



# Medicaid School-Based Services Guidance for Back-to-School 2020

August 3, 2020

The purpose of this document is to provide ongoing and updated information regarding the implementation of and billing for Medicaid School-Based Services (SBS) as schools reopen for Fall 2020 after soft-closures resulting from the COVID-19 pandemic. Listed below are various questions and answers on topics that provide updated and/or new guidance since the last version of the Medicaid SBS COVID-19 Q & A was published. This Q & A has been revised to align with guidance from the [Idaho Back to School Framework 2020 \(Framework\)](#), a joint document from the Governor, the State Board of Education, the Department of Education and the Department of Health and Welfare. The Framework outlines statewide expectations, guidelines and best practices to ensure a safe and successful 2020-21 school year.

This Q & A reflects those questions and answers which are most relevant for Idaho school districts as they begin the re-entry process of providing services in the school setting. If there are particular questions and answers which are not reflected in this document but were in previous versions of this Q & A, please refer to the Medicaid SBS Q & A updated May 19, 2020.

Guidance provided in version 8 of the *Guidelines for Providing Medicaid School-Based Services During the COVID-19 Pandemic* address issues related to soft school closures and is still relevant. Although the term “soft-closure” is no longer relevant based on the guidance contained in the [Idaho Back to School Framework 2020 \(Framework\)](#), the guidance and flexibility allowed during soft-closures remains relevant as long as the national public health emergency remains in effect. As LEAs develop and implement their reopening plans, instruction will be delivered in a traditional, hybrid/blended, or full distance/remote learning models.

This document will be updated as new questions arise and/or information needs to be updated. Please submit additional questions and concerns using the [online Clarification form](#).

**NOTE: The guidance provided in this document is only allowable during the COVID-19 event.**

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## SECTION 1: DURATION OF FLEXIBILITY

### 1. Duration of Flexibility

#### **1.1. How long will the guidance outlined in version 8 of the *Guidelines for Providing Medicaid School-Based Services During the COVID-19 Pandemic* and this Q & A document, including any COVID-19 related flexibilities, remain in effect?**

Unfortunately, there is not a direct answer to this question. The answer to this question depends on the status of the national public health emergency, guidance from our federal partners [the Center for Medicare and Medicaid (CMS)], and any executive orders issued by Governor Little. The Division of Medicaid will work with the SDE to notify LEAs when there are changes to COVID-19 related guidance as soon as information becomes available.

#### **1.2. I notice there are some temporary rules dated (3-13-20) T due to COVID-19. How long will these temporary rules remain in effect?**

The temporary rules due to COVID-19 published in the [Idaho Administrative Bulletin, April 1, 2020 – Vol. 20-4](#) will expire sine die 2021, as long as the Legislature does not extend the rules.

#### **1.3. How long will the increase in Federal Medicaid Assistance Percentages (FMAP) be in effect?**

The FMAP increase will remain in effect until the end of the quarter in which the national public health emergency is lifted.

#### **1.4. How long will COVID-19 related Telehealth flexibilities remain in effect?**

A specific end date for COVID-19 related Telehealth flexibilities has not been identified. For now, all COVID-19 related Telehealth flexibilities remain in effect. The Division of Medicaid will work with the SDE to notify LEAs when there are changes to COVID-19 related Telehealth flexibilities.

## **SECTION 2: DOCUMENTATION**

### **2. Documentation considerations during reopening of schools**

#### **2.1. What documentation is required if an LEA will provide Medicaid SBS via Telehealth to students receiving services under a hybrid/blended or full distance/remote learning model?**

Telehealth is considered a mode of service delivery, not a location. Therefore, Medicaid does not require that Telehealth be documented in a student's IEP. However, the service detail report (SDR) must document when services are delivered via Telehealth. The *GT modifier* must be used, in addition to the CPT/HCPCS code and any applicable modifier, when services are provided via Telehealth to ensure accurate billing. (For example: When billing for BI provided by an Intervention Specialist via Telehealth, use H0004 HNGT.) Although Telehealth does not need to be identified on the IEP for Medicaid purposes, it will be important for IEP teams to discuss and document the use of Telehealth services when applicable.

#### **2.2. How should LEAs document the provision of compensatory/recovery services (referred to as compensatory education in previous guidance documents) for Medicaid?**

Since decisions regarding compensatory/recovery services are made by the IEP team, any compensatory/recovery services for which an LEA would seek Medicaid reimbursement must be clearly outlined in the student's IEP as per [IDAPA 16.03.09.854.01.a-d](#) (p. 129).

#### **2.3. What are the requirements for the physician recommendation/referral for SBS now that schools are reopening?**

The physician recommendation/referral requirement was updated and posted in the [Idaho Administrative Bulletin, April 1, 2020 – Vol. 20-4](#). This temporary rule removes the requirement for the physician recommendation/referral to be obtained every 365 days. Best practice suggests that the LEA should continue to obtain the physician recommendation/referral every 365 days. The temporary rule was put in place to prevent any gaps in service due to COVID-19 circumstances. See question 1.2 regarding when this temporary rule expires.

If an LEA will be seeking reimbursement for a student who is new to Medicaid SBS, then the physician recommendation/referral is required and the 30-day look back rule applies.

## SECTION 3: ASSESSMENT & EVALUATION

### 3. Assessments and evaluations during reopening of schools

#### **3.1. How quickly should LEAs complete postponed assessments and evaluations once schools reopen?**

The assessment and evaluation requirements were updated and posted in the [Idaho Administrative Bulletin, April 1, 2020 – Vol. 20-4](#). This temporary rule removes the requirement for an assessment or evaluation to be completed annually. Best practice suggests that the LEA should complete any Medicaid SBS assessments or evaluations older than 365 days as soon as reasonably possible. This allows the LEA to stagger the Medicaid required assessments and evaluations for students whose assessments and evaluations are older than 365 days.

## SECTION 4: CONTRACTING WITH COMMUNITY PROVIDERS/AGENCIES

### 4. Contractions with Community Providers/Agencies

#### **4.1. Can an LEA contract with a community-based provider/agency to provide Medicaid SBS for those students who will receive their educational services via a hybrid/blended or full distance/remote learning model?**

Yes, it is acceptable for an LEA to contract with a community-based provider/agency to provide Medicaid SBS for those students who will receive their educational services. The LEA is required to bill for such services, the community-based provider may not seek reimbursement directly from Medicaid. If the LEA chooses to contract with a community-based provider/agency, it is important for community-based providers/agencies that Medicaid SBS differ from community-based services in that SBS are health-related and rehabilitative services provided to allow/support a student to access their educational program. Medicaid will not reimburse for educational services; they will only reimburse for health-related and rehabilitative services provided to allow/support a student to access their educational program.

**4.2. What if a student is a)receiving Medicaid SBS via a hybrid/blended or full distance/remote learning model from an LEA-contracted community provider/agency and b) receiving community-based services delivered by the same provider?**

If a student is receiving Medicaid SBS via a hybrid/blended or full distance/remote learning model from an LEA-contracted community-based provider/agency and receiving community-based services delivered by the same provider, the LEA-contracted community provider must differentiate between the school-based and community-based services. The LEA will seek reimbursement for any SBS provided by the community provider and the community provider/agency will seek reimbursement for the community-based services.

The LEA must ensure that the documentation produced by the LEA-contracted community provider meets all Medicaid SBS requirements prior to seeking reimbursement. The LEA is required to keep all documentation for 5 years.

*It will be important for School-Based and Community-Based providers to coordinate their services with each other and with the families with whom they are working.*

## **SECTION 5: SERVICE LOCATIONS AND TIMES**

### 5. Services Locations and Times

**5.1. Where can LEAs provide Medicaid SBS if they reopen schools in a hybrid/blended or full distance/remote learning model?**

LEAs can provide Medicaid SBS in a school building, a student's home or other community location, or via Telehealth, *within Telehealth requirements.* *It will be up to the student's IEP team to determine the appropriate location for the delivery of IEP services* that are

reimbursable under Medicaid based on the student’s LRE and the LEA’s procedures regarding expectations, guidelines, and best practices for the provision of educational services to all students. IEP teams should work closely with parents to make decisions regarding in-home services and document discussions/decisions in the Written Notice. The service provider must indicate the location where the service occurred, including Telehealth, on the service detail report (SDR).

**5.2. What place of service (POS) codes should be used when billing for Medicaid SBS provided under a hybrid/blended or full distance/remote learning model?**

Regardless of the physical location where the student receives a service, LEAs should continue to use the POS identified on the IEP: either POS 03-School or POS 99-Other. Do not use any other POS codes for Medicaid SBS. Keep in mind that Telehealth is a mode of service delivery, not a location.

**5.3. Can an LEA or an LEA-contracted community provider/agency deliver Medicaid SBS outside of what is normally considered the “typical school day” for those students who will receive their educational services via a traditional model? For example, during evening hours and/or weekends.**

No. LEAs that reopen schools under the traditional model must provide Medicaid SBS within the typical school day. This applies to LEA providers and LEA-contracted community providers/agencies.

**5.4. Can an LEA deliver Medicaid SBS outside of what is normally considered the “typical school day” for those students who will receive their educational services via a hybrid/blended or full distance/remote learning model? For example, during evening hours and/or weekends.**

Yes, Medicaid SBS delivered to students using a hybrid/blended or full distance/remote learning model that are necessary to support the student’s access to instruction are not restricted to what would normally be considered a “typical school day.” However, *it will be up to the IEP team to determine the time during which services will be delivered.* The school district provider must comply with LEA guidelines and procedures and work with the student’s parent(s)/guardian(s) to schedule School-Based Services during a mutually agreeable time, which may include evening or weekend hours.

**5.5. Can an LEA-contracted community provider/agency provide Medicaid SBS via a hybrid/blended or full distance/remote learning mode outside of the “typical school day?”**

Yes, an LEA-contracted community provider/agency may provide Medicaid SBS delivered to students using a hybrid/blended or full distance/remote learning model that are necessary to support the student’s access to instruction outside of what would normally be considered a “typical school day.” However, *it will be up to the IEP team to determine the time during which services will be delivered.* The LEA-contracted community provider/agency must comply with LEA guidelines and procedures and work with the student’s parent(s)/guardian(s) to schedule School-Based Services during a mutually agreeable time, which may include evening or weekend hours.

*It will be important for School-Based and Community-Based providers to coordinate their services with each other and with the families with whom they are working.*

#### **5.6. Can Medicaid SBS, including BI and CBRS be provided to students in their homes while a student attends school under a hybrid/blended or full distance/remote learning model?**

Yes, if the LEA is open under a hybrid/blended or full distance/remote learning model and *the IEP team determines that in-home services are appropriate.* Parents may determine that in-home services could jeopardize the health, safety, and well-being of their child. *IEP teams should work closely with parents to make decisions regarding in-home services and document discussions/decisions in the Written Notice.*

Medicaid will reimburse for BI and CBRS services provided to students in their homes while students participate in online/virtual instruction, as long as doing so does not jeopardize the health, safety, and well-being of students or staff. See question 1.4 for more information.

## **RESOURCES**

[COVID-19 and HIPAA guidance from the US Department of Health and Human Services](#)

[Current School-Based Services Fee Schedule](#)

[FAQs on HIPPA and Telehealth – PDF](#)

[Idaho Department of Health and Welfare Information Releases](#)

[IDAPA 16.03.09 Medicaid Basic Plan Benefits](#)

[MA20-07 - COVID-19 Telehealth - Updated April 7, 2020](#)

[MA20-13 – COVID-19 Telehealth HIPAA Guidance](#)

[MA20-14 – COVID-19 Therapy Services Telehealth](#)

[MA20-20 – COVID-19 Guidance for CHIS, Children’s DD, and School-Based Services](#)

[Q & A COVID-19 Guidance \(OSEP 3/20\), Q/A A-1](#)

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**Please send additional questions to:**

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