

Meeting Date: December 15, 2025

Agenda Section: Discussion and Possible Action

Agenda Item Title: Medicaid / SHARS Consultant Selection

From/Presenters: Stanley Osborne, Chief Financial Officer

Additional Presenters if Applicable: NA

Description: South San Antonio ISD participates in the School Health and Related Services (SHARS) Medicaid reimbursement program to recover allowable costs associated with providing eligible special education and related services. Over the past decade, the district has contracted with several vendors to support SHARS claiming, documentation audits, provider training, and TEA/TMHP compliance.

Historical Data: SSAISD has maintained an ongoing partnership with MSB, utilizing a range of add-on services such as documentation auditing, provider training, and monthly Medicaid reimbursement reporting. Throughout the start of this school year, the district has observed meaningful progress in strengthening SHARS operations, including improved X-Logs usage, expanded staff training, and a reduction in unclaimed eligible services.

As part of the annual renewal cycle, representatives from both the Special Education Department and the Business Office conducted a comprehensive review of MSB's performance, fee structure, and service model. While recent improvements were acknowledged, the team identified limitations in MSB's customization options and noted that the existing cost model might not yield the highest possible operational efficiency or reimbursement return.

Given these considerations, district leadership determined that a competitive procurement process was warranted. A formal bid was issued, and three vendors MSB, TSBS, and Houston ISD submitted proposals and presented them to district staff from Special Education and Business Services. The following fee structures were proposed:

- MSB: Annual fixed cost of \$39,060 + 4% fee
- TSBS: 7.5% fee
- Houston ISD: 8% SHARS fee + 2% cost report fee + \$1,500 annual technology support fee

After a collaborative review of each proposal, district Special Education and Business Office representatives concluded that Houston ISD offered the most comprehensive wrap-around services with a cost structure projected to maximize reimbursement while providing stronger operational support.

Recommendation: Board approval to authorize the district to award a contract to Houston ISD as the new SHARS billing vendor for the 2025–2026 school year following a competitive procurement process.

Purchasing Director and Approval Date: Jacob Collazo, Special Education Director

Funding Budget Code and Amount: 199 E 21 6299 00 813 0 99 0 00 for \$1500 for the Technology Support Fee.

Goal: 3. SSAISD will implement program initiatives and activities that reflect a commitment to preparing 100% of students for post-secondary educational or career paths.





SOUTH SAN ANTONIO ISD

SHARS PRESENTATION

School Districts in Partnership to Achieve Excellence

More Information



www.myeSHARS.com



5287 Chimney Rock, Suite 2200 Houston, Tx 77092



713-556-9125



MFCS@HoustonISD.org

ABOUT US



The LEADER in SHARS Revenue

The Houston Independent School District (HISD) was very instrumental in the development and approval of the state's SHARS Medicaid program in 1991. HISD was also the first district in the state to be paid for their SHARS claims in 1992. In November 1999, the HISD Board approved the implementation of the Medicaid Finance and Consulting Services (MFCS) Department. This consulting group offers other school districts comprehensive decision support services to manage their SHARS program and maximize their Medicaid reimbursement revenue.

The HISD Medicaid Finance Consulting Services (MFCS) is uniquely qualified and field tested in the fiscal and operational areas that will benefit any Texas School District in maximizing their efforts to seek SHARS Medicaid reimbursement revenue.

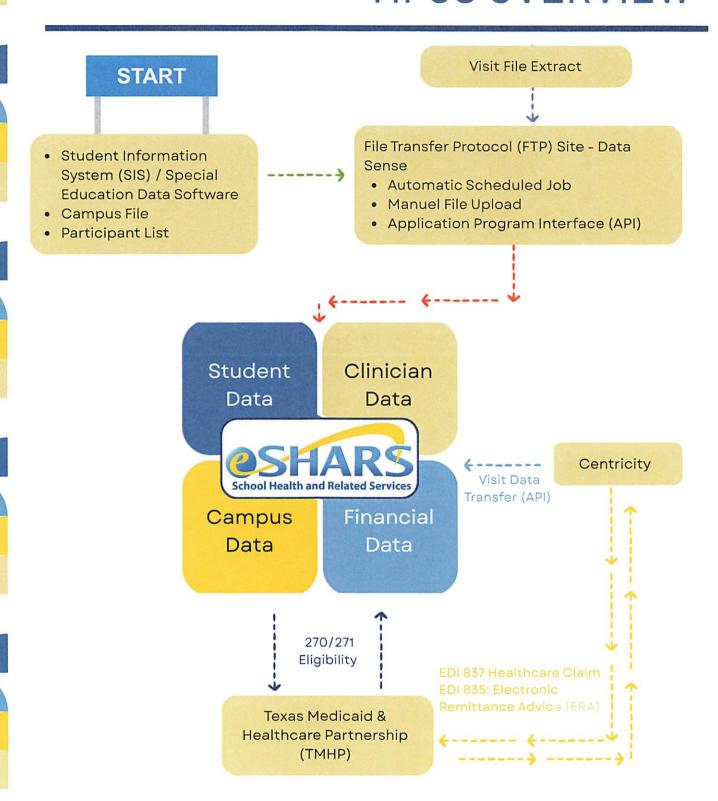
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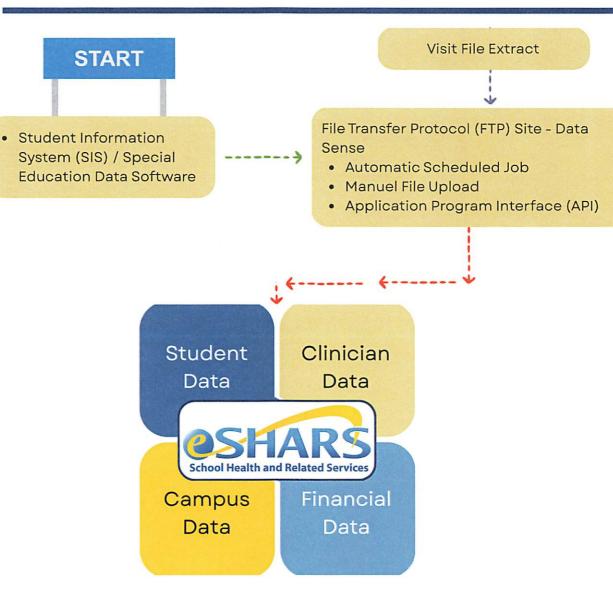
MFCS Overview
Presentation
Reports
Cost Report Formal Appeal Sample Report
Contact Information

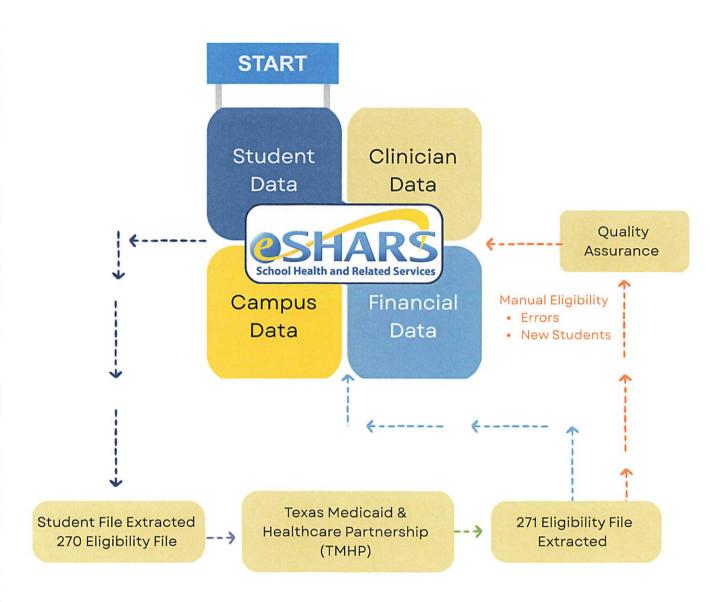


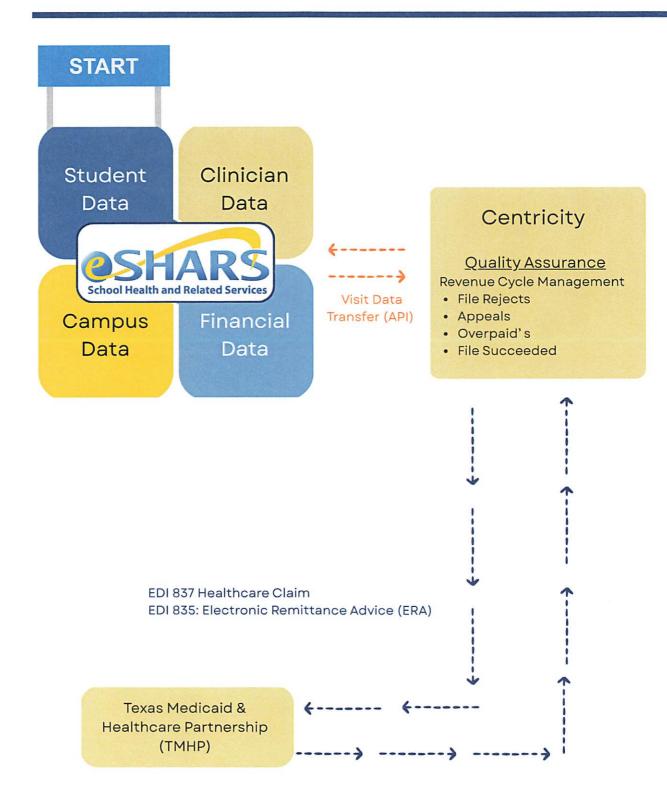


MFCS Overview









ELECTRONIC DATA INTERCHANGE (EDI)



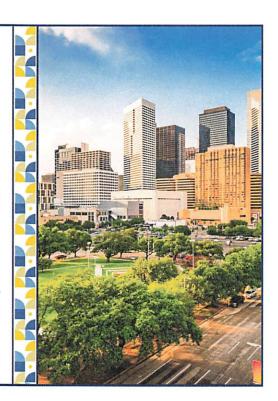


Presentation



MEDICAID FINANCE & CONSULTING SERVICES

Serving Texas School Districts for more than Thirty Years of experience. The LEADER in SHARS maximization and school-based Medicaid consulting services with expertise in all Medicaid compliance.





The LEADER in Texas SHARS Revenue and School-Based Medicaid Consulting Services

All Districts Benefits from Our Leadership Role in SHARS

MFCS ESTABLISHED IN

MFCS was established to help Texas School Districts keep more of the revenue they generated in the SHARS or MAC programs.

COMPETITION MATTERS

MFCS has been a driving force in the reduction of consulting fees in Texas. Whether a district chooses MFCS as their vendor, or not, they benefit from the lower rate that all vendors must compete with, the MFCS rate.

SHARS Adopted Changes

ADOPTED

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AMOPTED RULES September 18, 2622 47 TexRep 6425

10/1/2021 – 9/30/2022 and Prior TAC 354.1342(8) One Claim Per Service/YR

10/1/2022 - 9/30/2023

TAC 355.8443(c) Parental Consent / Ratios

10/1/2022 - 9/30/2023 TAC 355.8443(2) Interim Claiming

New Personal Care Services Interface to Document , and Capture Consolidated PCS Services for the PCS-TA and PCS Teachers



School Health and Related Services (SHARS) Program Is Significantly Changing for FFY2023 Going Forward

	Federal Fiscal Year	Cost Report Due
FFY 2021	OCT. 1, 2020 - SEPT. 30, 2021	April 1, 2022
FFY 2022	OCT. 1, 2021 - SEPT. 30, 2022	April 1, 2023
FFY 2023	OCT. 1, 2022 - SEPT. 30, 2023	April 1, 2024
FFY 2024	OCT. 1, 2023 - SEPT. 30, 2024	April 1, 2025
FFY 2025	OCT. 1, 2024 - SEPT. 30, 2025	April 1, 2026

Districts Must Focus on these Mission-Critical Initiatives to meet the new HHSC Requirements:

- Securing Parental Consent will be important because of the Numerator for the Cost Report Ratios, the IEP Ratio, One-Way Trip Ratio, etc.
- All Personal Care Services must be documented and billed.
- All Special Transportation Services must be billed.
- At least one claim for the other SHARS Clinical Services must be billed during the applicable cost report period (FFY).
- New Special Transportation Services Logs must be maintained, with applicable signatures and dates by the bus driver, and any associated PCS service provider.

STOP-LOSS RECOMMENDATIONS

For every Medicaid Eligible Special Education Student that is counted in the Numerator of your respective IEP Ratio:

- Obtain Parental Consent for every student being counted in your Numerator (IEP Ratio), and
- Ensure that Interim SHARS Claims are submitted for billing for every student that is counted in your Numerator (IEP Ratio).

If these "Stop Loss Measures" are implemented during the federal fiscal year, your IEP Ratio will not be impacted by the new TAC 355.8443 requirements.

OUR STANDARD LEVEL OF COMPREHENSIVE SERVICE

Medicaid Revenue Maximization (MRM)







Medicaid Revenue Maximization (MRM) **FINANCE PROGRAM** COMPLIANCE Meet HIPAA and FERPA Standards Provide On-Site Training of **Finance Staff** Provide On-Site Training and **Review Supporting Documentation** Support to Special Education Staff vs. Submitted SHARS Claims SHARS Cost Report We will User Friendly Web-Based and On-Constant Monitoring and your Districts SHARS Cost Report Line System available 24 hours 7 Review of SHARS Program days a week Requirements Support for Financial OIG Audits **On-Line Management Tools** Analysis of Random Moment Time Study (RMTS) Participant List (PL) to ensure participation requirements with THHSC Assistance with Certification of Electronic Claims Tracking & Extended Funds (Quarterly) Submission for SHARS OMB Circular A-87 Guidelines Monitoring and Advocacy to Customer Service Call Center and MOE Compliance State and Federal Medicaid (Toll-Free Line) Legislation Capture all Allowable Costs Claims Appeal Processing for Medical/SHARS and Comprehensive Audit Special Transportation Support for OIG, HHS, TMHP, TEA Reviews and Audits Services

WE MONITOR STATE/ FEDERAL REGULATIONS

Special Education

U.S. Department of Education (DOE)

- · Federal Register
- Code of Federal Register (CFR)
- FERPA: Family Education Rights & Privacy Act
- IDEA: Individual with Disability Education
- · Maintenance of Effort
- · No Supplant Provision of IDEA

Texas Education Agency (TEA)

- Texas Administrative Code (TAC)
- Texas Education Code (TEC)

Medicaid

U.S. Department of Health and Human Services

- Federal Register
- · Code of Federal Register (CFR)
- OMB A-87 and OMB A-133
- · HIPAA
- OIG: Office of Inspector General (HHS-OIG)

Centers for Medicare and Medicaid (CMS)

Texas Department of Health & Human Services

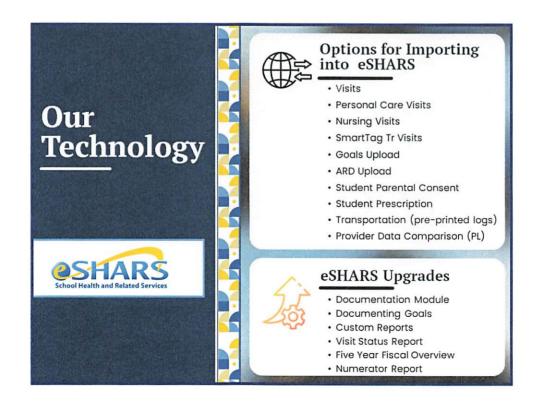
- · Texas Administrative Code (TAC)
- · Medicaid State Plan Amendment (SPA)
- OIG: Office of Inspector General (HHS-OIG)

HHSC State Contractors

- SHARS: Texas Medicaid Healthcare Partnership (TMHP)
- · MAC: Fairbanks LLC









Contact Us

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MFCS@HoustonISD.org

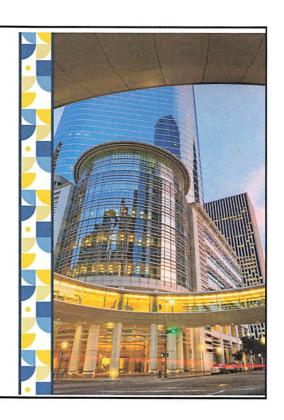


www.eSHARS.com



855-381-6327







Reports

Reporting & Analytics

- What types of reports are available (standard, ad hoc, dashboards)?
 - Our system offers standard reports, customizable ad hoc reports, and interactive dashboards, giving you real-time insights and the flexibility to track the metrics that matter most. All reports can be easily exported for audits or review.

Example Reports



eSHARS On-Demand Reports

Activity Tracking Report

The Activity Tracking Report produces a breakdown of total active visits by Clinicians within a specific date range, grouped by service and campus. This report is available only to District Admins, MFCS Admins and Clinician Users. Clinicians use the report to determine if billing is complete for their visits, while Administrators use the report to determine how many visits have been created vs. billed.

District Tabulation Report

The District Tabulation Report enables Users to produce a tabulation of visit completion percentage by service as of the Report End Date. This report is available only to District Admins and MFCS Admins. This report helps the Finance team provide projections of future months for how many visits can be forecast based on the current pace.

Provider Users Report

The Provider Users Report enables Users to generate a list of providers available for the district in eSHARS within the selected date range. This report is available only to District Admins and MFCS Admins.

TR Monthly Report

The TR (Transportation) Monthly Report enables Users to view and print transportation logs for specific months and routes. This report is available only to District Admins and MFCS Admins.

Student Missing Service Report

The Student Missing Service Report enables Users to generate a list of Students in eSHARS who have active service activations with no activity (visits) entered by a Clinician for a given time. This report is available to Clinicians, District Admins and MFCS Admins.

Student Data

The Student Data Report enables Users to generate a list of student data along with tagged service information for a given district as stored in the eSHARS database, derived from the district's SIS upload file. This report is available only to District Admins and MFCS Admins.



User Caseload Report

The User Caseload Report enables Users to generate a list of active Students added to a Clinician's caseload or list of Students without a caseload Clinician within the selected date range. This report is available only to District Admins and MFCS Admins.

Visit Details Report

The Visit Details Report enables Users to generate a list of all non-deleted visits with different status. It builds in with different grouping capability. (grouping by campus, Clinician, student or service). This report is available only to District Admins and MFCS Admins.



• eSHARS Emailed Reports

Visit Status Report

The Visit Status Report gives administrators a weekly snapshot of documentation activity within eSHARS. It displays the most recent visit entry by student and service, making it easy to monitor the timeliness of submissions for both documentation and billing. The report can be filtered by 15, 30, or 60 days and provides totals based on the last recorded visit. For convenience, it is automatically delivered to administrators' inboxes each week.

District	Days Since Last Visit	15 Days Ago	Visits Over 30 Days Ago	60 Days Ago	Campus	Student Number	First Name	Last Name	Service	Medicald ID	Parental Consent	Has Prescription	Latest Visit	Provider First Name	Provider Last Name	Provider Email
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Numerator Billing Report

The Billing Numerator Report provides administrators with a list of students who should be included in the IEP ratio and numerator but are excluded due to a lack of billing activity. The report also identifies cases where billing was submitted but subsequently denied. For convenience, it is automatically delivered to administrators' inboxes each month.

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Numerator Report Error Report





Service Date Range	Service	Payments	Denied Code	Denied Payment Error	Referring Provider Name	Referring Provider NPI Number	Prescription Start Date		Prescription Status
11/22/2024 - 11/22/2024	PT	\$0.00	00701	TMHP &/or ORP registration has laps ed			10/29/2024	10/28/2027	Current
11/15/2024 - 12/6/2024	PT	\$0.00	00701	TMHP &/or ORP registration has lapsed			10/29/2024	10/28/2027	Current
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Numerator Overview

The Numerator Overview Report expands on the Numerator Billing Report by providing a detailed campus-level breakdown. It includes TMHP payments, Medicaid-eligible students, students receiving personal care, students with personal care but no payments, and parental consent status (Yes, No, or Not Found). For convenience, it is automatically delivered to administrators' inboxes each month.

listrict	Campus	TMHP 8 \$169,4	Payments: 28.01	Medicaid Eligible Students: 845	Students With PCS: 277	PCS Students Without TMHP Payments: 214		Parental Consent - No. 21	Parental Consent - No Found: 131
		\$	2,244.28	42	35	34	30	0	12
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		\$	5,871.90	54	15	11	46	1	7
		\$	12,649.31	68	34	30	59	3	6
		\$	2,181.76	21	8	8	18	0	3
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		5	3,207.13	57	19	17	48	3	6
		\$	4,624.11	38	11	5	31	0	7
		\$	17,218.01	25	12	8	15	1	9

Numerator Overview Parental Consent PCS w/out Payments

District	Campus	Student Name	Student Number	Medicald ID	Parental Consent	Status
			84233		Not Found	
			86532		Not Found	
			87852		Not Found	
			84674		Not Found	
			86452		Not Found	
			86520		Not Found	
			84605	(Alexander)	NotFound	
			86611		Not Found	
			86663		NotFound	
			86168		Not Found	
			86458		AND DESCRIPTION OF	CONTRACTOR OF STREET
			88295	District	Campus	Stude
			62444			
			70161			
			69147			
			63212			
			63747			
			84307			
			54751			
			53578			
			61708			
21-15-01				White property and the property of the party		
Num	erator =	Parental	PCS w/out			

PCS w/out Payments are students that have been tagged to Personal Care with no claims The Parental Consent list give the district a list of missing parental consent forms that our Medicaid Eligible

	Numerator -	Parental	PCS w/out	
100			78153	Visits not entered into eSHARS
			87761	Visits not entered into eSHARS
1			84361	Visits not entered into eSHARS
			81393	Visits not entered into eSHARS
			66711	Visits not entered into eSHARS
1			67412	Visits not entered into eSHARS
			69436	Visits not entered into eSHARS
1			65609	Visits not entered into eSHARS
1			74887	Visits not entered into eSHARS
1			71028	Visits not entered into eSHARS
			63362	Visits not entered into eSHARS
			78411	Visits not entered into eSHARS
1			53612	Visits not entered into eSHARS
18			48768	Visits not entered into eSHARS
			68799	Visits not entered into eSHARS
			66015	Visits not entered into eSHARS
			78171	Visits not entered into eSHARS
			44634	Visits not entered into eSHARS
			51022	Visits not entered into eSHARS
			84259	Visits not entered into eSHARS
			83795	Visits not entered into eSHARS
13			86482	Visits not entered into eSHARS
			84474	Visits not entered into eSHARS
			84491	Visits not entered into eSHARS
			84089	Visits not entered into eSHARS
			86128	Visits not entered into eSHARS
			84158	Visits not entered into eSHARS

Student Number



Five Year Overview Report

The Five-Year Overview Report compares revenue trends across multiple years, allowing districts to track financial performance over time. The report includes key metrics such as Federal Max Cap, total revenue, yearly interim payments (by week, fiscal year, or federal fiscal year), and cost report settlements. For convenience, it is automatically delivered to administrators' inboxes each month.

Quarterly Reports

The Quarterly Reports provide a detailed breakdown of revenue by service, with further categorization into evaluation, individual, and group sessions. It also tracks the status of student uploads and transportation logs. For convenience, these reports are automatically delivered to administrators' inboxes each January, April, July, and October.



Finance Requested Reports

Certification of Funds (Centricity)

The Certification of Funds (Centricity) Report enables Users to generate a daily balance report of processed claims within a certain time frame and what was paid or any recoupments that were made during that time frame. This information is generated from Centricity. This report is available only to District Admins and MFCS Admins.

Certification of Funds (R&S)

The Certification of Funds (R&S) enables Users to generate a daily balance report of processed claims within a certain time frame and what was paid or any recoupments that were made during that time frame. This information is generated from the R&S Reports that are available in TMHP. This report is available only to District Admins and MFCS Admins.

Ratio Report

The Ratio Report enables Users to view the SHARS cost ratios such as IEP ratios, student transportation ratios, and one-way trip ratios to gather supporting data for cost reporting. This report is available only to District Admins and MFCS Admins.

Reimbursement Summary (Centricity)

The Reimbursement Summary Report enables Users to generate a report on transmitted claims and the status of the claims based on status (file rejected status, overpaid, etc..) with the option to select the view by date of service or by date of entry. This report is available only to District Admins and MFCS Admins.





Cost Report Formal Appeal Sample Report





Houston Independent School District Formal HHSC Appeal: FFY2022 SHARS Cost Report Cause No. 24-0330-K

March 27, 2025

HOUSTON INDEPENDENT SCHOOL DISTRICT, Appellant

VS.

TEXAS HEALTH AND HUMAN SERVICES COMMISSION (HHSC), Respondent

HHSC Appeals Division

Hearing Date: March 27, 2025 @ 10:00am via Zoom Videoconference Administrative Law Judge: A. Shawn Richards (Shawn.Richards@hhs.texas.gov)

RE: Formal Appeal for FFY2022 Cost Report: 065727201-SHARS-Houston ISD

The Houston Independent School District (HISD) disagreed with the HHSC-PFD's Informal Review decision and is requesting a Formal Appeal of our FFY2022 SHARS Cost Report Settlement adjustments in accordance with Title 1 Texas Administrative Code (TAC) Section 355.110(c)(1)(A). The HHSC disallowances were reviewed, and our findings indicate that several expenditures and other components that were disallowed, did in fact, meet the applicable state or federal Medicaid requirements and guidelines for the FFY2022 federal cost reporting period.

Our Informal Review of our FFY2022 Cost Report was denied by the HHSC Provider Finance Department (HHSC-PFD), and we received a standard communication with no specific details or information for their decision. The HHSC Denial Letter stated that "the LEA did not provide all required elements of the Informal Appeal and/or did not provide satisfactory documentation to support the requested adjustments, and as a result, the adjustments requested in the LEA's informal review request are denied". However, we previously did submit our data and supporting documentation to HHSC, and it was already uploaded to the STAIRS Data Center for the HHSC cost report settlement review process.

Our HHSC Informal Appeal also included criteria concerning the methodology in which HHSC reclassified and/or disallowed statistical moments from the Random Moment Time Study (RMTS) that significantly impacted the Direct Medical Percentage (DMP) for the FFY2022 cost reporting period.

Our appeal also included concerns about the arbitrary practice that HHSC utilized in the implementation of federally unauthorized or unapproved changes to the cost allocation ratios that were applied retrospectively to the FFY2022 Cost Report.

COST REPORT FORMAL APPEAL SAMPLE REPORT

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS Houston Independent School District Cause No. 24-0330-K March 27, 2025

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ITEM NO. 1: Disallowance of Medicaid Eligible Student Count from the IEP Ratio Numerator

The HHSC-PFD retroactively adjusted our IEP Ratio from 70.50% to 59.80% pursuant to the new requirements of TAC §355.8443.

The HISD was also in compliance with the cost allocation methodology requirements of the CMS Approved State Plan Amendment (SPA #06-005) for the Texas SHARS Program, when the IEP and One-Way Trip Ratios were calculated for the FFY2022 SHARS Cost Report.

We are respectfully requesting that our original IEP Ratio be reinstated to 70.50% because TAC §355.8443 became effective as of October 1, 2022, (FFY2023), which was out of the scope of the FFY2022 cost reporting period, and HHSC did not receive CMS approval to amend or change SPA #06-005.

ITEM NO. 2: Disallowance of Medicaid Eligible Student Count from the One-Way Trip Ratio

The HHSC-PFD retroactively adjusted our One-Way Trip Ratio from 83.93% to 81.42% pursuant to the requirements of TAC §355.8443.

The HISD was also in compliance with the cost allocation methodology requirements of the CMS Approved State Plan Amendment (SPA #06-005) for the Texas SHARS Program, when the IEP and One-Way Trip Ratios were calculated for the FFY2022 SHARS Cost Report.

We are respectfully requesting that our original One-Way Trip Ratio be reinstated to 83.93% because TAC §355.8443 became in full force and effect as of October 1, 2022, (FFY2023), which was out of the scope of the FFY2022 cost reporting period, and HHSC did not receive CMS approval to amend or change SPA #06-005.

ITEM NO. 3: Disallowance of Percentage of Medicaid Students Requiring Specialized Services

The HHSC-PFD retroactively adjusted the percentage of Medicaid Students requiring specialized services from 82.92% to 76.34% pursuant to the requirements of TAC §355.8443.

We are respectfully requesting that our original percentage of Medicaid Students requiring specialized services be reinstated to 82.92% because TAC $\S355.8443$ became in full force and effect as of October 1, 2022, (FFY2023), which was out of the scope of the FFY2022 cost reporting period, and HHSC did not receive CMS approval to amend or change SPA #06-005.

ITEM NO. 4: Disallowance of Direct Medical Services Cost in the Amount of \$4,639,956.01

The HHSC-PFD disallowed our Direct Medical Services costs in the amount of \$4,639,956.01 because our IEP Ratio was adjusted retroactively pursuant to TAC §355.8843, thus decreasing our Direct Medical Services Costs allocation.

COST REPORT FORMAL APPEAL SAMPLE REPORT

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS

Houston Independent School District

Cause No. 24-0330-K March 27, 2025

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The HISD was also in compliance with the cost allocation methodology requirements of the CMS Approved State Plan Amendment (SPA #06-005) for the Texas SHARS Program, when the IEP and One-Way Trip Ratios were calculated for the FFY2022 SHARS Cost Report.

We are respectfully requesting that this allowable cost is reviewed and reinstated because TAC §355.8443 became in full force and effect as of October 1, 2022, (FFY2023), which was out of the scope of the FFY2022 cost reporting period, and HHSC did not receive CMS approval to amend or change SPA #06-005.

ITEM NO. 5: Disallowance of Transportation Services Cost in the Amount of \$473,398.13

The HHSC-PFD disallowed our Transportation Services costs in the amount of \$473,398.13 because our One-Way Trip Ratio was retroactively adjusted pursuant to TAC §355.8843, thus decreasing our Transportation Services Costs allocation.

The HISD was also in compliance with the cost allocation methodology requirements of the CMS Approved State Plan Amendment (SPA #06-005) for the Texas SHARS Program, when the IEP and One-Way Trip Ratios were calculated for the FFY2022 SHARS Cost Report.

We are respectfully requesting that this allowable cost is reviewed and reinstated because TAC §355.8443 became in full force and effect as of October 1, 2022, (FFY2023), which was out of the scope of the FFY2022 cost reporting period, and HHSC did not receive CMS approval to amend or change SPA #06-005.

ITEM NO. 6: Disallowance of \$14,015,376.39 in Direct Medical Cost Pursuant to DAB No. 3066

The Texas Health and Human Services Commission (HHSC) has adjusted the Direct Medical Percentage (DMP) by approximately 54% for the FFY2022 SHARS Cost Report, which equates to decreasing the DMP from 43.61% to 20.04%, and the corresponding statewide disallowance for all Local Education Agencies (LEA's) collectively, is estimated to be approximately \$300 million.

We are respectfully requesting that the HHSC review, recalculate, and reinstate a more equitable DMP for FFY2022.

ITEM NO. 7: Disallowance of Direct Medical Percentage (DMP) Rate from 43.61% to 20.04%

The Health and Human Services, Office of Inspector General (HHS-OIG), Centers for Medicare and Medicaid Services (CMS), and Department Appeals Board (DAB) Rulings for the FFY2011 Cost Reporting Period indicated that an effective RMTS Moment error rate of approximately 7.53% existed for the 3,161 RMTS Moments that were reviewed for the FFY2011 audit, and a corresponding statewide disallowance of \$16,287,695 was calculated by these respective federal Medicaid agencies.

The HHSC's reclassification of RMTS Moments has decreased the Direct Medical Percentage (DMP) by approximately 54% for the FFY2022 Cost Report, which significantly decreased the DMP from 43.61% to 20.04%. The HHSC reclassified RMTS Moments for Direct Service Activities, without first contacting the RMTS Participants for additional clarification of their selected activities, as is required by HHS-OIG and CMS, if statistical moments are to be changed. This vetting process is essential before statistical moments are changed to ensure that the statewide RMTS statistical sample results are statistically valid.

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS Houston Independent School District

Cause No. 24-0330-K March 27, 2025

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The Office of Management and Budget (OMB) published its "Standards and Guidelines for Statistical Survey", and in Section No. 3 - Processing and Editing of Data, Guideline 3.1.2, the OMB specifically states that the agency must adhere to the following guidelines to ensure that the statistical data sampled continues to meet high statistical confidence levels with lower standard deviations for accuracy. (See Exhibit A)

Guideline 3.1.2:

- Automated correction within specified criteria;
- 2. Data verified by respondent, and edit overridden;
- 3. Corrected data provided by respondent;
- 4. Corrected data available from other sources
- If unable to contact respondents, and after review by survey staff, an imputed value may be substituted for a failed edit; and
- 6. Data edit failure overridden after review by survey staff.

The OMB, and the HHS-OIG advise and maintain that the Time Study Respondent or Participant must always be contacted to secure the most accurate information or data that is required to edit or correct a statistical response that has been identified as needing to be edited or corrected.

<u>Contacting the Time Study Respondent is of the utmost importance</u> when editing or correcting time study responses are necessary; however, the HHSC did not contact any Random Moment Time Study (RMTS) respondents (participants) prior to reclassifying or changing time study results and/or data. Respondents were not contacted to obtain the most accurate data to clarify, change or edit any of the time study responses in the statistical RMTS.

Once school districts became aware that the HHSC had changed the results and/or responses to the RMTS, they directly contacted the HHSC about their editing process, and the HHSC did finally make available the RMTS moments that were changed. The HHSC provided school districts with the RMTS moments that were changed and if the districts wanted to provide clarification and supporting documentation to reverse the HHSC changes, then districts could do so; however, a significant number of districts did not provide any clarifications or supporting documentation to the HHSC.

- We do not believe the Random Moment Time Study (RMTS) System that is currently being
 utilized by the HHSC, accurately accounts for the DMP or amount of service delivery time and
 effort that our SHARS staff provide to our special education students.
- We do not believe that a FFY2022 DMP of 20.04% is accurate or meets a 95% Level of <u>Statistical Confidence after HHSC significantly changed the RMTS Moments</u>, and it does not reflect the percentage of time that our SHARS clinicians spend on providing personal care or other health related services to our special education students on a daily basis.

We are respectfully requesting the HHSC review, recalculate, and reinstate a more equitable DMP for FFY2022, that truly reflects the percentage of time that our SHARS clinicians provide in delivering health and health related services to our special education students on a daily basis throughout the school year.

Daily DMS Weekly DMS

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS

Houston Independent School District

Cause No. 24-0330-K March 27, 2025

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School Heatlh and Related Services Program

Direct Medical Percentage Analysis for FFY2022 - FFY2024

Direct Medical Services (DMS)

RMTS Impact: Allowable DMS Minutes Per Student Per Day

The Inconvenient Truth About RMTS and the DMP

	FFY2022 DMP 20.04%	FFY2023 DMP 28.58%	FFY2024 DMP 21.60%
SHARS Service Hours Per Service Day	8.00	8.00	8.00
Less: Daily Lunch/Break Time	1.5	1.5	1.5
Net SHARS Service Hours Per Day	6.50	6.50	6.50
(X) Times 60 Minutes Per Hour	60	60	60
(=) Total SHARS Service Minutes Per Day	390	390	390
Total Allowable DMS Minutes Per Day	78	111	84
Total Allowable DMS Minutes Per Week	391	557	421
Special Education Students Per Class	11	11	11
Allowable DMP Minues Per Student Per Day	7	10	8
Allowable DMP Minues Per Student Per Week	35	50	40

Average Direct Medical Services (DMS) Delivered Per Student

Average DMS Minutes Provided to Students: Once a Week	Minutes	Minutes
Speech Therapy Services		30
Physical or Occupational Therapy Services		10
Nursing Services		10
Average DMS Minutes Provided to Students: Daily		
Personal Care Services - PCS	_	
Toileting Services (Avg. 3/Day)	30	150
Positioning Services	15	75
Eating Services	20	100
Locomotion or Mobility Services	30	150
Transferring Services	15	75
Escorting Services	15	75
Total Personal Care Service Time	125	
Average DMS Minutes Provided to Students: Weekly		675

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS Houston Independent School District Cause No. 24-0330-K March 27, 2025

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Houston Independent School District Formal HHSC Appeal: FFY2022 SHARS Cost Report

Cause No. 24-0330-K

March 27, 2025

HOUSTON INDEPENDENT SCHOOL DISTRICT, Appellant

VS.

TEXAS HEALTH AND HUMAN SERVICES COMMISSION (HHSC),

HHSC Appeals Division
Administrative Law Judge: A. Shawn Richards (Shawn.Richards@hhs.texas.gov)

APPELLANT'S MOTION:

DEMAND FOR JUDGMENT

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS

Houston Independent School District

Cause No. 24-0330-K March 27, 2025

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APPELLANT'S MOTION: DEMAND FOR JUDGMENT

Formal Appeal Request and/or Demands to the Texas Health and Human Services Commission (HHSC)

TO THE HONORABLE ADMINISTRATIVE LAW JUDGE:

We are respectfully requesting the following demands from the HHSC:

SECTION NO. ONE CLAIM NO. ONE: FFY2022 SHARS COST REPORT ALLOCATION RATIOS

- Appellant incorporates by reference, all preceding and succeeding paragraphs disclosed in this formal appeal document.
- (2) Pursuant to 45 CFR 95.509, the CMS requires that a State Medicaid Agency must seek federal approval prior to implementing significant changes to the cost allocation formulas, methodologies, and material calculations to the cost report reconciliation process. The HHSC did not obtain CMS approval for either a new State Plan Amendment (SPA), outright, or an amendment to the current Texas SPA #06-005, as is required by CMS and the Code of Federal Regulations.
- (3) When HHSC adopted TAC §355.8443, with the new provisions to manipulate the "Numerator" of the Cost Allocation Ratios, with the parental consent criterion, we contacted the HHSC to obtain confirmation that the CMS-179 Transmittal Information was available that indicated CMS did receive and approved any changes to SPA #06-005, Attachment #4.19-B Section for the Texas EPSDT-SHARS Program. As of the date of this Formal Appeal to the HHSC, we have yet to receive any official CMS-179 Transmittal documentation from the HHSC, authorizing that CMS approved any of the significant changes to the Cost Allocation Plan (CAP) methodology for the Texas SHARS Program.

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS Houston Independent School District Cause No. 24-0330-K

Cause No. 24-0330-K March 27, 2025

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- (4) In addition to not seeking CMS approval for significant changes to the current Texas SPA #06-005, the HHSC adopted TAC §355.8443 with the new regulatory changes to become effective as of October 1, 2022, which is in the FFY2023 cost reporting period.
- (5) In addition to not seeking CMS approval for significant changes to the Texas SPA #06-005, the HHSC adopted TAC §355.8443, with the new regulatory changes to become effective as of October 1, 2022, within FFY2023. However, the HHSC improperly applied these new TAC §355.8443 retrospectively to the FFY2022 cost report reconciliation process. These changes should have never become retroactive to cost reporting periods prior to October 1, 2022, such as the FFY2022 time period.
- (6) We are respectfully requesting the HHSC set aside and resend the applicable TAC §355.8443 changes to the Cost Allocation Plan requirements that impact the methodologies and calculations of the Cost Report Allocation Ratios, specifically as they apply to the Numerator development and calculation for the IEP and One-Way Trip Ratios.

This demand is warranted because the HHSC did not obtain official authorization from the Centers for Medicare and Medicaid Services (CMS), via an official CMS-179 Transmittal to amend the CMS Approved State Plan Amendments (SPA) for CMS Transmittal No. TX-06-005 and TX-08-031, respectfully, as is required pursuant to 45 CFR 95.509.

The CMS specifically states that the State must seek federal approval to the CMS-approved Cost Allocation Methodology and that any modifications must be CMS-approved prior to implementation. The CMS requires that the State either submit a new SPA or amend the current SPA for CMS approval.

SECTION NO. TWO CLAIM NO. TWO: DIRECT MEDICAL PERCENTAGE (DMP)

 Appellant incorporates by reference, all preceding and succeeding paragraphs disclosed in this formal appeal document.

The HHSC adjusted the Direct Medical Percentage (DMP) by approximately 54% for the FFY2022 SHARS Cost Report, which equates to decreasing the DMP from 43.61% to 20.04%. The HHSC did not follow applicable OMB standards for reviewing, editing, and correcting approximately 54% of the

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS

Houston Independent School District

Cause No. 24-0330-K March 27, 2025

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Random Moment Time Study (RMTS) statistical time study moments (responses). The HHSC revisions to the FFY2022 RMTS results were so significant, that the final time study results could not possibly meet the OMB statistical accuracy standard of 95% Level of Statistical Confidence.

(2) We are respectfully requesting the HHSC review, recalculate, and reinstate a more equitable Direct Medical Percentage (DMP) Rate for FFY2022 cost report, that truly reflects the percentage of time that our SHARS clinicians provide in delivering clinical and health related services to our special education students on a daily basis throughout the school year.

We are requesting the HHSC set aside the revised 20.04% DMP. During the COVID-19 pandemic time period when statewide school closures impacted Texas school districts and the RMTS operations for FFY2020, the HHSC developed and utilized a DMP of 34.91% for the FFY2020 SHARS Cost Report. Since HHSC has significantly revised the FFY2020 RMTS moments at levels that compromised the statistical accuracy standard of 95% of Statistical Confidence, the HHSC needs to develop a DMP that is equitable at reflecting the level of direct medical services being delivered to special needs students.

The <u>Appellant</u> (HISD) respectfully requests that the Honorable Administrative Law Judge approve the claims presented in the motion. The Houston Independent School District looks forward to the opportunity to work with the Texas Health and Human Services Commission to resolve this cost report settlement matter to bring this reconciliation process for our FFY2022 Cost Report to conclusion.

Respectfully submitted by:

Appellant:

Michael Donzalez

Michael Gonzalez

Sr. Executive Director: Medicaid Finance Houston Independent School District

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS Houston Independent School District Cause No. 24-0330-K March 27, 2025

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CERTIFICATION OF DATA AND INFORMATION

Form of Disclosures and Filling:

I, Michael Gonzalez, certify that, to the best of my knowledge, the data, information, and beliefs being disclosed for the purpose of this HHSC Formal Appeal Hearing, are complete and correct as of the time it was made and/or generated:

Appellant:

Michael Donzaloz

Michael Gonzalez

Sr. Executive Director: Medicaid Finance Houston Independent School District

Date of Certification: February 14, 2025

Formal Appeal for FFY2022 Cost Report: 065727201-SHARS

Houston Independent School District

Cause No. 24-0330-K March 27, 2025

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LIST OF WITNESSES

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Formal Appeal for FFY2022 Cost Report: 065727201-SHARS Houston Independent School District

Cause No. 24-0330-K March 27, 2025

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EXHIBIT ITEMS

Exhibit A: OMB - Standards-Guidelines and Statistical-Surveys

Exhibit B: TAC §355.8443 Was In Effect for the FFY2023 Cost Report and Is

Not Retroactive to FFY2022

Exhibit C: HISD Did Meet CMS Approved Texas SPA #06-005 Requirements

for Cost Allocation Ratios

Exhibit D: Cost Allocation Methodology of TAC §355.8443 Was Not

Approved by CMS

Exhibit E: 45 CFR 95.507 Plan Requirements

45 CFR 95.509 Cost Allocation Plan Amendments and Certifications 45 CFR 95.511 Approval of the Cost Allocation Plan / Plan Amendment

45 CFR 95.517 Claims For Federal Financial Participation (FFP)

45 CFR 95.519 Cost Disallowance

Exhibit F: CMS Approved Texas State Plan Amendments (SPA)

SPA No. TX-06-05 and SPA No. TX-08-31

Exhibit G: CMS-179 Transmittal Requirements for SPA

Exhibit H: HHSC's Implementation of TAC §355.8443(c) Has Been Arbitrary

Exhibit I: HHSC Must Rescind TAC §355.8443(c) Parental Consent

Exhibit J: Fiscal Impact to Texas School Districts

Exhibit K: Request for Informal Review for FFY2022 Cost Report: 065727201

SHARS Program - Houston Independent School District (HISD)





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School Districts in Partnership to Achieve Excellence





SOUTH SAN ANTONIO ISD

SHARS PRESENTATION

School Districts in Partnership to Achieve Excellence

More Information



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