
WISCONSIN MEDICAID UPDATE

DECEMBER 14, 1995

UPDATE 95-52

TO:
Administrators of CESAs and
School Districts
Audiologists
Case Management Providers
CESAs
Child/Adolescent Day Treatment
Programs
County Departments of:
Community Programs
Human Services
Public Health
Social Services
Local Health Departments
Mental Health/AODA Clinics
Occupational Therapists
Physical Therapists
Psychologists in Private Practice
Rehabilitation Agencies
School Districts
Speech Pathologists
Speech & Hearing Clinics
Therapy Groups
Tribal Human Service Facilitators

School Based Services Benefit Added -
Effective for Dates of Service on and after July 1, 1995

Biennial Budget Adds School Based Services (SBS) Benefit

Wisconsin Act 27, Laws of 1995, the biennial budget, established a School Based Services (SBS) benefit. The benefit allows schools to bill Wisconsin Medicaid for medically necessary services provided to Medicaid-eligible children under age 21, or for any school term during which the individual became 21 years of age. This benefit is effective for dates of service on and after July 1, 1995.

Administrative rules for the benefit will be promulgated in 1996.

Because the benefit is effective retroactively, it is important that school districts and Cooperative Educational

Service Agencies (CESAs) considering billing Wisconsin Medicaid should ensure their data systems now capture all required data for services they may later bill.

The rest of this *Update* provides general information about the SBS benefit, including recordkeeping requirements on page 4.

<i>This Update</i>	<i>Page</i>
Biennial Budget Adds School Based Services (SBS) Benefit	1
SBS Provider Certification and Related Requirements	2
SBS Covered Services and Requirements	2
Communication with Other Medicaid Providers	3
Required Clinical Recordkeeping for SBS Services	4
Billing for Services Under the SBS Benefit	4
Medicaid SBS Reimbursement	5
<i>Attachments to this Update</i>	
#1 Specific Covered Services, Provider Qualifications, and Prescription Requirements	6
#2 Optional School Based Services Activity Log	10

SBS Provider Certification and Related Requirements

Any school district or CESA may become a Medicaid-certified SBS provider.

As part of the certification process, SBS providers must certify that licensed or Department of Public Instruction (DPI)-certified individuals, whether employed directly by or under contract with the school, school district or CESA, deliver services for which reimbursement is sought under Wisconsin Medicaid's SBS benefit.

Separate Medicaid certification is not required for *individuals* delivering SBS services.

School districts and CESAs interested in billing Wisconsin Medicaid for services not included in the SBS benefit, including HealthCheck, must become separately certified by Wisconsin Medicaid to bill for these services. Providers certified for more than one Medicaid service (e.g., SBS and HealthCheck) may not bill twice for the same service provided on the same date to the same child.

Wisconsin Medicaid will notify school districts and CESAs when they can request and submit certification applications as SBS providers.

SBS Covered Services and Requirements

Covered Services Under the SBS Benefit

The following general service categories are covered under the SBS benefit when identified in the child's Individualized Education Program (IEP) or Individualized Family Service Program (IFSP) and certain requirements listed elsewhere are met:

1. speech, language, audiology and hearing

2. occupational therapy
3. physical therapy
4. nursing
5. psychological services, counseling and social work
6. developmental testing, assessments, monitoring and coordination of services under the Individuals with Disabilities Education Act (IDEA)
7. transportation
8. certain durable medical equipment

Attachment 1 contains detailed information about specific covered services, qualifications of individuals delivering services, and prescription requirements.

Covered Services Under the SBS Benefit Must Be Medically Necessary

All services covered by Wisconsin Medicaid must be medically necessary [Wis. Admin. Code, 1.01 (96m)]. A SBS service is medically necessary when the service meets the following conditions:

- ✓ identifies, treats, manages, or addresses a medical problem, or a mental, emotional or physical disability
- ✓ is identified in an IEP or IFSP
- ✓ is necessary for a child to benefit from special education
- ✓ is referred or prescribed by a physician. Certain services may also be prescribed by a nurse practitioner with prescribing authority, or a Ph.D. psychologist where appropriate and as specifically identified in Attachment 1. (The referral or prescription must be updated at least annually.)

Services Not Covered Under the SBS Benefit

The following services are *not* covered by Wisconsin Medicaid under the SBS benefit:

1. art, music and recreational therapies
2. services that are strictly educational, vocational or pre-vocational in nature, or without a defined medical component: e.g., vocabulary development, specialized (adaptive) physical education, rote learning skills (counting, name printing, coin labeling), and any service that is not child-specific
3. services performed by school districts and CESAs not specifically certified as a Medicaid SBS provider

Treatment Goals and Care Plan

Treatment goals identified in the child's care plan must be measurable and outcome-oriented for the resulting services to be covered by Wisconsin Medicaid.

When treatment goals identified in the IEP/FSP are measurable and outcome-oriented, the IEP/IFSP will be considered the care plan. Otherwise, a separate care plan must be developed that meets Wisconsin Medicaid's requirements.

Group Therapy, Psychological, Counseling and Social Work Services

Medically necessary therapy, psychological, counseling and social work services may be delivered in a group setting when appropriate. See Attachment 1 for group size limitations.

Medical Equipment

Medical equipment is covered under the SBS benefit when all of the following conditions are met:

- ✓ The need for the equipment is identified in the IEP/IFSP.
- ✓ The equipment is child specific.

- ✓ The child uses the equipment at school *and* home when appropriate (the recipient owns the equipment, not the school, school district, or CESA).

Communication with Other Medicaid Providers

When a child receives similar Medicaid-covered services from SBS providers *and* non-SBS providers* for similar services (e.g., physical therapy or nursing), these providers *must* communicate with each other for all the following reasons:

- ▶ assure service coordination
- ▶ avoid duplication of services
- ▶ facilitate continuity of care

To assure communication occurs, Wisconsin Medicaid requires SBS providers to:

- ✓ Sign joint Memorandums of Understanding (MOUs) with HMOs serving their areas. MOUs are legal documents that set standards, policies, and procedures to help coordinate care and avoid duplication of services.
- ✓ When a child receives services from a Medicaid fee-for-service provider *and* an SBS provider, the SBS provider must do each of the following:
 - Document regular contacts with fee-for-service providers, at least annually, as appropriate for each child.
 - Cooperate with Medicaid fee-for-service providers who request copies of the child's IEP, IFSP, or components of the multidisciplinary team (M-Team) evaluation.

*Non-school Medicaid providers include: Medicaid Health Maintenance Organizations (HMOs), and fee-for-service providers such as physician clinics, rehabilitation agencies, local

health departments, community mental health agencies, tribal health agencies, home care agencies, and therapists.

Required Clinical Record-keeping for SBS Services

Certified SBS providers are required to keep all of the following minimum information in the child's record:

- ✓ the child's first and last name, and date of birth
- ✓ the prescription or referral for the service (based on the requirements identified in Attachment 1)
- ✓ all documentation used to develop IEP or IFSP (M-Team reports, tests, etc.)
- ✓ the annual IEP or IFSP revision documenting the child's progress toward the treatment goals, changes in physical or mental status, and changes in the treatment plan (not required for transportation)

When a service is delivered, indicate all of the following:

- ✓ the date of service
- ✓ the general service category provided (e.g., nursing, physical therapy)
- ✓ a brief description of the specific service provided (e.g., ADL buttoning skills; ROM elbow, wrist; medication management; parent/teacher consultation; IEP/IFSP case management)
- ✓ the unit of service delivered
 - service time for professional services, such as 15 minutes (include time spent on face-to-face services, preparation, paperwork, consultation, and IEP/IFSP case management)

- quantity of equipment
- miles for transportation

- ✓ a description of each equipment item with sufficient detail to allow Wisconsin Medicaid determine the reimbursement rate [include the manufacturer's item description (e.g., name and model number), and the cost (e.g., invoice or receipt)]
- ✓ whether the procedure was provided in a group or individual setting
- ✓ a brief description of the child's response to the service and progress (e.g., increased left knee ext. to -5); not required for transportation, consultation and IEP/IFSP case management
- ✓ the service provider's signature

Activity Log

Attachment 2 is an optional SBS Activity Log. Providers may use it to record the required clinical information for SBS services.

The Activity Log may also help manage the flow of clinical information required to bill Wisconsin Medicaid. For example, the completed log may be forwarded each month to staff responsible for submitting claims to Wisconsin Medicaid.

Billing for Services Under the SBS Benefit

Providers may request reimbursement from Wisconsin Medicaid for covered SBS services for dates of service on and after July 1, 1995. SBS services billed retroactively must meet Medicaid's coverage, record-keeping and other requirements.

School districts and CESAs intending to bill under the SBS benefit should ensure their data systems capture the required data, including:

- ✓ the required clinical and other record-keeping information (see the section on clinical recordkeeping)
- ✓ the recipient's Medicaid identification number

CESAs and school districts certified by Wisconsin Medicaid as SBS providers will receive a provider billing number and complete billing instructions.

Medicaid SBS Reimbursement

Wisconsin Medicaid Will Set Rates for SBS Procedures

Wisconsin Medicaid will set reimbursement rates for SBS procedures based on actual cost data provided by the DPI.

Along with cost data and related information now collected by DPI, some school districts and CESAs will be asked to complete brief surveys. These surveys will give Wisconsin Medicaid additional information for setting SBS procedures reimbursement rates.

Medicaid Reimbursement for SBS Services

Under the biennial budget, SBS providers receive 36% of Wisconsin Medicaid's reimbursement rate for SBS procedures.

Providers must certify that the 40% local "match" is in the SBS provider's budget. The table shows the breakdown of reimbursement dollars.

School based services will not enter into maintenance of effort computations for the federal Department of Education programs.

Source of Funds	Distribution of Funds
60% New Federal Dollars	60% of Federal Dollars go to SBS Providers (school districts and CESAs); this represents 36% of Wisconsin Medicaid's SBS reimbursement rate for procedures billed to Wisconsin Medicaid
	40% of Federal Dollars go to State General Fund; this represents 24% of Wisconsin Medicaid's SBS reimbursement rate for procedures billed to Wisconsin Medicaid
40% Local Match Dollars (money currently in the school district or CESA budget)	All local match dollars must be non-federal funds documented in the school district or CESA budget

SBS BENEFIT

SPECIFIC COVERED SERVICES, PROVIDER QUALIFICATIONS, AND PRESCRIPTION REQUIREMENTS

Speech, Language, Audiology and Hearing

Covered SBS IEP/IFSP speech, language, hearing and audiological services are for individuals with speech, language, or hearing disorders that adversely affect the individual's functioning.

Services include:

- ✓ evaluation and testing to determine the individual's need for these services and recommendations for a course of treatment; treatment; consultation; and IEP/IFSP case management services
- ✓ individual or group therapy or treatment in groups of 2 to 7 individuals
- ✓ medical equipment identified in the IEP or IFSP intended for only one child for use at school *and* home

Provider qualifications:

These services are performed by or under the direction of a DPI-certified speech pathologist or by an audiologist.

Prescription requirements:

These services must have a physician referral and be identified in an IEP or IFSP for coverage by Wisconsin Medicaid.

Occupational Therapy

Covered SBS IEP/IFSP occupational therapy services are to identify, treat, rehabilitate, restore, improve or compensate for medical problems that interfere with age appropriate functional performance.

Services include:

- ✓ evaluation and reevaluation; recommendations for a course of treatment; rehabilitative, active, or restorative treatment services; consultations; and IEP/IFSP case management
- ✓ individual or group therapy or treatment in groups of 2 to 7 individuals
- ✓ medical equipment identified in the IEP or IFSP intended for only one child for use at school *and* home

Provider qualifications:

These services are performed by or under the direction of a DPI-certified occupational therapist.

Prescription requirements:

These services must be prescribed by a physician and identified in an IEP or IFSP for coverage by Wisconsin Medicaid.

Attachment 1 (Continued)

Physical Therapy

Covered SBS IEP/IFSP physical therapy services identify, treat, rehabilitate, restore, improve or compensate for medical problems.

Services include:

- ✓ evaluations to determine an individual's need for physical therapy; recommendations for a course of treatment; therapeutic exercises and rehabilitative procedures; consultations; and IEP/IFSP case management services
- ✓ individual or group therapy or treatment in groups of 2 to 7 individuals
- ✓ medical equipment identified in the IEP or IFSP intended for only one child for use at school *and* home

Provider qualifications:

These services are performed by or under the direction of a DPI-certified physical therapist.

Prescription requirements:

These services must be prescribed by a physician and identified in an IEP or IFSP for coverage by Wisconsin Medicaid.

Nursing

Covered SBS IEP/IFSP professional nursing services relevant to the recipient's medical needs.

Services include, but are not limited to:

- ✓ evaluation and management services, including screens and referrals for health needs; treatment and other measures; medication management; explanations of treatments, therapies and physical or mental conditions with family or school staff; consultations; and IEP/IFSP case management
- ✓ medical equipment identified in the IEP or IFSP intended for only one child for use at home *and* school

Provider qualifications:

These services are performed by a registered nurse, licensed practical nurse, or are delegated under nursing protocols.

Prescription requirements:

These services are prescribed or recommended by a physician or advance practice nurse with prescribing authority, and must be identified in an IEP or IFSP for coverage by Wisconsin Medicaid.

Attachment 1 (Continued)

Psychological, Counseling and Social Work

Covered SBS IEP/IFSP psychological, counseling, and social work services include diagnostic or active treatments with the intent to reasonably improve the recipient's physical or mental condition.

Services include:

- ✓ IEP/IFSP diagnostic testing and evaluation that appraises cognitive, emotional, and social functioning and self-concept; therapy and treatment that plans, manages, and provides a program, or psychological, counseling or social work services to individuals with psychological or behavioral problems; crisis intervention; consultation; and IEP/IFSP case management
- ✓ treatment, psychological counseling and social work services to individuals or groups of 2-10 individuals

Provider qualifications:

These services are performed by a DPI-certified school psychologist, school counselor, or school social work staff.

Prescription requirements:

These services are prescribed or referred by a physician or licensed Ph.D. psychologist and must be identified in an IEP or IFSP for coverage by Wisconsin Medicaid.

Other Developmental Testing, Assessments, and IEP/IFSP Case Management Services

Covered SBS IEP/IFSP testing, assessments and case management services performed by therapists, psychologists, social workers, counselors and nurses are included in the SBS covered services for their respective professional areas, as described in the specific service categories. Wisconsin Medicaid also covers SBS IEP/IFSP developmental testing, assessments, consultations, and IEP/IFSP case management services performed by other school staff, as described below:

Services include:

- ✓ Evaluations, tests and related activities performed to determine if motor, speech, language, or psychological problems exist, or to detect developmental lags in the determination of eligibility under IDEA; consultations
- ✓ IEP/IFSP case management services

Provider qualifications:

These services are performed by a licensed physician or psychiatrist, director of special education and/or pupil services, special education teacher, diagnostic teacher, or other certified school staff.

Prescription requirements:

Testing, assessments, and IEP/IFSP case management are covered only when an IEP/IFSP results from the tests and assessments; a separate prescription or referral is not required.

Attachment 1 (Continued)

Transportation

Covered transportation services are provided to individuals who require special transportation accommodations in vehicles equipped with a ramp or lift; where the need for special transport is identified as a needed service in the child's IEP or IFSP; and the child will receive a Wisconsin Medicaid-covered service on the day transportation is provided.

Services include:

- ✓ transportation from the child's home to and from school on the same day an SBS service is provided in the school
- ✓ transportation from school to a service site and back to school or home if the SBS service is provided at a non-school location, such as a hospital

Provider qualifications:

These services are performed by a school or contracted provider using vehicles equipped with a ramp or lift.

Prescription requirements:

A prescription from a physician or nurse practitioner with prescribing authority is required to demonstrate the child's need for special transportation. The service must be included in the IEP or IFSP. The covered service that the child is transported to must meet Wisconsin Medicaid's requirements for that service.

