School-Based Health Services

Medicaid Billable Nursing Services
Medicaid State Codes

• State Code §18-2-5b requires county boards to maximize federal reimbursement for all services available ..... for Medicaid and related services for which state dollars are or will be expended.
• School districts are Medicaid group providers.
• School nurses paid totally with federal funds are not eligible to bill Medicaid.
• It is up to each school district to determine how to best maximize federal reimbursement through Medicaid.
WV State Plan Amendment (SPA)

- West Virginia the State Plan Amendment (effective July 1, 2014) restricts Medicaid Reimbursement billing to students who are identified as a special education student, have an active Individualized Educational Program (IEP) and medical necessity.
Medical Necessity

• Service and supplies that are:
  – Appropriate and necessary for the symptoms, diagnosis or treatment of an illness
  – Provided for the diagnosis or direct care of an illness
  – Within the standards of good practice
  – Not primarily for the convenience of the plan member or provider
  – The most appropriate level of care that can be safely provided
Medical Necessity Continued

• Must be demonstrated throughout the provision of services. Five factors are included:
  – Diagnosis (ICD-10 Codes required as of October 1, 2015)
  – Level of Functioning
  – Evidence of Clinical Stability
  – Available Support System
  – Service is the Appropriate Level of Care
Parental Consent Required

• Prior to billing for any services, districts are required to obtain parents/guardians consent to release information in regard to their child’s medical services and give permission to bill for Medicaid services. Consent is valid for one calendar year. Parents also must be provided an annual notice.
HIPAA versus FERPA

• Medical records sent to school districts fall under Family Educational Rights and Privacy Act (FERPA). FERPA allows a school system to share information with other school personnel as appropriate.

• Health Insurance Portability and Accountability Act (HIPAA) transmission of medical records electronically.
Nursing Services

• The West Virginia Bureau for Medical Services’ (BMS) School-Based Health Services Policy Manual allows registered nurses (RN) to become providers and bill for an approved list of services and assessments for students who are Medicaid eligible.

• Covered and authorized services must be rendered by enrolled providers within the scope of their license and in accordance with all state and federal regulations.
Individual Provider Enrollment

• Prior to billing, RNs are required to have a National Provider Identifier (NPI) number through the National Plan and Provider Enumeration System (NPPES). Website for NPPES is https://nppes.cms.hhs.gov/NPPES/Welcome.do. District or RESA Medicaid Specialists can help with this process.
Individual Provider Enrollment

- Prior to billing, RNs must be approved as an individual provider with Molina. Molina manages Medicaid billing for the Department of Health and Human Resources (WVDHHR). Individual providers are associated with the County/District provider number for billing purposes. The enrollment application is posted on the WVDE Medicaid website. District or RESA Medicaid Specialists can help with this process.
Licensed Practical Nurses

• LPNs are not allowed to bill for nursing services.
• LPNs are allowed to bill for specific personal care services:
  – Assistance with medication
  – Vitals
  – Catheterization
  – Medical equipment (Adaptive)
  – Range of Motion (Per Physician's Orders)
  – Can bill for 20 other areas. See Personal Care Medicaid Log Sheet for full list of activities.
Required to Bill

• IEP that includes services with a medical necessity (Specialized Nursing Services).
• Service Care Plan (Health Care Plan)
• Parent Consent
• Physician Authorization
Health Care Plan (HCP)

• WV Policy 2422.7 (§126-25A-6.1) “Standards for Basic and Specialized Health Services”, requires a Health Care Plan for all students receiving specialized health care procedures during the school day and school related events

• HCP is considered a form of Service Care Plan. The HCP is to be documented on the IEP and attached to the student’s Service Care Plan.
Nursing Services

• Assessments
  – Anaphylactic Reactions (Two events per calendar year)
  – Seizure Management (Two events per calendar year)

• Manual Resuscitation
  – (Ten events per calendar year)
Nursing Services Continued

• All of the following procedures are billed in 15 minute units. Service can be combined over multiple days within a month to create a unit.
  – Anaphylactic Reaction, Postural Drainage and Percussion, Catheterization, Mechanical Ventilator, Seizure Management, Subcutaneous Insulin Infusion-by-Pump, Measurement of Blood Sugar, Emergency Medication Administration, Oral Suctioning, Subcutaneous Insulin Infusion by Injection, Enteral Feeding, Ostomy Care, Tracheostomy Care, Oxygen Administration, Inhalation Therapy, Peak Flow Meter, Long-Term Medication Administration.
Nursing Service Documentation

- Each procedure carries specific documentation requirements.
- All procedures that require units, must include start and stop time documentation.
- All procedures require signature and credentials. Only RN credential is required on the billing form.
- All procedures require date and location of service.
- All require Health Care Plan.
- Appropriate recommendations consistent with the findings of the individual service.
- Nurses notes serve as additional documentation to support the billing form.
- Original billing forms are submitted to central office along with a copy of nursing notes. Original notes must remain available in case of an audit request.
Administration of Medicine

• Long-term medications and emergency medications are not specifically defined in the School-Based Health Services Policy Manual.

• WV Policy 2422.8 lists the following definition: “Long-term and emergency prescribed medication” means medication ordered by a licensed prescriber that is used to treat acute and chronic health conditions including both daily and PRN (as needed) medication.
Medication Continued

• Basic and Specialized Health Care Procedures Manual for West Virginia Public Schools, page S-43 defines long-term medication as “The administration of long-term medication enables students who require medication at specific times during the school day to attend school.” Page 46 defines emergency medication administration as “Emergency medication administration enables students who require medication for life-threatening emergencies to attend school.”
Medication Documentation

• When documenting minutes to determine units, all time spent completing and/or documenting the nursing “rights” of medication administration can be included.”

• Right patient, right medicine, right dose, right time, right route, right reason, right documentation and right response.

• Time completing the Medicaid billing form cannot be included.
Targeted Care Management (TCM)

• Nurses can bill for TCM.
• TCM is the coordination of services to ensure that eligible Medicaid members have access to a full array of needed services including the appropriate medical, educational or other services.
• TCM is in four main categories:
• Assessment, service plans (HCP), referral and related activities, and monitoring/follow-up activities.
TCM continued

• TCM is billed in fifteen minute units.
• Minutes can be combined across multiple days of a month to create a unit(s).
• Maximum of five units per instructional day
• Can only be billed for instructional days.
• A complete list of approved activities and purposes is available.
Speech/Audiological Services

• RNs are able to bill for two procedures on the Speech or Audiological Billing Form
  • Procedure 92567 – Tympanometry (Impedance testing). One event per calendar year is allowed which includes a completed evaluation
  • Procedure 92570 – Acoustic Immitance Testing (Includes tympanometry acoustic reflex threshold). Four events per calendar year are allowed which includes completed evaluations.
Medicaid Billing Rates

- Nursing Assessment (T1001 SE) $120.00 ($85.70)
- Manual Resuscitation (92950) $138.71 ($99.07)
- Nursing Services per unit (T1000 SE) $6.50 ($4.64)
- TCM per unit (T1017 SE) $14.35 ($10.25)
- Personal Care per unit LPN (T1019 SE) $4.00 ($2.86)
- Districts receives 71.42% of this amount directly from federal reimbursement.
Collaboration

• Nurses should be provided training on the requirements of Medicaid billing and how to complete billing forms.
• Nurses are an important part of the holistic child in the educational setting.
• Nurses providing personalized services should be invited to IEP meetings or excused via the meeting notification or excusal form.
• If the nurse cannot attend the meeting, there should be a method of submitting pertinent health care information.
• Recommend open communication between school nurses and special educators.
WVDE Medicaid Website

- Required forms, training modules, form modules, sample forms, clarifications and the WV Bureau for Medical Services’ (BMS) policy on School-Based Health Services Manual effective August 1, 2015 are all available at the following link.
- [http://wvde.state.wv.us/osp/medicaid.html](http://wvde.state.wv.us/osp/medicaid.html)
Contact Information

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