The background of the slide is a complex, stylized floral pattern in various shades of blue and teal. The pattern consists of large, overlapping flower shapes with intricate petal details, some resembling peonies or hydrangeas. The overall aesthetic is modern and decorative. A dark teal rectangular box is positioned on the left side of the slide, containing the main title and subtitle in white text.

# Medi-Cal Administrative Activities (MAA) Time Survey Training

Fiscal Year 2024-2025

## Training Outline

What is MAA?

Why do MAA?

Medi-Cal Covered Services

Time Survey - Coding Your Time

The MAA Codes

# What is MAA?

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**Medi-Cal Administrative Activities (MAA)** is a federal reimbursement program. The Centers for Medicare & Medicaid Services (CMS) reimburses counties for a portion of the expense of administering the Medi-Cal program.

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The MAA reimbursement program is administered at the state level by the CA Department of Health Care Services (DHCS) on behalf of CMS.

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As a participant, the MAA work that you perform is “claimable”, which means that you generate valuable revenue for the City.

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SFDPH participants generate over \$14 million in MAA revenue annually.

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# WHY DO MAA?

- ❖ To link clients with Medi-Cal and helping them access needed healthcare services.
- ❖ To ensure Medi-Cal services are appropriate, effective, and meet client needs through policy, planning, and contracting.
- ❖ To gain approximately \$14 million per year in revenue. MAA is an important source of revenue for the City & County of San Francisco. Reimbursement helps pay for work that staff members already do, to keep our life-saving programs strong.

# What is a Medi-Cal Covered Service?

- ❖ A Medi-Cal covered service is any medical, mental health, dental or substance abuse treatment service that Medi-Cal covers, whether or not a client currently has Medi-Cal coverage.
- ❖ Making a referral to, outreaching for, contracting for, or conducting system-wide planning for any Medi-Cal covered service could count as MAA-claimable time.

# Some Medi-Cal Covered Services

Acupuncturists (*under age 21*)  
Assistive Device and Sick Room Suppliers  
Audiologist (*under age 21*)  
Blood Banks  
Child Health and Disability Prevention  
Chiropractors (*under age 21*)  
Clinical Laboratories or Laboratories  
Comprehensive Perinatal Providers  
County Mental Health Providers  
Dental School Clinics  
Dentists (*under age 21*)  
Dispensing Opticians  
Early Periodic Screening, Diagnosis and Treatment Providers  
Fabricating Optical Laboratory  
Hearing Aid Dispensers  
Home Health Agencies  
Hospices  
Hospitals and Hospital Outpatient

Departments  
Incontinence Medical Supply Dealers  
Intermediate Care Facilities  
Local Education Agency Providers (*School District*)  
Nurse Anesthetists, Nurse Midwives, Nurse Practitioners  
Nursing Facilities  
Occupational Therapists  
Ocularists  
Optometrists and Optician Services (*under age 21*)  
Orthodontists  
Organized Outpatient Clinic (*Public Health Clinics*)  
Organized Heroin Detoxification Providers  
Personal Care Service Providers  
Pharmacies/Pharmacists  
Physical Therapists

Physicians  
Physician Assistants  
Podiatrists (*under age 21*)  
Portable X-ray Services  
Prosthetists  
Providers of Medical Transportation  
Psychologists (*Non-County MH - under age 21*)  
Radiologists  
Rehabilitation Centers  
Renal Dialysis Centers  
Rural Health Clinics  
Skilled Nursing Facilities  
Speech Therapists (*under age 21*)  
Targeted Case Management  
Trained Health Care Aide Services  
X-Ray Technicians

# Medi-Cal Eligibility?

- ❖ The Primary goal of MAA is to bring individuals into Medi-Cal....
  - You are NOT responsible for knowing whether a client has Medi-Cal.
- ❖ MAA improves access and delivery of health services for ALL clients, including Medi-Cal clients.
  - Certain codes may apply to Medi-Cal only or mixed populations.

MAA in San Francisco includes the following claiming units:

- ❖ ZSFG Administration and Outpatient
  - Eligibility, Administration, Quality Management, Medical Social Services, Office of Managed Care, Kaizen
- ❖ DPH Central Administration
  - Policy and Planning, Finance, Contracts
- ❖ Community Programs
  - Business Office, Contracts, Placement, CBHS
- ❖ TB Clinic
- ❖ Newcomer's Health Program
- ❖ Maternal Child and Adolescent Health
- ❖ First 5 of San Francisco



# Time Survey

MAA reimbursement is based on a time survey that all participants should fill out daily on [TimeStudyBuddy.com](https://www.timestudybuddy.com).

# Time Survey – Coding your time

- ❖ The time survey accounts for 100% of your paid time.
- ❖ All paid time, including paid time off, must be assigned to one of the activity codes.
- ❖ For descriptions and examples of all the activity codes, please refer to the **MAA Time Survey Participant Guide** at <http://dphnet.in.sfdph.net/MAA>

# Time Survey – Coding your time

- ❖ Your total paid hours MUST MATCH PAYROLL!
- ❖ Do not simply enter the same codes for the same amounts of time every day. Code your time accurately.
- ❖ Activities must be recorded in increments of 15 minutes in decimal format.
  - ✓ 15 minutes = .25
  - ✓ 30 minutes = .50
  - ✓ 45 minutes = .75
  - ✓ 60 minutes = 1

# Reminders



RECORD ALL PAID TIME  
ON [TIMESTUDYBUDDY.COM](https://www.ontimestudybuddy.com) DAILY.



ALL SURVEYS SHOULD BE  
ELECTRONICALLY SIGNED BY THE  
LAST WORK DAY OF THE MONTH.



ONCE YOU ELECTRONICALLY SIGN IT  
AT THE END OF EACH PERIOD, YOUR  
SUPERVISOR WILL RECEIVE AN E-  
MAIL PROMPTING THEM TO REVIEW  
AND APPROVE YOUR TIME STUDY.

# The MAA Activities

- ❖ Medi-Cal Outreach
- ❖ Referral, Coordination and Monitoring of Medi-Cal Services
- ❖ Facilitating Medi-Cal Application
- ❖ Contract Administration
- ❖ Policy Development and Program Planning
- ❖ MAA/TCM Implementation Training

## The MAA Codes

- ❖ Time Study Buddy lists only those codes that apply to your job class.
- ❖ You may not use all the codes available, depending on your actual job role.

## CODE 4: MEDI-CAL OUTREACH

- ❖ Bringing potentially-eligible individuals into Medi-Cal OR referring Medi-Cal beneficiaries to covered services.
  - Medi-Cal Covered Service = Any medical, mental health, dental or substance abuse treatment service that Medi-Cal covers, whether or not the client has Medi-Cal coverage.
- ❖ Discrete campaigns or on-going activities:
  - Attending health fairs or community events to encourage individuals to access Medi-Cal services
  - Operating drop-in center for underserved populations where Medi-Cal eligibility and service information is disseminated

## Code 6: Referral, coordination and monitoring of Medi-Cal services

- This activity is generally performed by a clinician or case manager. It may include:
  - ❖ Identifying and referring individuals to Medi-Cal services – e.g., physical exam, counseling
  - ❖ Follow-up with a client to determine if services met his/her needs
  - ❖ Ongoing coordination of a client to connect them with Medi-Cal services



## Code 8: Facilitating Medi-Cal Application

- ❖ Prescreening potential applicants.
- ❖ Explaining the enrollment process.
- ❖ Providing needed forms and instructions.
- ❖ Assisting the applicant fill out forms and gather needed documents.
- ❖ Packaging the application for transmission.
- ❖ Use of One e-App or CalWIN software.
- ❖ Following up with Eligibility Office or client after application submission.

## Codes 12-13: Contract Administration

- Contracting for Medi-Cal Services for Medi-Cal only populations (Code 12) and mixed populations (Code 13)
  - ❖ RFQ/RFP activities
  - ❖ Ensuring quality of services provided by the contractor
  - ❖ Ensuring compliance with regulations
  - ❖ Auditing contractors
  - ❖ Reviewing and processing invoices

## Codes 15-18: Program Planning & Policy Development

- ❖ Developing strategies to increase system capacity and close service gaps.
- ❖ Analyzing data related to a specific program or group.
- ❖ Consulting with medical professionals regarding expansion or improvement of services.
- ❖ Interagency coordination to improve delivery of services.
- ❖ Developing resource directories.

# Program Planning and Policy Development

- There are 4 Policy and Planning codes.
- All codes have the same basic definition but are distinguished by:
  - ❖ Population Served – Medi-Cal only or Mixed
  - ❖ Provider Type – SPMP or non-SPMP  
(**SPMP = Skilled Professional Medical Personnel**)

# Are you an “SPMP”?

## Skilled Professional Medical Personnel

- You must:
  - ❖ Have a clinical/professional license
    - ❖ E.g., MFT, LCSW, Psy.D, MD, RN, LVN
  - ❖ Be in a job classification that **REQUIRES** a clinical license
    - ❖ E.g., Physician Specialist, Psychiatric Social Worker, Marriage and Family Counselor, Nurse Practitioner
  - ❖ Fill out a MAA questionnaire to document licensure.

# Program Planning and Policy Development

- Medi-Cal Services for Medi-Cal Clients:
  - Policy & Planning – Medi-Cal Only (Code 15)
  - Policy & Planning SPMP – Medi-Cal Only (Code 16)
- Medi-Cal Services for both Medi-Cal and Non-Medi-Cal Clients (Mixed Populations)
  - Policy & Planning – Mixed (Code 17)
  - Policy & Planning SPMP – Mixed (Code 18)

# Policy and Planning – Medi-Cal Only

## Examples

- ❖ A program manager (non-SPMP) analyzes a report of Medi-Cal eligibles who access the program's Medi-Cal covered services to look for utilization trends. (Code 15)
- ❖ A nurse (SPMP) conducts a needs assessment to improve Medi-Cal services for Medi-Cal eligibles. (Code 16)

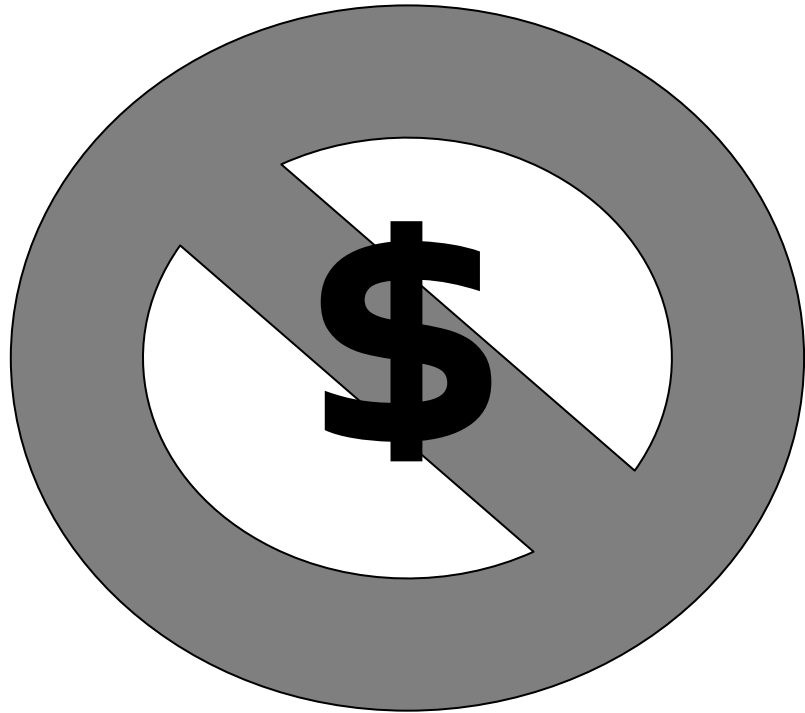
# Policy and Planning – Mixed Examples

- ❖ A Health Program Coordinator (non-SPMP) attends a meeting with countywide agencies to coordinate health service agreements for low income families. (Code 17)
- ❖ A Physician Specialist (SPMP) works on the plans for a new clinic because the clinic has specific medical requirements that only an SPMP can determine, such as infection control. (Code 18)



## “Parallel Codes”

- ❖ Parallel Codes are non-reimbursable versions of the claimable codes. They're not reimbursed because they DON'T relate to MEDI-CAL.
  - ❖ E.g., General prevention programs, wellness activities, vocational or educational services
- ❖ MAA participants must be able to distinguish between Medi-Cal versus non-Medi-Cal related activities.
- ❖ Activities that have no connection to Medi-Cal services or clients can go into a parallel code or into the “Other Programs/ Activities” code.



## Parallel Codes (non-reimbursable)

Outreach for Non-Medi-Cal Programs

Referrals to Non-Medi-Cal Services

Facilitating Non-Medi-Cal Applications

Non-Medi-Cal Contract Administration

Non-Medi-Cal Program Planning and Policy Development

# Examples of MAA Codes and Their Parallel Codes in Red

- Code 4 – Medi-Cal Outreach
- Code 3 – Outreach to Non-Medi-Cal Programs
- Code 6 – Referral, Coordination and Monitoring of Medi-Cal Services
- Code 5 – Referral, Coordination and Monitoring of Non-Medi-Cal Services
- Code 12 – Contract Administration for Medi-Cal Services for Medi-Cal Populations
- Code 11 – Contract Administration for Non-Medi-Cal Services
- Code 15 – Program Planning and Policy Development (A) (Non-Enhanced) for Medi-Cal Services for Medi-Cal Clients
- Code 14 – Program Planning and Policy for Non-Medi-Cal Services

# Universal Codes

- These codes may be used by all MAA time survey participants. They are:
  - ❖ **Code 1** (Other Programs/Activities)
  - ❖ **Code 20** (MAA/TCM Implementation Training)
  - ❖ **Code 21** (General Administration)
  - ❖ **Code 22** (Paid Time Off)

# Code 1: Other Programs/Activities

- Services that are non-medical or non-Medi-Cal related, including:
  - ❖ Non-Medi-Cal health and wellness activities
  - ❖ Social, educational, employment, or teaching
- This is a “catch-all” code for non-MAA program activities.



Attending, giving or coordinating MAA Time Survey training or refreshers (including this training).



Giving or getting help in completing the Time Survey

Code 20: MAA  
Implementation  
Training

# Code 21: General Administration

- The activities of being an employee, but not specific to a program:
  - ❖ General information emails
  - ❖ General staff and non-program meetings
  - ❖ Non-program trainings, such as Emergency Preparedness, Sexual Harassment, Compliance
  - ❖ Site and facility management
  - ❖ Personnel management, hiring, performance evaluations
  - ❖ Paid staff break time
  - ❖ Time spent filling out your time survey should be coded to 21.

## Code 22: Paid Time Off

- INCLUDES:

- Vacation
- Sick leave
- Legal and floating holidays
- Paid jury duty
- Any time **NOT** working but **receiving pay**

- DOES NOT INCLUDE:

- 15-min paid breaks (code to General Admin)
- Off payroll time (e.g. Lunch Breaks)
- Compensatory Time Off
- Unpaid leave



Have  
Questions or  
Need  
Assistance?

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Contact the  
MAA  
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Rowena Marania

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