





Overview

- This presentation demonstrates at a high level the software and processes that will be used to record and submit Medicaid School Based Services cost report information.
- Please note that the screens are not yet in their final state. There may be minor variances in the final implementation.



LEA MAER Process

LEA MAER Process – Web Download Site

MDCH - Department of Community Health - School-Based Services - Microsoft Internet Explorer provided by EDS COE

File Edit View Favorites Tools Help

Address http://michigan.gov/mdch/0,1607,7-132-2945_42542_42543_42546_42551-151025--,00.html



School Based Services

Providers

- Tunuera
- > HIPAA > Health Professional
- Shortage Area > Institutional Review Board



- > Lab Services
- Public Health Preparedness
 Communicable & Chronic Diseases
- > Departmenta Forms
- ≻ Community Mental Health Services
- > Certificate of Need
- > Toxic Substances
- > Substance Abuse Provider:
- Birth, Death, Marriage and Divorce Records
- Physical Health &
- Prevention
- Pregnant Women, Children & Families
- Mental Health &
- Substance Abuse
- Health Care Coverage Statistics and Reports
- Inside Community Health
- Health Systems & Health Profession Licensing
- Databases
 July 2008
 Data]
 Oct 2007
 Data]
 Oct 2006
 Data]

 Jan 2006
 Data]
 Jan 2005
 Fee]
 Data]
 2004
 April)
 Data]
 2003
 Oct 1

 Data]
 2008
 Instructions
 FAO-Fee-For-Service School Based Services
 Fee for Service Rate Methodology Work Group

 The purpose of this webpage is to provide information and a venue for comment to all interested parties.
 Fee for Service Cost Reporting Documents

 Medicaid Expenditure Reporting Overview
 FFS Cost Reporting Training Presentation
 Direct Medicaid Allowable Expenditure Reporting Detailed Instructions

 Transportation Medicaid Allowable Expenditure Reporting Detailed Instructions
 MAER Report FYE 06/30/2009

 MAER Report FYE 06/30/2010
 MAER Report FYE 06/30/2010
 - ISD MAER Summary Software

Michigan.gov.Home | MD.CH.Home | Contact.MD.CH | State Web Sites Privacy Policy | Link Policy | Accessibility Policy | Security Policy | Michigan.News | Michigan.gov.Survey

Copyright © 2001-2008 State of Michigan

NOTE: "MAER" is an acronym for "Medicaid Allowable Expenditure Report"



LEA MAER Process – Select File for Download

MDCH - Department of Community Health - School-Based Services - Microsoft Internet Explorer provided by EDS COE File Edit View Favorites Tools Help Address http://michigan.gov/mdch/0.1607.7-132-2945 42542 42543 42546 42551-151025--.00.html Michigan.gov The Official State of Michigan Website **Department of Community Health** MDCH Home Online Services Sitemap Contact MDCH Michigan.gov Home Search Providers HPAA **School Based Services** Health Professional Shortage Area Institutional Review Board Databases July 2008] Data] Oct 2007] Data] Oct 2006] Data] State Loan Repayment Jan 2006] Data] Jan 2005 Fee] Data] 2004 April] Data] 2003 Oct] Program Data] 2008 Instructions Lab Services File Download FAQ-F Public Health Preparedness Communicable & Chronic Do you want to open or save this file? Fee fo Diseases Departmenta Forms Name: MAER.xls The purpose of this webpage is X Community Vental Health Type: Microsoft Excel Worksheet, 1,42 MB comment to all interested parti Services From: localhost Certificate of Need Fee-for-Service Cost Reporti Texic Substances Open Save Cancel Substance Abuse Providers Medicaid Expenditure R FFS Cost Reporting Tra Always ask before opening this type of file Birth, Death, Marriage and Divorce Records Direct Medical Medicaid Physical Health & Transportation Medicaid While files from the Internet can be useful, some files can potentially Prevention ? harm your computer. If you do not trust the source, do not open or save this file. What's the risk? Pregnant Women. **Children & Families** MAER Report - FYE 06 Mental liealth & MAER Report - FYE 06/30/2010 Substance Abuse Health Care Coverage ISD - MAER Summary Software Statistics and Reports Inside Community Health **Health Systems & Health** Profession Licensing Michigan.gov Home | MDCH Home | Contact MDCH | State Web Sites Privacy Policy | Link Policy | Accessibility Policy | Security Policy | Michigan News | Michigan.gov Survey Copyright @ 2001-2008 State of Michigan



LEA MAER Process – Save File Locally





LEA MAER Process – Initial Screen



NOTE: If the LEA computer is unable to run Microsoft Excel files, blank forms will be available on the web site to print, complete manually, and submit to the ISD.



LEA MAER Process – Initial Screen – Macros Disabled



NOTE: Office 2007 (shown on left) or other Office systems may open the MAER with macros disabled. For Office 2007, click on the Options tab and follow the prompts to enable macros. Your IT department should be able to help you enable macros.



LEA MAER Process – Initial Screen – Macros Enabled



NOTE: Once macros are enabled, some versions of Office may display the MAER menu in a different location within Excel as shown in Office 2007 to the left. In this display you can see that Office 2007 adds the MAFR menu as a sub-menu within the Add-Ins menu.



LEA MAER Process – Create New File





LEA MAER Process – Medical Staff Costs

21	🛚 Microsoft Excel - MAER.xls								
2	🖗 File Edit View Insert Format Tools Data MAER Window Type a question for help 🗸 🗗 🗙								
	□ 🗁 🖬 🗃 🖏 🖨 🖸 🏹 λ 🛍 🛍 • 💯 Μ + ΟΙ + 🖏 Σ + 2↓ Δ↓ 🛄 极 100% - Σ 🖓 ↓								
	Medicaid Allowable Expenditure Report Drawing								
	Medical Staff Costs								
	July 1, 2008 through June 30, 2009								
		District ISD Name:							
		District Code / LEA Code:	1						
				i i					
						Purchased			
					Benefits	Services			
Sur	n of Secti	on 52 and 53a Costs from the	Staff		2100, 2800 &	3130, 3190,	Other		
S	E-4096, pa	ge 3, columns 3, 4, 5 and 8	FTE Count	Salaries	2920	4120 & 4220	Expend. 7410	Total	
	Function			(3)	(4)	(5)	(8)	(9)	
-	Code	TITLE AND OBJECT CODE		(-)	(-7	(-7	(-7	<u>،</u> -,	
	213	Physician (1410)							
4	213					•			
	213			•				ູ_ ຍຸດ	
4 5	213	Peychologist/Peych (1430)						φυ ፍበ	
a	214	Sneech Theranist (1280)				•		\$0 \$0	
7	215	Audiologist (1490)						\$0 \$0	
8	215	Supervised TSLI's (1240)						\$0	
9	216	Social Worker (1440)						\$0	
10	217	O&M Specialist (1290)						\$0	
11		Total	0.00	\$0	\$0	\$0	\$0	\$0	
		If there are revised expenditures	s that affect t	he above lines,	check the box t	to the left and c	ontact MDCH H	ospital and	
		Health Plan Reimbursement Di	vision, Speci	al Program Sec	tion, at (517) 33	35-5330 with the	e details.		
		edical Staff Costs / Transport	ation Costs 7	,	•				
Read	dy							NUM	/

NOTE: Preparer completes "yellow" cells. Other cells are prefilled or calculated.



LEA MAER Process – Enter LEA Code

N	🛚 Microsoft Excel - MAER.xls											
8	File Edi	t View Insert	Format	Tools	Data	MAER	Window			Type a questio	n for help 🛛 👻 🔒	. 8 ×
	□ 🞬 🚽 🔄 🗟 🗇 [Δ, ♡ ၨλ 🗎 🛍 × ≫ ∽ ▾ ∩ ▾ 🖏 Σ ヾ 2↓ Δ↓ 🛄 🖑 [100% - ▼ 🗳 Ψ											
	Medicaid Allowable Expenditure Report											
	Medical Staff Costs											
					Ju	iy 1, 20	08 through Ju	ine 30, 2009				
		Di	strict ISE) Name:								
		District C	ode / LEz	/ Name: A Code:	03060)						
		Diotiliot o	000.22	10000.	00000		i					
									Purchased			7
								Benefits	Services			
Sur	n of Sect	ion 52 and 53a	Costs fr	om the	St	aff		2100, 2800 &	3130, 3190,	Other		
S	E-4096, p	age 3, column	s 3, 4, 5	and 8	FTE (Count	Salaries	2920	4120 & 4220	Expend. 7410	Total	
	Function		в је ст с	ODE			(3)	(4)	(5)	(8)	(9)	
1	213	Dhysisian (14)		JUDE							<u>در</u>	1
2	213	RN/LPN (1450	no) N			•	•					
3	213	PT/PTA (1470	<u>)</u>								\$C \$C	1
4	213	OT/COTA (148	/ 30)								\$0	5
5	214	Psychologist/	⊃sych (1-	430)							\$0	ז
6	215	Speech Thera	pist (1280	J)							\$0	ז
7	215	Audiologist (14	490)								\$0	ו
8	215	Supervised TS	El's (1246	D)							\$0	<u>ן</u>
9	216	Social Worker	(1440)								\$0	<u>기</u>
10	217	O&M Speciali	st (1290)								\$0	길
11		Total				0.00	\$0	\$0	\$0	\$0	\$0)
	_				- 41 4	- a i ·	ha abava Bra-					
		Hoolth Dian D	isea expi oimburoo	enaiture mont Di	s that : Wielen	Spoci.	ne above lines, ol Drogrom Soc	tion of (517) 23	to the leπ and d 25 5220 with th	ontact MDCH H	iospitai and	
	Health Plan Reimbursement Division, Special Program Section, at (517) 335-5330 with the details.											
14 4	с в нАт	1 edical Staff Cr	osts 🖉 T	ransport	ation C	osts 📝	/					
Ente	er										NUM	



LEA MAER Process – LEA/ISD Names Displayed

	Microsoft	Excel - MAER.xls							
8	<u>File E</u> dit	<u>V</u> iew <u>I</u> nsert F <u>o</u> rmat <u>T</u> ools	Data MAER	Window			Type a questio	n for help 🛛 🚽 🗕	đΧ
		∃™Q ⊜*LQ.√ & ≒≞∎≣	n - ≫ • / •		* Z+ A+ 🛄	₩ 100% ▼ (4 .		
	Medicaid Allowable Expenditure Report								
	Medical Staff Costs								
			July 1, 20	Juo through Ju	ine 30, 2009				
		District ISD Name:	Allegan Are:	e Educational S	Service Agency				
		District Code / LEA Code:	3060	Martin Public S	Schools				
						Purchased]
					Benefits	Services			
Su	n of Secti	ion 52 and 53a Costs from the	Staff		2100, 2800 &	3130, 3190,	Other		
S	E-4096, pa	age 3, columns 3, 4, 5 and 8	FTE Count	Salaries	2920	4120 & 4220	Expend. 7410	Total	
	Function			(3)	(4)	(5)	(8)	(9)	
1	213	Physician (1410)	i					\$0	
2	213	RN/LPN (1450)				•			
3	213	PT/PTA (1470)				•		\$0	
4	213	OT/COTA (1480)						\$0	1
5	214	Psychologist/Psych (1430)						\$0	1
6	215	Speech Therapist (1280)						\$0	
7	215	Audiologist (1490)						\$0	
8	215	Supervised TSLI's (1240)						\$0	
9	216	Social Worker (1440)						\$0	
10	217	U&M Specialist (1290)	0.00	**	40	**		\$0	
11		lotal	0.00	\$0	\$0	\$0	\$0	\$0	J
		If there are revieed expenditure	e that affact t	ha ahava lince	check the hext	to the left and a	optact MDCH H	locnital and	
		Health Plan Reimhursement Di	s mai aneci i Vision Sneci	al Program Sec	tion at (517) 33	35-5330 with the	ontact widen n a details	iospitai aliu	
	Health Plan Reimbursement Division, Special Program Section, at (517) 335-5350 with the details.								
I •	• • • • \ •	ledical Staff Costs / Transport	ation Costs 🕠	/	•				
Rea	dy	, · ·	,					NUM	



LEA MAER Process – Transportation Costs

💌 Mic	rosoft Ex	cel - MAER.xls						
B) EI	e <u>E</u> dit	<u>Vi</u> ew <u>I</u> nsert F <u>o</u> rmat <u>T</u> ools <u>D</u> ata	MAER	<u>W</u> indow	Type a qu	estion for help 🛛 🗸	_ 8 ×	
	- >		- !		40 a 100%	D		
				* * 🖏 - 4 * 2 + A	🕴 🛄 🎻 100% 🔻	ų.		
	Medicaid Allowable Expenditure Report							
	Transportation Costs							
		July 1, 2	000 11101	gn June 30, 2009				
		District ISD Name:	Allegan A	vea Educational Servi	ce Agency			
		District Code / LEA Code:	3060	Martin Public Schoo	ols			
		Total number of One Way Trips						
				Ĭ				
Sum o	f Section	1 52 and 53a Costs from the SE-	FTE					
4094, p	page 2, c	olumns 4 & 6	(1)	Expenditure	Expenditure	Total	_	
	Object							
Line	Code	Title		(4)	(6)	(9)	_	
1	1610	Bus Driver						
<u></u>	1630	Aldes						
3	2000	Employee Benefits		-				
4 5	2220	Pupil Trans Common Camer					<u>10</u>	
- C - A	2210	Fomily Vehicle Centrest Cote					<u>,U</u>	
7	3030	Punil Tranen, Fleet Incurance				4	,0 (n	
8	4230	Contracted/Leased Buses				9	<u>6</u>	
- q	4230	Other Vehicle Related Costs		•			<u>6</u>	
10	5710	Gasoline				9	ñ	
11	5710	Oil/Grease				g		
12	5720	Tires/Batteries				9	ឆ	
		Other Expenses/Adjustment						
		(related to object codes listed						
13	7000	above)				9	60	
14		Bus Amortization				9	<i>i</i> 0	
15	TOTAL	EXPENDITURES		\$0	\$0	9	io 🔜	
							-	
4	🛛 🕨 🔪 – Me	edical Staff Costs λ Transportation	Costs /	•				
Ready						NUM		

NOTE: The LEA/ISD name displays carry over from the Medical Staff Costs.



LEA MAER Process – Save ISD Submission File

	<i>licrosoft</i>	Excel - MAER.x	ds									
8	<u>F</u> ile <u>E</u> di	: <u>V</u> iew <u>I</u> nsert	F <u>o</u> rmat	<u>T</u> ools	Data M	1AER	Window			Type a questic	n for help 🛛 👻 💶	đΧ
	🚔 🔲 .		ABC X	Ba 🙉	- 🛷 🛛		New Cost Report	ZI M	🚜 100% 👻	?		
			· · · · · ·		Modic й	3	Open Cost Report		· · · · · · · · · · · · · · · · · · ·			
					Meurc		Save Cost Report	ne Kepon	L			-
	Jul 5.8.1150 0, 2009											
						-		_				
		Dietviet C	istrict ISD	Name:	Allega	<u> </u>	<u>H</u> elp	▶ e Agency				
		District C	ode / LEA	A Code:	3	060	Martin Public S	schools				
									Purchased			
								Benefits	Services			
Sur	n of Sect	ion 52 and 53a	a Costs fr	om the	Staf	f		2100, 2800 &	3130, 3190,	Other		
S	E-4096, p	age 3, column	s3,4,5 a	and 8	FTE Co	unt	Salaries	2920	4120 & 4220	Expend. 7410	Total	
	Code	TITLE AND O	BJECT C	ODE			(3)	(4)	(5)	(8)	(9)	
1	213	Phγsician (14	10)		123	3.00	\$456	\$789	\$12	\$324	\$1,581	
2	213	RN/LPN (1450)								\$0	
3	213	PT/PTA (1470)								\$0	
4	213	OT/COTA (148	80)								\$0	
5	214	Psychologist/	Psych (14	430)		_					\$0	
6	215	Speech Thera	pist (1280) <u> </u>							\$0	1
7	215	Audiologist (1-	490)								\$0	1
8	215	Supervised TS	<u>SLI's (1240</u>	J)		_					\$0	
9	216	Social Worker	r (1440)								\$0	
10	217	O&M Speciali	ist (1290)								\$0	
11		Total			123	3.00	\$456	\$789	\$12	\$324	\$1,581	1
	If there are revised expenditures that affect the above lines, check the box to the left and contact MDCH Hospital and Health Plan Reimbursement Division, Special Program Section, at (517) 335-5330 with the details.											
lia a	- • • • • • • • •	iedical Staff Co	osts / Tr	ansporta	ation Cost	ts,	/	•				
Read	dy										NUM	



LEA MAER Process – ISD Submission File Created



NOTE: Each LEA submits this file to the ISD.

Do not rename this file! The ISD MMF Summary software expects files named in this specific format. If the file is not named properly, it will not be recognized by the summary application.



ISD Summary Process

State of Michigan Single Sign On	
User ID Password Login	
* If you do not have a User ID, please click Register	

NOTE: The "ISD -MAER Summary Software" is called "Michigan Medicaid Forms" or "MMF" and is available via the DCH File Transfer application within Single Sign On (SSO)



🕙 MDCH-BPCT - Micro	osoft Internet Explorer prov	ided by EDS COE	
N DCH	File Tra	nsiər	A Michigan sor
File	Share File	Browse	General
Upload File	Share File	Upload Log	Request Additional Area Access
Download File	Delete Shared File	Download Log	Exit Application
	Shared File Log		
<			
é			🔒 🧐 Local intranet 🛒

NOTE: Once Signed into the MDCH File Transfer web site, click the "Download File" link on the upper left side of the page.



🚰 File Download - Microsoft	Internet Explorer provided by EDS COE	
	File Download	
All fields marked with ' * ' are	mandatory	
Area *	HHPRD-ISD 🚽 (select from list if having multiple area access)	
Select file to download	MMF.msi	
	Download Cancel	
<		× >
🙆 Done	🔒 🧐 Local intran	et 📑

NOTE: From the File Download page, select HHPRD-ISD as the Area, and select the MMF.msi file from the Select file to download drop list and click the Download button.

Once downloaded, double click the MMF.msi file to install MMF.



ISD Summary Process – Initial Screen

MMF		
<u>File V</u> iew <u>T</u> ools <u>H</u> elp		
	Provider Mode	04/28/2009



ISD Summary Process – Create New File

🛱 MMF		
<u>File Vi</u> ew <u>T</u> ools <u>H</u> elp		
New Ctrl+N		
Save <u>A</u> s		
Print Ctrl+P		
⊆lose		
E <u>x</u> it		
	Provider Mode	



ISD Summary Process – Enter ISD Code/Year

MMF		
File View Tools Help		
New - Medicaid Allowable	Expenditure Summary Report	
Enter Information For Med	icaid Allowable Expenditure Summary Report:	
Name: A	Allegan Area Educational Service Agency	
School Code or NPI:	03000	
Fiscal Year End:	06/30/2009	
Amend Level:	0	
	Ok Cano	el
	Provider Mode	04/28/2009



ISD Summary Process – Load LEA MAER Files

22 MMF	
Browse For Folder	? 🗙
Select folder containing LEA CSV files:	
 Desktop My Documents My Computer My Network Places DTS packages encryption stuff filling Ga upload tables flexible MMF tree html examples mmf data test mmf to fix server consolidation W2K1 to W2K2 server consolidation W2K3 to W2K4 tdbg6 temp totaler verify GAs views to re-run after hosp db refresh 	
Make New Folder OK	Cancel
Provider Mode 04/24	8/2009

The screen at the right will "pop up" automatically when creating a new file. Subsequently, this function can be selected from the Tools menu.

NOTE: You need to have placed all of your LEAs CSV files into a single folder location. At the time of creating your cost report data file, you will need to select the folder that contains all of the LEA CSV files.



ISD Summary Process – General Information Worksheet

🖀 ммғ				
<u>File V</u> iew <u>T</u> ools <u>H</u> elp				
Di 🖬 🎒 🙎				
Allega	n Area Edu	acational Service	Agency	
03000, 1144265620	FYE	: 06/30/2009		Amend Level: 0
Medicaid Allowable Expenditure Summ			General Informatio	n
General Information	1	ISD Code	03000	
Local Education Agencies	2	ISD Name	Allegar	Area Educational Servic
😟 🕀 🛄 Medical Staff Costs	3	NPI	114426	65620
🗄 💼 🛄 Transportation Costs	4	Prepared By		
Medical Staff Costs Summary	5	Phone Numbe	er	
Transportation Costs Summary	6	FAX Number		
Reconciliation & Settlement	7	Email Addres:	S	
Payment Details	8	Fiscal Year B	legin 07/01/	2008
	9	Fiscal Year E	nd 06/30//	2009
	10	Operating Sys	stem (Window	ws XP Build 2600 Service
	11	Internet Explo	rer version 6.0.290	00.5512
	12	MDAC version	n 2.81.11	32.0
The name of the person responsible for	r preparing	this cost report		
				×
	Provid	der Mode		04/28/2009

NOTE: Preparer completes "white" cells. Other cells are prefilled or calculated.

"Tool Tips" at bottom of screen (in yellow) show information related to highlighted cell.



ISD Summary Process – Local Education Agencies Worksheet (Lists LEAs assigned to ISD)

🛱 MMF				
<u>File View T</u> ools <u>H</u> elp				
0 🖬 🖶 🎒 ?				
Allega	n Area Educ	ational Servic	e Agency	
03000, 1144265620	FYE:	06/30/2009		Amend Level: 0
				-1
	Line	LEA Mumber	Local Education Agen	icles
		03030	Allegan Public Scho	ols
	2	03050	Fennville Public Sch	ools
	3	03070	Hopkins Public Scho	ools
Medical Staff Costs Summary	4	03060	Martin Public Schoo	ls
	5	03020	Otsego Public Scho	ols
Reconciliation & Settlement	6	03010	Plainwell Community	/ Schools
Payment Details	7	03040	Wayland Union Sch	ools
Questions and/or issues regarding School C	odes can b	e-mailed to: r	atesetting@michigan.	gov or call: (517) 335
-5330.				
	Provid	er Mode		04/28/2009

NOTE: Contact MDCH if the LEA list is inaccurate.



ISD Summary Process – Medical Staff Costs Worksheet

MMF					
<u>File Vi</u> ew <u>T</u> ools <u>H</u> elp					
Di B 🖉 ?					
Allega	n Area Edu	cational Ser	vice Agency		
03000, 1144265620	FYE:	06/30/2009		Amend	Level: 0
Medicaid Allowable Expenditure Summ	n Med	Ical Statt Co	osts - Allegan Area Educ T	ational Service Age	ncy
				Staff	
Allegan Area Educational Ser		Function		FTE	Sε
Allegan Public Schools	Lin	e Code	Title and Object Code	(2)	
Fennville Public Schools		1 213	Physician (1410)	0.00	
Hopkins Public Schools		2 213	RN/LPN (1450)	0.00	
Martin Public Schools		3 213	PT/PTA (1470)	0.00	
Otsego Public Schools		4 213 5 244	DI)CUTA (1460) Reuchologist/Reuch (14)	0.00	
Plainwell Community Schools		5 214 8 215	Speech Therenist (1280	0.00	
Wayland Union Schools		7 215	Audiologist (1490)	0.00	
Transportation Costs		B 215	Supervised TSLI's (1240	0.00	
Medical Staff Costs Summary		9 216	Social Worker (1440)	0.00	
Peoperitation Costs Summary	1	0 217	O&M Specialist (1290)	0.00	
Peyment Details	1	1	Total	0.00	
		-			
Count of staff included in RMTS (Value is us	er entered	and rounde	d to 2 decimal places.)		~
1					
	Provid	ler Mode		04/28/2009	

NOTE: The default screen display size is set to accommodate smaller monitors with lower resolution. Scroll bars are available and column widths may be changed. The screen may also be expanded to accommodate larger monitors with higher resolution.



ISD Summary Process – Medical Staff Costs Worksheet (Expanded)

MMF												
<u>File V</u> iew <u>T</u> ools <u>H</u> elp												
Di 🖬 🖨 🙎												
		1	Allegan Area Educational Servi	ce Agency								
03000, 1144265620 FYE: 06/30/2009												
Medicaid Allowable Expenditure Summary Report Medical Staff Costs - Allegan Area Educational Service Agency (03000)												
General Information	al Service Agency	Function Code	Title and Object Code	Staff FTE (2)	Salaries (3)	Benefits 2100, 2800 & 2900 (4)	Purchased Services 3130, 3190, 4120 & 4220 (5)	Other Expend. 7410 (8)	Total (9)			
Allegan Public Schools	1	213	Physician (1410)	0.00	0.	0.	0.	0.	0.			
Fennville Public Schools	2	213	RN/LPN (1450)	0.00	0.	0.	0.	0.	0.			
Hopkins Public Schools	3	213	PT/PTA (1470)	0.00	0.	0.	0.	0.	0.			
Cteare Public Schools	4	213	OT/COTA (1480)	0.00	0.	0.	0.	0.	0.			
	5	214	Psychologist/Psych (1430)	0.00	0.	0.	0.	0.	0.			
	6	215	Speech Therapist (1280)	0.00	0.	0.	0.	0.	0.			
	7	215	Audiologist (1490)	0.00	0.	0.	0.	0.	0.			
Medical Staff Costs Summar	8	215	Supervised TSLI's (1240)	0.00	0.	0.	0.	0.	0.			
	9	216	Social Worker (1440)	0.00	0.	0.	0.	0.	0.			
Reconciliation & Settlement	10	217	O&M Specialist (1290)	0.00	0.	0.	0.	0.	0.			
Payment Details	11		Total	0.00	0.	0.	0.	0.	0.			
Count of staff included in RMTS (Value	e is user entered and rounded to) 2 decima	I places.)									
	09603000.mer		Provider Mode					04/28/2009				



ISD Summary Process – Transportation Costs Worksheet





ISD Summary Process – Transportation Costs Worksheet (Expanded)

躍 ммг							
<u>File V</u> iew <u>T</u> ools <u>H</u> elp							
0 🖬 🖪 🎒 👔							
	Alleg	an Area	a Educational Service Ag	gency			
03000, 1144265620			FYE: 06/30/2009				Amend Level: 0
	-		-		10 1 1		
Medicaid Allowable Expenditure Summary Report			Transportation Costs	- Allegan Area Educati	onal Service A	gency (03000)	
	Line	Object	Titla	FIE	Expenditure (4)	Expenditure	Total (9)
Medical Staff Costs	1	1610	Rus Driver	0.00	(4)	(0)	(3)
	2	1630	Aides	0.00	0.	0.	0
Allegan Area Educational Service Agency	3	2000	Employee Benefits	0.00	0.	0.	0.
Allegan Public Schools	4	3310	Pupil Trans Common Ca	arrier	0.	0.	0.
Fennville Public Schools	5	3330	Pupil Trans Family Veh	Cost	0.	0.	0.
- Hopkins Public Schools	6	3310	Family Vehicle Contract	t Csts	0.	0.	0.
Martin Public Schools	7	3930	Pupil Transp. Fleet Insu	rance	0.	0.	0.
Otsego Public Schools	8	4230	Contracted/Leased Bus	ses	0.	0.	0.
Plainwell Community Schools	9	4XXX	Other Vehicle Related (Costs	0.	0.	0.
Wayland Union Schools	10	5710	Gasoline		0.	0.	0.
Medical Staff Costs Summary	11	5710	Oil/Grease		0.	0.	0.
- 🔍 Transportation Costs Summary	12	5720	Tires/Batteries		0.	0.	0.
Reconciliation & Settlement	13	7000	Other Expenses/Adjust	ment	0.	0.	0.
Payment Details	14		Bus Amortization		0.	0.	0.
	15		Total Expenditures		0.	0.	0.
	J						
445							
Count of staff included in PMTS (Value is user entered and rol	upded to	2 decir	nel places)				1221
Count of starr included in NW13 (Value is user entered and for	unueu tu		narpiaces.)				<u></u>
							~
09603000.mer		Pr	ovider Mode			04/28/200	9



ISD Summary Process – Medical Staff Costs Summary Worksheet

File View Tools Help	
Allegan Area Educational Serv	vice Agency
03000, 1144265620 FYE: 06/30/2009	Amend Level: 0
Medicaid Allowable Expenditure Summ	sts Summary - Allegan Area Educational Service
	SE-41 A
Euclai Education Agencies Title and C Title and C	Dbject Code Coc
	́в
Medical Staff Costs Summary	(1410) 21:
Transportation Costs Summary 2 RNLPN (1	450) 21:
Reconciliation & Settlement 3 PT/PTA (14	470) 21:
Payment Details	(1480) 21:
5 Psycholog	jist/Psych (1430) 21-
6 Speech Tr	herapist (1280) 21:
7 Audiologis	st (1490) 21:
8 Supervise	rd TSLI'S (1240) 21:
10 OPM Spec	rker (1440) 211
11 TCM (from	PCG financials)
12 Personal C	Care (from PCG financials)
13 Subtotal D	virect Costs
14 Indirect Co	nst Percentare
Sum of all FTEs (Value is calculated or passed and rounded to 2 dev	cimal places.)
	<u>⊻</u>

NOTE: Summary of previous forms. No user input cells on this worksheet.



ISD Summary Process – Medical Staff Costs Summary Worksheet (Expanded)

🛱 MMF										
<u>File View Tools H</u> elp										
0 🖬 🖬 🎒 🏌										
		Allegan Area Educational Service Age	ncy							
03000, 1144265620 FYE: 06/30/2009 Amend Level										
Medicaid Allowable Expenditure Summary Report Medical Staff Costs Summary - Allegan Area Educational Service Agency (03000)										
General Information	T Line A	itle and Object Code	SE-4096 Function Code B	FTE Count C	Total Allowable Costs D	RMTS Allowable % E	Medicaid Allocated Cost F			
Medical Statt Costs	1 F	hysician (1410)	213	0.00	0.	0.4619	0.			
Transportation Costs Sum	mary 2 F	RNALPN (1450)	213	0.00	0.	0.4619	0.			
Reconciliation & Settlement	+ 3 F	T/PTA (1470)	213	0.00	0.	0.4619	0.			
Payment Details	4 (DT/COTA (1480)	213	0.00	0.	0.4619	0.			
	5 F	sychologist/Psych (1430)	214	0.00	0.	0.4619	0.			
	6 5	Speech Therapist (1280)	215	0.00	0.	0.4619	0.			
	74	Audiologist (1490)	215	0.00	0.	0.4619	0.			
	8 5	Supervised TSLI's (1240)	215	0.00	0.	0.4619	0.			
	9 5	Social Worker (1440)	216	0.00	0.	0.4619	0.			
	10 0	0&M Specialist (1290)	217	0.00	0.	0.4619	0.			
	11 1	CM (from PCG financials)		13.05	156,750.	0.0866	13,575.			
	12 F	Personal Care (from PCG financials)		11.98	171,000.	0.1855	31,720.			
	13 5	Subtotal Direct Costs	1				45,295.			
	14	ndirect Cost Percentage				1	0.0225			
	15 1	ndirect Costs		1.5			1,019.			
	16 T	otal Allowable Health Service Costs					46,314.			
	17 N	/ledicaid Eligibility Rate		1.11			0.4518			
	18 T	otal Medicaid Allowable Health Service Co	osts				20,925.			
Sum of all FTEs (Value is calculated	or passed and rounded to 2 decima	al places.)								
	09603000.mer	Provider Mode				04/28/2009				



ISD Summary Process – Transportation Costs Summary Worksheet

Image: Second state sta	Area Educational Service Agency	
Medicaid Allowable Expenditure Summ	Transportation Costs Summary - Alleg	an Area Educational
Medical Staff Costs Medical Staff Costs Medical Staff Costs Summary Transportation Costs Summary Reconciliation & Settlement Payment Details	Line A 1 Bus Driver 2 Aides 3 Employee Benefits 4 Pupil Trans Common Carrier 5 Pupil Trans Family Veh Cost 6 Earnity Vehicle Contract Csts	B 1610 1630 2000 3310 3330 3310
	7 Pupil Transp. Fleet Insurance 8 Contracted/Leased Buses 9 Other Vehicle Related Costs 10 Gasoline 11 Oil/Grease 12 Tires/Batteries	3930 4230 4XX0 5710 5710 5720
	13 Other Expenses/Adjustment	7000
Sum of all Bus Driver FTE Counts (Value is cal	Provider Mode	aces.)

NOTE: Summary of previous forms.



ISD Summary Process – Transportation Costs Summary Worksheet (Expanded)

000, 1144265620						
			FYE: 06/30/2009			Amend
Medicaid Allowable Exp	enditure Summary Report		Transportation Costs Summary - Allegan Area Ec	lucational S	Service Agenc	v (03000)
General Information	encies	Line	Title	Object Code B	FTE Count C	Total Allowable Costs D
Iransportation Cost	S	1	Bus Driver	1610	0.00	
Medical Statt Costs	Summary	2	Aides	1630	0.00	
Iransportation Cost	s Summary	3	Employee Benefits	2000		
Reconciliation & Set	tiement	4	Pupil Trans Common Carrier	3310	-	1
		5	Pupil Trans Family Veh Cost	3330	2	
		6	Family Vehicle Contract Csts	3310	1	
		7	Pupil Transp. Fleet Insurance	3930	1	
		8	Contracted/Leased Buses	4230	2	
		9	Other Vehicle Related Costs	4XXX	1	
		10	10 Gasoline		1	
		11	11 Oil/Grease	5710	1	
		12	Tires/Batteries	5720	-	
		13	Other Expenses/Adjustment	7000	1	
		14	Bus Amortization			
		15	Transportation Costs			
		16	Indirect Cost Percentage			0.022
		17	Indirect Costs			
		18	Total Allowable Transportation Costs			
		19	Total One-Way Special Education Bus Trips			1
		20	Total Cost per One-Way Trip			0.0
		21	Total Allowable Trips			1
		22	Total Medicaid Allowable Transportation Costs			4

NOTE: Line 21 is entered by MDCH based upon submitted claims.



ISD Summary Process – Reconciliation & Settlement Worksheet

🛱 MMF					
<u>File V</u> iew <u>T</u> ools <u>H</u> elp					
Di 🖬 🖨 🔋					
All	egan Area Edu	cational Servio	ce Agenc	у	
03000, 1144265620	FYE:	06/30/2009			Amend Level: 0
Medicaid Allowable Expenditure Su	mm Rei	conciliation & S	Settlement	- Allegan An	ea Educational Service
Local Education Agencies	Lin	e Time Period		Description	
🗄 📄 Medical Staff Costs		1 July - Septer	mber	Total Medica	id Allowable Health Serv
🕀 💼 Transportation Costs		2 July - Septer	mber	Interim Paym	ients
Medical Staff Costs Summary		3 July - Septer	mber	Total Allows	ble Medicaid Costs
Transportation Costs Summary		4 October - De	ecember	Total Medica	id Allowable Health Serv
Reconciliation & Settlement		5 October - De	ecember	Interim Paym	ients
Payment Details		6 October - De	ecember	Total Allowa	ble Medicaid Costs
		7 January - M	arch	Total Medica	id Allowable Health Serv
		8 January - M	arch	Interim Paym	ients
		9 January - M	arch	Total Allowa	ble Medicaid Costs
	1	0 April - June		Total Medica	id Allowable Health Serv
	1	1 April - June		Interim Paym	ients
	1	2 April - June		Total Allowa	ble Medicaid Costs
	1	3		Total Full Ye	ar Medicaid Allowable C
	1	4		Less Any In	itial or Final Settlements
	1	5		Amount Due	To/From the ISD
<	>				•
First Quarter Total Medicaid Allowable He	alth Service C	osts (Value is	calculate	d or passed :	and rounded to a 🛛 📐
whole number.)					
1					
	Provid	ler Mode			04/28/2009

NOTE: Summary and calculations based upon previous forms. No user input cells on this worksheet.



ISD Summary Process – Reconciliation & Settlement Worksheet (Expanded)

MMF									
<u> File V</u> iew <u>T</u> ools <u>H</u> elp									
		Allegan A	rea Educational Service Agency	y					
03000, 1144265620 FYE: 06/30/2009 Amend Lev									
	181								
Medicaid Allowable Expenditure Summary F	Report		Reconciliation & Settlement	Allegan Area Educa	tional Service A	aency (03000	ì		
General Information					Gross		Total	60%	
Local Education Agencies	Line Time Period	d	Description		Costs	FMAP	Federal	ISD Share	
🗄 🦲 Medical Staff Costs	1 July - Sept	tember	Total Medicaid Allowable Healt	th Service Costs	5,231.	0.5810	3,039.	1,823.	
🗉 💼 🧰 Transportation Costs	2 July - Sept	tember	Interim Payments					150,570.	
Medical Staff Costs Summary	3 July - Sept	tember	Total Allowable Medicaid Cost:	s				-148,747.	
- Q Transportation Costs Summary	4 October - I	December	Total Medicaid Allowable Healt	th Service Costs	5,231.	0.6958	3,640.	2,184.	
Reconciliation & Settlement	5 October - I	December	Interim Payments					156,501.	
🔜 🛄 Payment Details	6 October - I	December	Total Allowable Medicaid Cost	s				-154,317.	
	7 January - 1	March	Total Medicaid Allowable Healt	th Service Costs	5,231.	0.6958	3,640.	2,184.	
	8 January - 1	March	Interim Payments					52,167.	
	9 January - t	March	Total Allowable Medicaid Cost	s				-49,983.	
	10 April - June	е	Total Medicaid Allowable Healt	th Service Costs	5,231.	0.6958	3,640.	2,184.	
	11 April - June	е	Interim Payments					0.	
	12 April - June	е	Total Allowable Medicaid Cost	s				2,184.	
	13		Total Full Year Medicaid Allow	able Costs		l		-350,863.	
	14		Less Any Initial or Final Settler	nents		l		0.	
	15		Amount Due To/From the ISD			1		-350,863.	
First Quarter Total Medicaid Allowable Health Ser	vice Costs (Value is calculated)	or passed	and rounded to a whole numbe	r.)					
		596 SCI29-203							
	09603000.mer	F	Provider Mode				04/28/2009		



ISD Summary Process – Payment Details Worksheet

MMF										
<u>File View T</u> ools <u>H</u> elp										
Di 🖪 🖉 🙎										
Allegan Area Educational Service Agency										
03000, 1144265620	FYE: I	06/30/2009		Amend Le	vel: 0					
A the disaction of the Disaction of the second state		weet Deteile	Allewer Aven Educat	innel Comine America						
	Pay	Deuroet Tur	- Allegari Area Educal	Ional Service Agency	In.					
		Payment Typ	e Adiustment	Payment Date	PE					
Medical Staff Costs		Interim Gros	s Adjustment	08/06/2008						
	3	Interim Gros	s Adjustment	09/03/2008						
Medical Staff Costs Summary	4	Interim Gros	s Adjustment	10/01/2008						
Transportation Costs Summary	5	Interim Gros	s Adjustment	11/05/2008						
Reconciliation & Settlement	6	Interim Gros	s Adjustment	12/02/2008						
Payment Details	7	Interim Gros	s Adjustment	12/10/2008						
	8	Interim Gros	s Adjustment	01/06/2009						
<		(•					
	3									
Lists the type of payment including Interim Pa	yments and	l Settlements	(Value is calculated or	rpassed.)						
	Provide	er Mode		04/28/2009						



ISD Summary Process – Payment Details Worksheet (Expanded)





ISD Summary Process – Saving the Cost Report File

MMF					
<u>File V</u> iew <u>T</u> ools <u>H</u> elp					
New Ctrl+N Open From File					
Allega	Allegan Area Educational Service Agency				
Save Ctri+5	FYE: 06/30/2009 Amend Level: 0				
Print Ctrl+P					
Close		Ge	eneral Information	n	
		ISD Code	03000	Aven Educational Courts	
Exit	2	ISD Name	Allegan	Area Educational Servic	
	4	Drenared By	114420	3020	
Medical Staff Costs Summary	5	Phone Number			
	6	EAX Number			
Reconciliation & Settlement	7	Email Address			
Payment Details	8	Fiscal Year Begin	07/01/2	008	
	9	Fiscal Year End	06/30/2	009	
	10	Operating System	window	vs XP Build 2600 Service	
		Internet Explorer v	version 6.0.290	0.5512	
	12	MDAC version	2.81.11	32.0	
Enter the name of the person responsible for preparing this cost report.					
Provider Mode 04/28/2009					



ISD Summary Process – File Saved Successfully

MMF						
<u>File Vi</u> ew <u>I</u> ools <u>H</u> elp						
Di 🖪 🖨 🙎						
Allegar	n Area Edu	cational Service A	Agency			
03000, 1144265620 FYE: 06/30/2009 Amend Level: 0						
Medicaid Allowable Expenditure Summ		ICD Code	General Informatio			
	1	ISD Code	03000	Area Educational Servic		
Medical Staff Costs	3	NDI	Allegan	SE20		
	4	Prenared By	114420	3020		
Medical Staff Costs Summary	5	Phone Number				
	6	FAX Number				
Reconciliation & Settlement	7	Email Address				
Payment Details	8	Fiscal Year Beg	in 07/01/2	008		
	9	Fiscal Year End	06/30/2	009		
	10	Operating Syste	em Windov	vs XP Build 2600 Service		
	11	Internet Explorer	r version 6.0.290	0.5512		
	12	MDAC version	2.81.11	32.0		
Enter the name of the person responsible for preparing this cost report.						
Successfully Saved File: 09603000.mer						
09603000.mer	09603000.mer Provider Mode 04/28/2009			04/28/2009		

NOTE: The file name displays at the bottom of the screen. The ISD submits this file to MDCH.

The example to the left shows the file name "09603000.mer". Each ISD will have a similarly named file with the last 5 characters ending in their own school code.

Do not rename this file!



ISD Summary Process – Choosing Print

MMF					
<u>File View T</u> ools <u>H</u> elp					
<u>N</u> ew Ctr Open From File	I+N	n Area Edu	icational Saruia	o Arronov	
<u>S</u> ave Ctr Save <u>A</u> s	l+S	FYE: 06/30/2009 Amend Level: 0			
Print Ctr	I+P Inditure Summ			General Informa	tion
⊆lose		1	ISD Code	0300	0
E.A	ncies	2	ISD Name	Alleg	an Area Educational Servic
		3	NPI	1144	265620
🗄 💼 🛄 Transportati	on Costs	4	Prepared By		
🦳 🧕 🧕 🧕 Medical Stat	f Costs Summary	5	Phone Numb	er	
🔍 Transportati	on Costs Summary	6	FAX Number		
🔍 Reconciliatio	on & Settlement	7	Email Addres	s	
🖳 🔍 Payment De	tails	8	Fiscal Year B	Begin 07/01	/2008
		9	Fiscal Year B	End 06/30)/2009
		10	Operating Sy	/stem /Vind	ows XP Build 2600 Service
		11	Internet Expl	orer version 6.0.2	900.5512
		12	MDAC version	on 2.81.	1132.0
Enter the name of the person responsible for preparing this cost report.					
09603000.mer Provider Mode 04/28/2009					



ISD Summary Process – Print Certification

MMF Print					
Erint Q Q 85% ▼ 1/1 ← Back → Fg	grward				
CERTIFICATION OF PUBLIC EXPENDITURE (CPE)					
GOVERNMENTAL PROVIDER USE ON LY: CERTIFICATION OF TOTAL COMPUTABLE PUBLIC EXPEN					
1 Governmental Provider Name and Address: Allegan Area Educational Service Agency 310 Thomas Steet Allegan, Mil 19010-9158					
2 Reporting Period (Medicald State Plan Rate Year):	Medic				
Fiom: 07.01.2008					
To: 06,90,2009					
3 a. Type of Report b. Total Computable Centified Public Expenditure by Component					
[] Partal Period Report []					
[] Q anterly Cost Report Medical Services					
[] Fill Year Cost Report [] Revised Cost Report [] Revised Cost Report	5				
INTENTIONAL MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION CONTAINE MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER FEDERAL AND/OR STATE L					
	<u> </u>				
Transportation Costs Summary Reconciliation & Settlement					
Payment Details Select All Select All	Cancel				

NOTE: The ISD submits the signed certification form to MDCH.

Sign the certification form and fax it to (517) 241-7408



🕙 MDCH-BPCT - Micro	osoft Internet Explorer prov	rided by EDS COE			
N DCH	File Tra	insfər			
File	Share File	Browse	General		
Upload File	Share File	Upload Log	Request Additional Area Access		
Download File	Delete Shared File	Download Log	Exit Application		
	Shared File Log				
			×		
<					
é			🔒 😒 Local intranet 🛒		

NOTE: Once the file has been saved via the MMF application, the ".mer" file can be uploaded to the HHPRD using the **MDCH File Transfer** application. Once Signed in, choose the "Upload File" link on the upper left side of the page.

When uploading, choose your Area name as the Area.



EDS, an HP company 5400 Legacy Drive Plano, TX 75024

EDS and the EDS logo are registered trademarks of Hewlett-Packard Development Company, LP. HP is an equal opportunity employer and values the diversity of its people. ©2008 Hewlett-Packard Development Company, LP.



