



Bulletin

NUMBER

#14-32-16

DATE

October 10, 2014

OF INTEREST TO

County Directors

SSTS Coordinators

Social Services Supervisors
and Staff

Fiscal Supervisors

ACTION/DUE DATE

Please read information
and prepare for
implementation

EXPIRATION DATE

October 10, 2016

Social Service Time Study (SSTS) – Operations & Activity Codes

TOPIC

Social Service Time Study (SSTS) Operational Procedures, Training Material for SSTS coordinators and all staff participants. Includes activity categories, codes and definitions for the SSTS.

PURPOSE

Provide current operating instructions for county administration of the SSTS. Provide current SSTS codes and definitions.

CONTACT

Bridgit Olson, Federal Time Studies Accountant

DHS Financial Operations Division (651) 431-3800 or
Bridgit.Olson@state.mn.us or fax (651) 431-7480.

SIGNED

ALEXANDRA KOTZE
Chief Financial Officer

TERMINOLOGY NOTICE

The terminology used to describe people we serve has changed over time. The Minnesota Department of Human Services (DHS) supports the use of "People First" language.

I. BACKGROUND

The Social Service Time Study (SSTS) is the federally approved claiming mechanism for reimbursing county agencies for eligible administrative social service costs. The SSTS allocates social service costs among the various federal funding sources which support social service programs in Minnesota. Cost allocation is based on time study results from random moment sampling of social service staff each quarter.

The SSTS also provides the statistics used to set annual Targeted Case Management (TCM) rates. The TCM rates determined include child welfare (CW-TCM), children's mental health (CMH-TCM), adult mental health (AMH-TCM), vulnerable adults and developmentally disabled adults (VA/DD-TCM) for counties to use in claiming Medical Assistance reimbursement through MMIS.

Each SSTS participant is required to match his or her activity, at the time of the random moment, with the correct SSTS activity code according to the activity code definitions in the SSTS. County agencies provide cost pool data on the quarterly Social Service Fund Report (DHS-2556). The resulting percentages from the SSTS are applied to the county's social service cost pool to allocate costs and determine reimbursement from various funding sources.

Historically, the SSTS Operational Procedures Bulletin # 12-32-13 and SSTS Activity Code, Activities and Definitions Bulletin # 13-32-13 have been published separately. The SSTS materials have been merged and published together creating one centralized source document. This will enable users to reference training materials and instructions easily. As federal changes are implemented the SSTS is updated and/or expanded in accordance with the requirements.

II. LEGAL REFERENCES

[Public Law 103-432](#)

[Public Law 105-89](#)

[United States Code, Title 42, chapter 7, subchapter XIX, section 1396 et seq., as amended](#)

[Minnesota Statutes, section 256B.04](#)

[Minnesota Statutes, section 256B.0625, subdivision 43](#)

[Minnesota Statutes, section 256.01](#)

[Minnesota Statutes, section 256B.0924](#)

[Minnesota Statutes, section 256B.094](#)

[Minnesota Statutes, section 245.462](#)

[The Comprehensive Mental Health Acts, Minnesota Statutes, sections 245.461 and 245.4889](#)

[Minnesota Rules, parts 9520.0900 – 9520.0926](#)

[Minnesota Rules, parts 9530.6600 – 9530.6655](#)

[Minnesota Rules, Chapter 9550](#)

III. CHANGES

1. See BRASS code references added to activity codes 32 and 33
2. The following two DHS Bulletins were merged:
 - SSTS Operational Procedures Bulletin # 12-32-13 (November 7, 2012)
 - SSTS Activity Code, Activities and Definitions Bulletin # 13-32-13 (November 26, 2013)
3. Organization of Bulletin has been changed to a new layout for ease in training SSTS staff
4. New required ADA bulletin format used to meet accessibility standards per [Minnesota Statutes, section 16E.03, subdivision 9](#)

IV. ACTION REQUIRED

A. Review

- County Roles in the Administration of the SSTS
- Attachment A: Coordinator Instructions for SSTS Database Administration
- Attachment B: Participant Instructions for Completing SSTS Random Moments
- Attachment C: Validator Instructions for SSTS Random Moments
- Attachment D: SSTS Categories, Code Descriptions and Definitions

V. County Roles in Administration of the SSTS

A. County Directors

County directors must appoint an SSTS coordinator to carry out the administration of the Social Service Time Study for their county. When a new coordinator is appointed, email or other written notification from the director must be sent to the DHS SSTS Project Manager verifying the new appointment.

B. SSTS Coordinators

Coordinators serve as the primary SSTS administrator and local liaison for all DHS communication. They are the contact person for all county participants and SOS staff when questions arise. Attachment A provides operational instructions and directions for administering and training the SSTS. The coordinator is responsible

for reading all attachments, to be familiar with and understand the training materials for all participating in the SSTs.

C. Participants

Each participant should be given Attachment B and Attachment D

D. Validators

Each Validator should be given Attachment C and Attachment D

Americans with Disabilities Act (ADA) Advisory

This information is available in accessible formats for people with disabilities by calling (651) 431-3725 (voice) or toll free at (800) 627-3529 or by using your preferred relay service. For other information on disability rights and protections, contact the agency's ADA coordinator.

Attachment A

SSTS Coordinator Responsibilities

October 10

2014

Summarizes responsibilities of the coordinator and provides direction to administer the SSTS training to staff



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Your Role as a SSTS Coordinator

Coordinators serve as the primary SSTS administrator and liaison for all DHS communication. In addition, they are the contact person for all county participants and SOS staff when questions arise.

Each coordinator is responsible for training all time study participants, including those with the role of a validator. Training is mandated for all SSTS coordinators, participants and validators. This attachment will explain the expectation and provide instructions regarding the materials needed to train all roles in the SSTS.

Time Study Participation Overview

All program personnel who are funded by the county's Social Service Fund, are on the county's social service staff payroll and hold professional or paraprofessional positions delivering services to clients must participate in the time study. Case management aides and family service aides are examples of paraprofessionals that would be included in the SSTS. In addition, staff who are classified as supervisors but spend more than half of their time delivering services to clients should be included as participants.

Minnesota State Operated Services (SOS) staff under contract with the county to provide Rule 79 ([Minnesota Rules, parts 9520.0900-9520.0926](#)) Case Management related services as part of the adult mental health initiative should also be included as SSTS participants. These individuals will be identified as county staff for purposes of the SSTS. The state will identify the associated costs for these staff and add them to county reported costs for SSTS claiming from the DHS-2556.

Some counties have health care services staff employed as social service agency staff. These specific staff members perform health care activities that are defined by DHS as a social service fund activity; such as MA home and community based waivers, targeted case management or long term services and supports activity. These staff should also participate in the Social Service Time Study (SSTS) cost allocation project. Only health care staff that are part of the social service agency and are performing social service fund activity can be in the SSTS.

For more details on whether additional social service staff are eligible to participate in the SSTS, refer to Attachment B of the Instructions for Completing the Social Service Fund Report, Form DHS-2556, Bulletin #13-32-10 (June 24, 2013).

A. Participant Exclusions

Individuals under contract or under a purchase-of-service agreement (other than SOS staff) should be excluded from the SSTS. In addition, workers whose activity is billed 100 percent to third party sources, or financed 100 percent by a direct federal grant, should also be excluded from the time study. Staff employed in a residential facility, even if county owned and operated, should be excluded from this time study.

B. Special Requests

Other exclusions or additions to SSTS staff participants must be approved by DHS. Requests should be addressed to Bridgit Olson of the Financial Operations Division at (651) 431-3800 or Bridgit.Olson@state.mn.us

Random Moments

Participants are sent an email that contains a link to a short survey to be completed for a randomly selected point in time within the time study period. All SSTS participants will be emailed a minimum of five computer generated random moments per quarter. It is the responsibility of the participant to complete each moment by selecting the activity which best represents what they are working on at the time of observation.

Occasionally a random moment will require validation. SSTS prohibits participants from validating their own random moments. All validations are completed by an SSTS validator. When validation is requested the participant enters the validator's full name and email address in the required area and submits it to the validator for completion. SSTS web-based random moment sampling time windows are specific to each employee. A default sampling window assumes a Monday through Friday work week 6:00 a.m. to 4:30 p.m. for those who do not select a time frame, however multiple timeframes are available for selection. A seven day time limit exists for completing random moments; after seven calendar days the moment becomes invalid. The time limit includes validation if required. Non-compliance with this deadline can affect data that comprises the federal claim, and affect payments to counties—as well as the rate setting process used for all targeted case management rates.

I. Training

Participants

Participants must receive training prior to receiving their first random moment. If a participant previously participated in the SSTS in another county or SOS facility, the participant must be retrained and the training date must be verified in the SSTS application. Participant training must include reviewing the SSTS categories, code definitions and procedures required for completing random moments. Instructional material from DHS on SSTS categories and code definitions can be found in this bulletin. Two handouts are included to be given to participants; Attachment B, "SSTS Participant Instructions" and Attachment D, "SSTS Categories, Codes and Definitions." If the SSTS coordinator chooses, they may train and delegate the participant

training responsibilities to other staff. DHS will continue to provide coordinators with additional training as needed.

The Attachment B handout explains the role of the participant and an explanation of the importance of the SSTS. An example of an SSTS Random Moment and the validation process is also covered. During training sessions it is the coordinator's responsibility to inform SSTS participants of the validation process and provide them with the applicable email address for each individual assigned as a SSTS validator.

ATTENTION: To ensure delivery of the random moment to the validator for completion, it is crucial that their valid email address is entered accurately. In the event that the email address is invalid or entered incorrectly the moment will become invalid. The SSTS system does not prevent a participant from entering invalid information. Please make sure participants input the correct email address before submitting.

Time slots for receipt of the random moments can be chosen for each participant; determine together which time slot would best represent their work schedule.

Both the federal Medicaid agency and the Department of Human Services recommend annual refresher training sessions for all participants. This ongoing training has proven effective in improving both the accuracy of the time study and in maximizing reimbursement.

Validators

Federal guidelines mandate that five percent of all generated random moments are validated each quarter. Random moments to be validated are randomly selected by the SSTS system during the quarterly random moment generation.

SSTS validators can be the SSTS coordinator, a supervisor or co-worker. Validators must be knowledgeable of SSTS codes and the activities participants engage in on a daily basis. Responsibilities of the SSTS validator include validating the participant's activity at the time of the random moment, choosing to validate or not validate a random moment, submitting the completed validated random moment and responding to the random moment needing validation within the specified seven calendar days after the occurrence of the random moment.

Two attachments are to be given to the validator during their training. The Attachment C handout explains the role and duties of the validator. To help the validator understand what to expect, an example of the email that is received is also displayed. During training sessions it is the coordinator's responsibility to inform SSTS participants of the validation process and provide them with a copy of Attachment D that covers the activity codes.

Activity Categories, Codes and Definitions

The SSTS random moment screen is divided into five categories. This categorized approach directs the SSTS participant to choose a category of activity and then a code number within the category. Attachment D provides a list of the categories and code detail within each category.

The SSTS activity codes and definitions have been effective since October 1, 2013. A copy of Attachment D should be given to all SSTS participants and validators.

*****At a minimum, periodic refresher TRAINING SHOULD INCLUDE an overview of Attachment D: SSTS Activity Categories, Codes and Definitions*****

Training Verification

The coordinator must enter training dates for all participants in the SSTS database prior to participants receiving their first random moment. Training verification is also required for coordinators.

III. Communication

Since much of the administrative correspondence regarding the SSTS is done via email, SSTS coordinators must notify DHS of changes to their email as well as to their USPS address when they occur.

IV. Coordinator Changes

SSTS coordinators are unable to make changes to coordinator data in the SSTS application. Therefore, if coordinator changes occur, email or other written notification must be provided to DHS by the county social services director.

V. Adding/Changing/Deleting Participants

It is the responsibility of the county's SSTS coordinator to enter all new time study participants, participant changes and deletions in the SSTS database. These participants include both social services and SOS staff.

SSTS participants must be removed from the SSTS database when they no longer meet time study participation requirements or have terminated employment. If an SOS employee is reassigned to another county during the quarter, he or she will not be recognized as an employee of the new host county for purposes of the SSTS until the start of the next quarter and after they have been retrained.

Instructions

Each quarter DHS sends coordinators an SSTS participant database email which allows the coordinator to add, change or delete time study participants in the SSTS database. This email notification is sent to coordinators on the 20th day of the second month of each quarter. When the coordinator clicks on the link provided in the quarterly email a screen similar to the following appears:



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County:

[Add New Staff](#)

Search employee by: for:

Figure 1

- To add new staff click [“Add New Staff”](#). Enter the participant information in the boxes provided and click [“Save”](#). Training dates should be verified and entered at this time.

Add/Edit Employee info	
System:	<input type="text" value="SSTS"/>
Title:	<input type="text" value="Mr"/>
First Name	<input type="text"/>
Last Name	<input type="text"/>
Phone:	<input type="text" value="xxx-xxx-xxxx"/>
Email:	<input type="text"/>
Position Type:	<input type="text" value="Employee"/>
Work Hours:	<input type="text" value="6:00 AM - 4:30 PM, Monday - Friday"/>
Training Date:	<input type="text" value="mm/dd/yyyy"/> <input type="checkbox"/> SOS Employee?

Figure 2

- To make changes to participant records, perform a search of county participants by using the drop down box as shown in Figure 1. If the option [“All”](#) is selected, a complete staff list will appear. Locate the participant and click [“Select”](#). Enter the changes and click [“Save”](#).
- To delete participants from the SSTS database, perform a search of county participants by using the drop down box as shown in Figure 1. If the option [“All”](#) is selected, a complete staff list will appear. Locate the participant and click [“Select”](#). The effective date will be the participant’s last day of employment. Click [“Delete”](#).

If the last day of the SSTS participant’s employment is prior to the deadline for submitting quarter changes, random moments will not be generated for that SSTS participant for the next quarter. If the participant’s last day of employment occurs after the deadline for quarterly changes, random moments will be generated until the last day of employment. Any remaining random moments for the quarter after the SSTS participant’s last day of employment will remain incomplete.

Error Messages

The SSTS web based application is designed as a step by step process encompassing choices for the users such as “click on the link”, “select next”, “enter the validator’s name”, “enter the validator’s email address” and “submit”. These step by step processes are used to guide the SSTS user through each step when completing a random moment.

If the SSTS user chooses an invalid action or does not follow the step by step process, the software is unable to recognize that action and an error message will appear. Corrections should be made and saved at this time. The error message(s) will continue to appear until the error is resolved. In some cases, corrections are not possible (e.g. window of time to complete or validate a random moment has expired.)

IV. Notifications

In an effort to assist counties with managing and maintaining their Social Services Time Study, DHS provides weekly and quarterly email notifications to all coordinators regarding SSTS deadlines, changes and errors existing in the time study database. These reminders communicate important time study information and ensure delivery of random moments to time study participants within designated time periods. Reminder emails are also sent to participants if random moments are not completed within 48 hours of receipt. These reminders provide another opportunity for the SSTS participant to complete and submit their random moment.

Weekly Email Notifications:

Every Monday notification is provided to coordinators who are missing participant information. Monday’s emails are ongoing and allow certain updates to be performed during an open quarter. Included in these emails are notifications of incorrect emails or inclusion of a missing email address to ensure the delivery of random moments to the participants. It is the responsibility of the SSTS coordinator to follow up on random moments that did not reach the designated participant.

Email notifications are also sent to coordinators every Wednesday. Wednesday’s emails contain a list of random moments that have not been completed or received by DHS. These emails include random moments that have been left outstanding by the SSTS participant or the validator. Also included in Wednesday’s notifications are moments that have become invalid because the seven calendar day deadline was missed.

In circumstances when an SSTS coordinator is knowledgeable of an SSTS participant’s absence, the coordinator may complete the random moment for the participant. The random moment will open after the SSTS coordinator clicks on the reference control number provided. The SSTS coordinator then selects the activity code (Category E: Other, 69 - General Administration) which indicates that SSTS participants who are on vacation or gone for an extended period of time.

When validation for a random moment is needed for a random moment that is completed by the coordinator, the SSTS coordinator may forward the link to the validator or complete the validation if the validator is not available.

If the random moment has not been resolved within seven calendar days of receipt, the random moment becomes invalid. Invalid random moments occur when either the SSTS participant fails to complete the random moment or if the SSTS validator fails to complete the validation process. After random moments become invalid, they are not able to be changed.

Quarterly Email Notifications

Prior to each new quarter, the SSTS web based application will automatically send an email to coordinators containing a new link to the county's participant database for the upcoming quarter. This email notification is sent to coordinators on the 20th day of the second month of each quarter. SSTS coordinators use this link to maintain the participant database throughout the quarter and may forward this link to others for assistance if needed.

Maintenance should be done using the provided link throughout the quarter including updating information, additions or deletions of participants, training dates, changes and corrections to participant names and email addresses. SSTS coordinators can also enter termination dates for SSTS participants who left county employment or no longer are required to participate in the SSTS.

Deadlines

Coordinators may enter participant changes in the SSTS database throughout the quarter. In order to have the changes reflected in a new quarter's time study however, participant changes must be entered in the database by the following deadlines:

Effective Date	Deadline for SSTS Entry of Participant Changes
Quarter 1, 2015 (January 1, 2015)	December 20, 2014
Quarter 2, 2015 (April 1, 2015)	March 20, 2015
Quarter 3, 2015 (July 1, 2015)	June 20, 2015
Quarter 4, 2015 (October 1, 2015)	September 20, 2015

Additions or changes to participant records after the specified deadline will be retained and applied to the next quarter's participant database.

Attachment B

SSTS Participant Instruction

October 10

2014

SSTS Participant Instructions to complete the time study



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Social Service Time Study

The Social Service Time Study (SSTS) is the federally approved claiming mechanism for reimbursing county agencies for administrative social service costs. The SSTS uses a random moment time study to generate statistically valid samples for allocating federal funding.

Your Role as an SSTS Participant

Participants are sent an email that contains a link to a short survey to be completed for a randomly selected point in time within the time study period. It is the responsibility of the participant to complete each random moment by selecting the activity code which best represents what they are working on at the time of the random moment.

All program personnel who are funded by the county's Social Service Fund, are on the county's social service staff payroll and hold professional or paraprofessional positions delivering services to clients must participate in the time study. Case management aides and family service aides are examples of paraprofessionals that would be included in the SSTS. In addition, staff who are classified as supervisors but spend more than half of their time delivering services to clients should be included as participants.

SSTS web-based random moment sampling allows a selection specific to each employee including Monday through Friday work week and sampling time windows of 6am-4:30pm, 8am-4:30pm, and 7am-5:30pm.

Random Moments

All SSTS participants will be emailed a minimum of five computer generated random moments per quarter. It is the responsibility of the participant to complete each moment by selecting the activity which best represents what they are working on at the time of observation.

Occasionally a random moment will require validation. SSTS prohibits participants from validating their own random moments. All validations are completed by an SSTS validator. When validation is requested the participant enters the validator's full name and email address in the required area and submits it to the validator for completion. A seven day time limit exists for completing random moments; after seven calendar days the moment becomes invalid. The time limit includes validation if required. Non-compliance with this deadline can affect data that comprises the federal claim, and affect payments to counties—as well as the rate setting process used for all targeted case management rates.

Training

Activity code training is mandated for all SSTS participants. Both the federal Medicaid agency and the Department of Human Services recommends annual refresher training sessions for all participants. This ongoing availability of training will ensure that all staff is well acquainted with the SSTS activity categories, codes, definitions and procedures.

SSTS Categories, Codes and Definitions

Please refer to Attachment D to familiarize and understand all the options.

Random Moment Example

Each random moment is delivered directly from the SSTS web based application. The random moment email that participants receive appears as follows:

[Participant Name]

Click on the link below to complete your random moment for **[date time]**.

Consult the time study instructions to complete your random moment. If you have questions or need a copy of the instructions—contact your time study coordinator.

This random moment must only be completed and submitted by the time study participant.

All random moment responses are subject to federal audit. Falsification of this information diminishes the integrity of the random moment sample and compromises the federal administrative claim.

Click on this link or copy and paste this address into your web browser.

[actual link to the address of the web based application]

****This message is being sent from an unmonitored email address. Please do not reply to this email.****

When the SSTS participant clicks on the link within the random moment email, the following screen will appear providing the participant with activity code choices:

Please select a code that represents the activity performed at the time of the random moment.

Category A: Determination and Eligibility Activity

- 11 - Title IV-E Eligibility
- 12 - SSI Eligibility for Children
- 13 - MA Eligibility
- 14 - MA Service Eligibility

Category B: Assessments, Case Management and Service Coordination

- 20 - Intake for Long Term Services and Supports (LTSS)
- 21 - Other Intake and Investigation
- 22 - Rule 25 Assessments for MA Eligible Clients or when MA Eligibility Status is Undetermined/Unknown
- 23 - Health and Medical Case Management Services for MA Eligible Adults
- 24 - LTSS Assessment & Support Planning for MA Eligibles or MA Status Unknown
- 25 - LTSS Assessment & Support Planning for non-MA Eligibles or on a Health Plan Providing Payment
- 31 - Child Welfare Targeted Case Management
- 32 - Children's Mental Health Targeted Case Management
- 33 - Adult Mental Health Targeted Case Management
- 34 - Vulnerable Adult Targeted Case Management
- 35 - DD Adult Targeted Case Management

Category C: Treatment and Therapy

- 41 - Treatment or Therapy for Children and Adults

Category D: Training

- 51 - Child Welfare/Child Protection Training for County Staff
- 52 - Program Service Training for County Staff
- 53 - General Training for County Staff
- 54 - Training for Foster and Adoptive Parents or Foster Care Providers

Category E: Other

- 61 - Other Health and Medical
- 62 - Other Child Welfare/Child Protection Administration
- 68 - Other Social Services, Health Plans and Third Party Billings
- 69 - General Administration

All random moment responses are subject to federal audit. Falsification of this information diminishes the integrity of the random moment sample and compromises the federal administrative claim.

The participant chooses the code which best reflects their activity at the time of the random moment and submits their response for processing. After the "Submit" button has been pressed, the screen will let the participant know that they have successfully submitted the random moment. Participants are encouraged to double check the codes selected before completing the random moment. Corrections cannot be made to moments after they have been submitted.

Validation

If the random moment has been randomly selected for validation a message will appear at the bottom of the moment asking for a validator's name and email address to be entered below.

Please enter the validator's name and email address below.

Validator

Name:

Email Address:

All random moment responses are subject to federal audit. Falsification of this information diminishes the integrity of the random moment sample and compromises the federal administrative claim.

Submit

ATTENTION: To ensure delivery of the random moment to the validator for completion it is crucial that a valid email address is entered accurately. In the event that the email address is invalid or entered inaccurately the moment will become invalid. If you are a validator and your email address has changed be sure to update SSTS participants.

Out of Office

DHS recognizes that there may be instances when the SSTS participant is not available at the time the random moment occurs. Reminder emails are sent to participants if random moments are not completed within 48 hours of receipt. These reminders provide another opportunity for the SSTS participant to complete and submit their random moment. In instances where the participant is out of the office during the seven calendar day window of the observation, the SSTS coordinator may complete and submit the moment on the participant's behalf. If the moment is not completed correctly and validated within the seven calendar day window, the random moment becomes invalid and will no longer be available.

Questions

If a participant has questions or concerns regarding completion of a random moment the SSTS coordinator should be contacted as soon as possible.

Attachment C

SSTS Validator Information

October 10

2014

Instructions for individuals completing SSTS validation



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Your Role as an SSTS Validator

As a validator for the SSTS you have an important role in helping fulfill the federal guideline that 5% of all random moments be validated. The moments to be validated are randomly selected by the SSTS system during the quarterly random moment generation. The responsibility of the validator is to review participant's responses and to choose whether or not to validate the moment. Validators are to ensure that the activities selected are an accurate reflection of work being conducted at the time the random moment was received. All random moments must be validated within 7 calendar days from the date of the moment or they will "time-out" and be considered invalid for federal claiming purposes.

Who participates

All program personnel who are funded by the county's Social Service Fund, are on the county's social service staff payroll and hold professional or paraprofessional positions delivering services to clients must participate in the time study. Case management aides and family service aides are examples of paraprofessionals that would be included in the SSTS. In addition, staff who are classified as supervisors but spend more than half of their time delivering services to clients should be included as participants.

What you need to know

SSTS validators can be the SSTS coordinator, a supervisor or a co-worker; this position is designated at the county's discretion. Validators must be knowledgeable of SSTS codes and the activities participants engage in on a daily basis. Random moments that are not validated because the deadline was missed or because the SSTS validator selected "Can NOT validate" are considered invalid. Once a random moment is complete and submitted by the validator, no changes can be made.

To ensure delivery of the random moment to the validator for completion it is crucial that their valid email address is entered accurately. In the event that the email address is invalid or entered incorrectly the moment will not be delivered and most importantly will become invalid.

When the SSTS validator clicks on the link provided, they will be able to validate the information provided by the participant and submit the random moment. The validator will receive an email indicating that the random moment was successfully submitted.

The validation email received after a participant has submitted a selected random moment will look similar to the following:

[Validator Name]

Please click on the link below to validate the random moment for **[date time]** for **[Participant Name]**.

[Participant Name] chose the following for the random moment.

Activity Code = 11 Title IV-E Eligibility

Click on this link or copy and paste this address into your web browser.

[actual link to the address of the web based application]

****This message is being sent from an unmonitored email address. Please do not reply to this email.****

ATTENTION: To ensure delivery of the random moment to the validator for completion it is crucial that their valid email address is entered accurately. In the event that the email address is invalid or entered incorrectly the moment will become invalid. The SSTS system does not prevent participants from entering invalid information, so make sure you update SSTS participants of any changes in your email address.

Questions

If a validator has questions or concerns regarding the validation of a random moment the SSTS coordinator should be contacted as soon as possible.

Attachment D

SSTS Activity Categories, Codes and Definitions

October 10

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Handout includes SSTS Activity Categories,
Codes and Definitions



Minnesota Department of **Human Services**

SSTS Categories and Codes
October 1, 2013

Category A
Funding Eligibility Activity

DHS Code	Code Description
11	Title IV-E Eligibility
12	SSI Eligibility for Children
13	MA Eligibility
14	MA Service Eligibility

Category B
Intakes, Assessments, Case Management and Service Coordination

DHS Code	Code Description
20	Intake for Long Term Services and Supports (LTSS)
21	Other Intake and Investigation
22	Rule 25 Assessments for MA Eligible Clients or when MA Eligibility Status is Undetermined/Unknown
23	Health and Medical Case Management Services for MA Eligible Adults
24	LTSS Assessment and Support Planning for Persons who are MA Eligible or whose MA Eligibility Status is Undetermined/Unknown
25	LTSS Assessment and Support Planning for Persons Determined non-MA Eligible or on a Health Plan Providing Payment to the County
31	Child Welfare Targeted Case Management
32	Children's Mental Health Targeted Case Management
33	Adult Mental Health Targeted Case Management
34	Vulnerable Adult Targeted Case Management
35	DD Adult Targeted Case Management

SSTS Categories and Codes
October 1, 2013

Category C
Treatment and Therapy

DHS Code	Code Description
41	Treatment or Therapy for Children and Adults

Category D
Training

51	Child Welfare/Child Protection Training for County Staff
52	Program Service Training for County Staff
53	General Training for County Staff
54	Training for Foster and Adoptive Parents or Foster Care Providers

Category E
Other

DHS Code	Code Description
61	Other Health and Medical
62	Other Child Welfare/Child Protection Administration
68	Other Social Services, Health Plans and Third Party Billings
69	General Administration

Social Service Time Study Categories and Code Descriptions

Category A. Funding Eligibility Activity

Use the codes in this category when you are performing activities that contribute to or support the determination or redetermination of a client's eligibility for Title IV-E or Medical Assistance funding.

Examples of such activities include collecting and verifying information, completing and processing forms, querying systems and records, and compiling documentation to determine or maintain eligibility and continued reimbursement.

Paperwork and travel associated with the activities.

Title IV-E Eligibility – Code 11

Select this code when performing any activity that contributes to or supports the determination or redetermination of whether or not a child under age 18 is eligible for Title IV-E funding.

SSI Eligibility for Children – Code 12

Select this code when performing activities that contribute to or support the determination or redetermination of whether or not a child under age 18 is eligible for SSI.

MA Eligibility – Code 13

Select this code when performing activities to determine or re-determine whether a client is eligible for MA such as gathering or assisting in the collection of information and documents related to MA eligibility application; assisting a client in completing the MA eligibility application; reviewing income verification, social security number, citizenship, etc.

MA Service Eligibility – Code 14

Select this code when engaged in activities that contribute to or support the determination of whether a client is eligible for MA services other than long term services and supports. This includes services such as:

- Initial determination of eligibility for targeted case management except DD TCM
- Adult rehabilitative mental health services (ARMHS)
- Mental health services other than Rule 79

Category B. Intake, Assessments, Case Management and Service Coordination

Use the codes in this category when you are performing activities related to intake, assessments, reassessments, case management and service coordination. Examples of such activities include:

- ⌘ Collection of initial information and other activities to determine whether an assessment is needed and where a person should be assigned for assessment.
- ⌘ Referrals for follow up resulting from the assessment—including obtaining consent to share information, preparation of referral packet and initial contact with the professional or agency to which the referral is made.
- ⌘ Activities included in the delivery of approved state plan targeted case management services including assessment, development of a care plan, referral and related activities, and monitoring and follow-up.
- ⌘ Assessment activities such as periodic and ongoing assessments, needs identification and screenings for a client to determine the need and eligibility for specific services.
- ⌘ Developing and monitoring case plans. Evaluating services to assess the need for continued service to ensure that the client's needs are being met and to monitor the quality and effectiveness of services identified in the service plan.
- ⌘ Service coordination activities that coordinate and link social and other services designed to help persons gain access to needed protective services, social, health care, mental health, habilitative, educational, vocational, and legal or other related services. Some examples of these types of service activities include:
 - Activities necessary to maintain contact with client, family, substitute care providers, social service contacts or other relevant persons regarding the status of the client.
 - Arranging access to necessary services and supports identified in the service plan.
 - Participating in referral and coordination activities such as client specific case meetings, administrative reviews, information conferences and other meetings with professionals, family members or relevant others. Coordinating with other entities such as care facilities, institutions, organizations and agencies to obtain needed services for clients and families as specified in the case plan.
 - Client specific planning, record keeping and documentation that contribute to the above activities and travel associated with the activities.

Intake for Long Term Services and Supports (LTSS) – Code 20

Select this code when collecting information and other activities necessary to determine if an assessment for LTSS eligibility is warranted. Examples of such activity are as follows.

Information gathering to identify:

If a person should be referred for an assessment for long term services and supports including HCBS waivers, Alternative Care, Nursing Facility, Personal Care Assistance, ICF/DD, Consumer Support Grant, Semi-Independent Living Services, Family Support Grant, VA/DD Targeted Case Management or Relocation Service Coordination.

Collection of information to determine whether an LTSS assessment is needed such as:

- ⌘ Caller or individual's contact and general information
- ⌘ Referral source information
- ⌘ Statement of reason for calling
- ⌘ Diagnostic information (medical or psychological)
- ⌘ Disability certification information
- ⌘ Health insurance information
- ⌘ Providing information about medical assistance eligibility
- ⌘ Determining whether there is a substitute decision maker or other authorized representative
- ⌘ Contact and demographic information
- ⌘ Special accommodations needed
- ⌘ Scheduling appointment, including time, location, persons necessary to be present

Other Intake and Investigation – Code 21

Select this code when collecting information and other activities related to:

- ⌘ Initial intake and investigation of reports of child abuse and/or neglect
- ⌘ Intake, screening and investigation activity not addressed in any other code

Rule 25 Assessments for MA Eligible Clients or when MA Eligibility Status is Undetermined/Unknown – Code 22

Select this code for an MA eligible child or adult when determining the need for chemical abuse/dependency treatment, in accordance with Rule 25 (Minnesota Rule, parts 9530.6600-9530.6655). Also select this code when the child or adult's MA eligibility status is either undetermined or unknown.

Health and Medical Case Management Services for MA Eligible Adults – Code 23

Select this code when engaged in coordination activities in category B for **MA eligible** adults 18 and over *who are not eligible or not yet eligible for Mental Health TCM, VA/DD TCM or MA Waiver Services*, and when the activities are those designed to help clients attain and maintain a favorable condition of health (mental or physical) by assisting them in identifying and understanding their health needs and securing and monitoring necessary treatment and services, **that are MA reimbursable**.

LTSS Assessment and Support Planning for Persons who are MA Eligible or whose MA Eligibility Status is Undetermined/Unknown – Code 24

Select this code when engaged in activities related to conducting an assessment or reassessment of eligibility for long term services and supports (LTSS).

These services and supports include:

- Home and Community Based Services (HCBS) Waiver;
- Personal Care Assistance (PCA);
- Vulnerable Adult/Developmental Disabilities Adult Targeted Case Management (TCM)—*this does not include the actual provision of TCM services*;
- Alternative Care (AC); Consumer Support Grant (CSG);
- Family Support Grant (FSG);
- Semi-Independent Living Services (SILS);
- Relocation Service Coordination (RSC);
- Nursing Facility (NF) or Intermediate Care Facility for persons with Developmental Disabilities (ICF-DD);

- Long term services and supports that are funded by other payment sources, are informal and/or paid privately.

Additional examples of such activities include:

- ⌘ Conducting a DD screening
- ⌘ Developing a community support plan for individuals who need long term services and supports or have chronic care needs.
- ⌘ All preparation and follow-up activities related to the assessment and support planning process including:
 - Gathering or reviewing information
 - Scheduling an appointment—including time, location, persons necessary to be present
 - Arranging special accommodations when needed
 - Communicating with the person or their representative (e.g. face-to-face, by phone, in writing or by other personal or electronic methods)
 - Conducting the assessment interview
 - Consulting regarding assessment and support planning for specific individuals
 - Developing the community support plan
 - Making referrals
 - Completing documentation
 - Communicating with case manager
 - Preparing for and participating in appeals related to assessments for long term services and supports
 - Supporting an assessor by assisting with activities such as
 - Preparing packets
 - Entering screening documents and other forms
 - Editing or updating person specific demographic information
 - Transferring documents
- ⌘ Travel and paperwork associated with these activities

This code is used any time assessment or support planning is conducted— regardless of whether the person is determined eligible for long term services and supports.

Use this code for assessment and support planning activities when working with persons who are MA eligible or whose MA eligibility status is undetermined or unknown.

LTSS Assessment and Support Planning for Persons Determined non-MA Eligible or on a Health Plan Providing Payment to the County – Code 25

Select this code when engaged in activities related to conducting an assessment or reassessment of eligibility for long term services and supports, and developing a community support plan for individuals who have been determined not to be eligible for MA or those on a health plan under contract with the county.

Child Welfare Targeted Case Management – Code 31

Select this code when performing activities related to the delivery of targeted case management services for children such as assessments, case planning, service coordination and monitoring. This code should be selected regardless of the individual's eligibility for MA, and regardless of whether the county is receiving payment from a health plan.

Do not choose this code for children receiving DD case management under Rule 185 unless they meet one of the three statutory CW-TCM eligibility criteria. Otherwise, see code 68.

Children's Mental Health Targeted Case Management - Code 32

Note – in order for SSTS activity and TCM CSR client counts to line up correctly, you must be using BRASS code 490x – Child Rule 79 Case Management when you select this code.

Select this code when performing activities such as assessments, case planning, service coordination and monitoring related to the delivery of targeted case management services for SED. This code should be selected regardless of the individual's eligibility for MA, and regardless of whether the county is receiving payment from a health plan.

Adult Mental Health Targeted Case Management - Code 33

Note – in order for SSTS activity and TCM CSR client counts to line up correctly, you must be using BRASS code 491x – Adult Rule 79 Case Management when you select this code.

Select this code when performing activities related to the delivery of targeted case management services for SPMI clients 18 and over such as assessments, case planning, service coordination and monitoring. This code should be selected regardless of the individual's eligibility for MA, and regardless of whether the county is receiving payment from a health plan.

Vulnerable Adult Targeted Case Management – Code 34

Select this code when performing activities related to the delivery of targeted case management services for vulnerable adults such as assessments, case planning, service coordination and monitoring. This code should be selected regardless of the individual's eligibility for MA, and regardless of whether the county is receiving payment from a health plan.

DD Adult Targeted Case Management – Code 35

Select this code when performing ongoing case management and service coordination activities related to the delivery of targeted case management services for adults with DD. This code should be selected regardless of the individual's eligibility for MA, and regardless of whether the county is receiving payment from a health plan.

Do not choose this code for assessment and case planning activity. Instead, see code 24.

Note: If you cannot find the type of activity you are performing in Category B, please refer to Code 62 – Other Child Welfare/Child Protection Administration and Code 68 – Other Social Services and Third Party Billings.

Category C. Treatment and Therapy

Treatment or Therapy for Children and Adults – Code 41

Select this code when providing face to face treatment or therapy services to a client, the client's family or the client's substitute care provider in order to ameliorate or remedy personal problems, behaviors or home conditions specifically identified in the case plan. Examples would include providing services such as rehabilitative mental health services, chemical dependency outpatient services and in-home therapy.

Include client specific paperwork and travel associated with the above activities.

Category D. Training

Child Welfare/Child Protection Training for County Staff – Code 51

Select this code when you are being trained on issues that fall within the general definition of child welfare. This would generally include training that concerns the capacity to provide services or provide access to services needed to meet the physical, mental and education needs of children **under age 18**. This would include children's mental health but exclude training on child protection investigations.

You should also select this code if you are engaged in activities to prepare for and provide child welfare training to other volunteers or individuals preparing for employment with the county.

Travel and paperwork associated with the above activities should also be included in this code.

Program Service Training for County Staff – Code 52

Select this code when you are being trained or are preparing for, or providing training on, issues related to the delivery of services to clients outside the general definition of child welfare as defined in Code 51.

Travel and paperwork associated with the above activities.

General Training for County Staff – Code 53

Select this code for any other training attended or provided by you. Examples include computer software training, diversity training or any other non-program related training.

Travel and paperwork associated with these activities.

Training for Foster and Adoptive Parents or Foster Care Providers – Code 54

Activities by staff to prepare for and provide training for: current or prospective foster or adoptive parents (including relatives); staff of residential facilities when that facility is providing care to adoptive children or children in substitute care; and staff of group homes or shelters which are licensed as Title IV-E eligible by the state or approved by a tribal government.

Travel and paperwork associated with these activities.

Category E. Other

Other Health and Medical – Code 61

Select this code when engaged in MA outreach activities. Outreach activities are those efforts directed at seeking out persons or groups who may be eligible for MA, encouraging them to apply for MA, providing them the materials or information on how to apply and informing them of the MA services that may be available to them. It also includes efforts to inform current MA eligible persons of other MA services available to them and to persuade current recipients to access other MA services. This includes individual and group activities as well as the preparation and distribution of brochures or other promotional material.

Also select this code when you are assisting in determining the capacity of an organization to be a certified provider of MA rehabilitative option services.

Travel and paperwork associated with these activities.

Other Child Welfare/Child Protection Administration – Code 62

Select this code when you are performing administrative activities related to the placement of children into foster care. This includes making placement arrangements for children under age 18 entering substitute care and Title IV-D child support enforcement activities for a child under age 18 in substitute care.

It also includes research gathering and completion of documentation required by the foster care program; performing activities necessary for recruitment, study and approval of individuals as foster care providers or adoptive parents; and licensing of foster care homes and other substitute care facilities.

Also select this code when you are involved in preparing for, or participating in any court related activities on behalf of a child under age 18 receiving child protection services. This includes custody and home studies, activities necessary to prepare a petition or support a petition to seek custody of a child, serving legal papers, seeking court approval for voluntary placement and preparing for, or participating in, any judicial determination or reviews.

Travel and paperwork associated with these activities.

Other Social Services, Health Plans and Third Party Billings – Code 68

Note- See code 21 for activities related to initial intake and investigation of reports of child abuse and/or neglect

Select this code when you are delivering services to clients and your activity does not fit into any other category code. Examples include:

⌘ General information and referral

⌘ Child Care

This includes assessments, case management and service coordination activities that do not fit into any of the codes listed for Category B. Some examples of these types of activities include:

- ⌘ Mental health case management activities for clients who are not SED, SPMI or MA eligible
- ⌘ Ongoing HCBS Waiver Case Management (Developmental Disabilities, EW, CADI, CAC, BI)
- ⌘ Chemical Dependency Case Management
- ⌘ Alternative Care Case Management
- ⌘ Relocation Service Coordination
- ⌘ General case management

Also select this code when you are engaged in activities, other than LTSS assessment and support planning, which will be billed to a third party such as insurance companies, the Medicare Program, other state or county programs, a health plan under contract with the county, or for activity financed by a direct federal grant such as a research and development grant.

Include travel and paperwork associated with the above activities.

General Administration – Code 69

Select this code if you are on break, at lunch or not at work. This includes vacation, illness, holiday, snow day or any other type of leave.

Select this code when engaged in service delivery activities unrelated to a specific CASE or CLIENT. Some examples are unit or division program planning and coordination efforts with other county divisions, state offices and agencies.

Also select this code when performing activities necessary to fulfill job responsibilities outside delivery of services to clients. Some examples would be time reporting, reading email, listening to voice mail messages, organizing your tasks and attending non-client related staff gatherings such as birthday and retirement parties.