or paid through other programs
- Costs may not supplant funding obligations from other federal sources
- Costs must be supported by adequate source documentation



Goals of Administrative Activities

- Facilitate outreach to potential Medicaid enrollees
- Assist children and families with accessing needed Medicaid services
- Assist and support Tribes and Tribal Organizations to prepare appropriate claims for administrative activities
- Administer and effective statewide Medicaid Administrative program



QUESTIONS??



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