

MEDICAID CLAIMING 2018

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Introductions

Julie Jilek, Speaker

*Asst. Superintendent, CSBO Northwest Suburban
Special Education Organization*

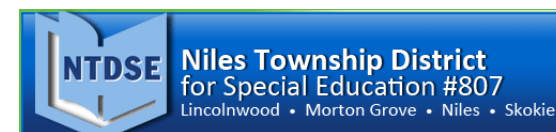
www.nsseo.org



Kathy Gavin, Speaker

*Director of Fiscal Svc. CSBO Niles Township District for
Special Education 807*

www.ntdse.org



Gus Brecht, Speaker

President, Brecht's Database Solutions, Inc

www.outreachtime.com



Basic Facts

- IDEA
 - Individuals with Disabilities Education Act
- MEDICAID
 - Jointly funded health insurance program
 - School Based Services
 - Reimbursement to schools for services given to students with special needs under IDEA

2 Streams

FEE FOR SERVICE

Allows for Medicaid reimbursement for health-related services provided to eligible individuals who are receiving special education services.

ADMIN OUTREACH

Allows districts to receive partial reimbursement for the administrative costs related to the identification and assistance of students who are considered at-risk and in need of service.

Medicaid Admin Claiming

FEDERAL reimbursement to state and local agencies for activities related to administration of the State's Medicaid plan.

MONEY for:

- Medical and health related outreach
- Case management
- Admin activities related to the delivery of services
- Coordinating, assisting, referring access to Medicaid related services



Administrative Outreach

- **RANDOM MOMENT IN TIME** through Fairbanks, LLC
(Contracted by Healthcare and Family Services)
- Random moments sampled throughout the quarter. A moment represents one minutes at a particular time
- Results of this study determine reimbursement rates for activities



How Does It Work?

- 4 Quarters
 - October, January, April, July
- Staff are selected for *Random Moments in Time*
- Notification of time and date
 - They log on and answer 4 SIMPLE questions



QUICK AND EASY!

Who Does It?

- AUDIOLOGIST
- REGISTERED NURSE
- OCCUPATIONAL THERAPIST OR OT ASSISTANT
- PHYSICAL THERAPIST OR PT ASSISTANT
- MEDICAL SOCIAL WORKER
- SCHOOL PSYCHOLOGIST
- SPEECH/LANGUAGE THERAPIST OR SPEECH ASSISTANT
- LIC. PRACTICAL NURSE
- SCHOOL SOCIAL WORKERS
- INTERPRETERS
- CASE MANAGERS AND SERVICE COORDINATORS
- TEMPORARY RELATED SVC STAFF COVERING A LEAVE OF ABSENCE



Business Office Duties

Collect all of the special education expenditure data needed for the claim

PLAN AHEAD

- Before the quarter starts, identify all of your positions that qualify and the employees assigned to those positions
- Identify the expenditures that will be needed for the claim
- Fairbanks has a “cheat sheet” that explains what is reportable

100 Salaries



SALARY EXPENDITURES (LESS FEDERAL FUNDS)

- As the quarter unfolds, keep track of changes in personnel assigned to these positions
- Claimable expenditures are “Position Specific” **NOT** “Person Specific”
 - This includes subs and contracted workers that deliver a related service
 - You can claim the expenses of any employee paid during a leave of absence (maternity, medical, family, disability)

200 Employer Paid Benefits

- Retirement (TRS or IMRF)
- OASDI
- Medicare
- Health
- Dental
- Vision
- Life



100 and 200 District Wide

- Salaries and Benefits
 - Full time and Part time
 - Admin, office, custodial, etc.
 - Include any contracted service staff
 - **Not just special ed. salaries and benefits**
 - *Run payroll reports as back up to support your claim*
 - ***SAVE THEM!***

Insurance Expenditures

You also report costs for some insurance things:

- LIABILITY
- VEHICLE
- PUPIL TRANSPORTATION
- WORKERS' COMP
- UNEMPLOYMENT



- *Not Property or Casualty insurance*
- *Not employee benefits (**Don't double report!**)*

Additional Expenditures

- Rentals/Leases

- Bus
- Buildings
- Facilities Equipment
 - Non-Data Processing

NOT ALLOWED:

- Computers
- Daily Operating Expenses
- Purchased Services
- Repairs/Maintenance Agreements

- Interest Payments

- Bond Interest, If associated with acquisition, reconstruction, remodeling, or for purchase of equipment

NOT ALLOWED:

- Payments on Principal Amount of the Bond

Fairbanks Time Study Statistical Data

Additional Info You Will Need

- REV Costs
- Total # of Students
 - (Dec 1 Child Count – ISBE Website)
- Total # of Students with IEPs
 - Fall Enrollment Count

www.isbe.net/research/htmls/fall_housing.htm
- LEA 1-2-3 Counts
 - Auto Filled by HFS – “All Students” Fields
 - District Enters the Amount for IEP Student Fields





Summary of Admin Outreach Process

- You gather the financial information
- Enter the claim
 - www.fairbanksllc.com
- Call to get started
 - 888.321.1225
- Fairbanks processes the claims 4X a year



Fee For Service

Why Is It Important To Schools?

- Schools receive MONEY!!
- Fee for Service (Direct Service Claiming) allows schools to obtain federal Medicaid reimbursement for health related services provided to special education students who are enrolled in the Medicaid program.



Plainly Speaking, This Means...

- ***Federal*** reimbursement for direct therapy services
- These services are necessary for development of the IEP or are specified as necessary in the IEP
- When Medicaid eligible students receive these services, the services are eligible for federal Medicaid reimbursement
- **Audiology**
- **Physical Therapy**
- **Developmental Assessments**
- **Speech Therapy**
- **Social Work**
- **Medical Equipment, Services and Supplies**
- **Psychologist Services**
- **Occupational Therapy**
- **Nursing Services**
- **Health Aide Services**
- **Transportation**

Parental Consent



- You must get a **ONE TIME** signature to grant parental consent to release confidential information and to allow the District to bill Medicaid for services given to their child.
- **Districts must provide annual notifications to parents regarding their rights** (such as the following):

It is necessary that the district ("the School") obtain your written permission to release information to Medicaid. This permission must be obtained prior to the School before releasing your child's personal information from educational records for billing purposes to a public benefits or insurance program. Medicaid requires documentation of the services our staff provided prior to making payment to the School. You have the right to withdraw consent at any time. Your child's free appropriate education and related services will continue regardless of consent, refusal of consent, or withdrawal. Please refer to Release of Information/ Consent to Bill Medicaid for further information.

When A Child Moves...

- Consent must be kept on file with the claiming District
- According to the Dept. Of Ed, Consent to Bill Medicaid is valid from the date of the signature on the consent to bill form. The one-time signature is valid for the duration the student is at one district. **If a student transfers to a NEW district, the NEW district must obtain a NEW signed Consent to Bill Medicaid form.**



Info To Share With Parent/Guardian

- Schools routinely access Medicaid funding to help meet the costs of providing special education services
- Permission **does not** reduce student's ability to access services outside of school
- It **does not** decrease lifetime coverage, increase their premiums or lead to discontinuation of benefits by maxing their limits
- They can withdraw consent at any time



Speech Referral

- HFS updated the U-200 Manual for LEAs in Dec, 2014 to include a Speech referral requirement to bill Medicaid for Speech Services. The referral can be made by a physician or other licensed practitioner of the healing arts acting within the scope of practice.
- On Oct 18, 2016, HFS provided clarification as to who was considered licensed practitioner of the healing arts.
- Examples of other licensed practitioners that can refer speech services in the school setting include, but are not limited to, physician assistants, advanced practice nurses, clinical psychologists, speech-language pathologists or individuals with a Professional Educator License (PEL) endorsed in School Psychology or Speech Language Pathology.
- The referral of services provided in the school setting are subject to provisions of the Health Care Worker and Self-Referral Act.



NPI

National Plan and Provider Enumeration System (NPPES)

- In 1996 HIPPA mandates the adoption of standard unique identifiers for healthcare providers and plans
- Purpose: To improve efficiency and effectiveness of electronic transmission of health information
- CMS developed NPPES to assign unique identifiers

IMPACT

- **IMPACT** replaces State's Medicaid Management Information System (MMIS) in 2018
- New web based system will :
 - Improve the Medicaid claiming process
 - Improve the verification of eligibility system
 - Provide a single system for claiming....streamlined process
 - Providers in districts need to register in IMPACT

IMPACT

- Modernization of MMIS to meet the federal regulations of ACA
- Must enroll and revalidate through the IMPACT web portal
- Medicaid accounts were made inactive after Feb 1, 2017 if districts did not re-validate or enroll as a new provider by this date

NPI + IMPACT

- OT, PT and SLP services are affected by this mandate
- Scripts and referrals must have the referring or prescribing provider's NPI # associated with the document to be claimable
- 1 SLP per district can register for NPI and IMPACT to sign other SLP referrals

Internal Medicaid Audits

- It is recommended by the OIG for LEAs to perform ongoing education of staff and conduct internal reviews of documentation and services provided
- Errors found from previous federal OIG audits include:
 - Missing / Insufficient Documentation
 - Service not on IEP, Student not Present on Date of Service, etc.
 - Procedure Coding Errors
 - Medically Unnecessary Services
 - Services Rendered by Excluded Provider



Services Medicaid Billing Facilitators May Offer



- Submit Claims to HFS on behalf of the district
- Submit Transportation Claims to HFS on behalf of district
- Help district interpret remittance advice, check remittance advice for errors, and resubmit valid corrected claims for reimbursement
- Provide guidance on timelines for maintaining remittance advice and record keeping
- Create HFS payment summary by provider type to assist district in evaluating and maximizing their reimbursement opportunity
- Help district evaluate the accuracy and appropriateness of billing
- Improve audit readiness

Vendor: Guidance and Consultation

- Clarify the billing process
- Outline appropriate billing procedures
- Provide up to date guidance on Federal and State mandates
- Correspond with State representative to clarify changes and updates to State Medicaid Plan
- Provide literature and training materials for staff
- Help staff to monitor individual billing accuracy
- Improve audit readiness



Possible Additional Vendor Services

- Medicaid eligibility look-ups
- LEA 1, 2, & 3 count breakouts
- Help with cost calculation worksheets
- Guidance for use of Federal funds
- Tracking of parental consent
- Tracking of OT and PT scripts and speech referrals
- The LEA must verify that no practitioner providing services has been terminated, suspended, or barred from the Medicaid or the Medicare program. The lists of terminated, suspended, and barred practitioners can be found on the <http://state.il.us/agency/oig/sanctionlist.asp> and <http://exclusions.oig.hhs.gov/> web pages. Both lists must be queried to obtain a complete list of terminated, suspended, or barred providers.



Rate Setting

- Annual Data Collection (March, 2017 was for the 15-16 SY)
- Info you will need
 - Total FTE for each related service paid in the previous year
 - Total Annual Hours required to **work**
 - (FTE Hours/Day x Days/Year)
 - All Salaries and Benefits for service providers included contracted services
 - Amount paid with federal funds
 - Supplies for Provision of the Service provided
 - Creditable Earnings Reported (**in total**) to TRS – related to their “role”
 - ZERO for IMRF Staff
 - Do not report “other” stipends such as coaching, recess duty, club monitors, etc.
 - Member TRS Contributions (9.0%)
 - Employer Contributions for Member Increases (.58%)
 - Employer TRS Contributions on Federally Funded Salaries (Source - TRS Annual Report)

Fairbanks/Medicaid Cost Calculation Data



[Dashboard](#)
[Participant List](#)
[Time Study Sample](#)
[Financial Submission](#)
[FFS Rate](#)
[Manage](#)

Rate Report: 07/01/2015 through 06/30/2016

07/01/2015 through 06/30/2016 [Change Year](#)

[Print](#) [Reference Materials](#)

1. Rate Setting Data

[Return to Main Menu](#)

Service Type	Number of Service Providers	Total Annual Hours	Annual Hours Worked on the Provision of Service	Total Salaries, Benefits, and Contractual Costs for Service Providers	Total Material and Supply Costs for the Provision of this Service	Creditable Earnings as Reported to TRS	Member TRS Retirement Contributions	Employer Contributions for Member Benefit Increases	Employer TRS Contributions on Federally-Funded Salaries	Billable Transportation Services Costs per Round Trip
Audiology Services										
Occupational Therapy Services	2.77	3,616.77	3,616.77	\$144,035.00	\$12,579.00					
Physical Therapy Services	1.40	1,833.58	1,833.58	\$79,330.00	\$12,580.00					
Psychological Services	7.00	9,898.00	4,612.47	\$427,298.00	\$6,089.00	\$388,320.00	\$53,841.00	\$1,684.00	\$243.00	
School Health Aide	0.70	957.00	957.00	\$27,982.00						
School Health Services (Nursing)	8.00	9,594.00	4,470.80	\$361,299.00	\$15,103.00	\$254,045.00	\$4,242.00	\$1,103.00		
Social Work Services	24.00	29,460.00	13,728.36	\$1,124,266.00	\$8,399.00	\$991,093.00	\$94,169.00	\$4,294.00	\$10,034.00	
Speech Pathology Services	16.00	18,762.00	8,743.09	\$908,911.00	\$4,209.00	\$758,207.00	\$103,937.00	\$3,040.00	\$47,234.00	
Transportation Services*										\$60.35

* LEAs must continue to determine their respective special education transportation costs as before and have documentation supporting the costs available for review. Billable transportation services costs per round trip shall be based on the reported transportation costs for special education students, as reported to ISBE in the "Pupil Transportation Claim and Reimbursement System" (PTCRS, 2nd Quadrant). To determine a per round-trip cost, the reported Special Education costs (Expenditures & Deductions, Line 23C) must be divided by the number of special education students in the LEA for the year reported to ISBE (Pupil Headcount, Line 9), divided by the number of School Attendance Days (Pupil Headcount, Line 6).

A qualifying billable transportation trip is the provision of a transportation service where each of the following conditions is met:

- A. Special transportation is necessary because of the child's medical condition and is documented in the child's IEP.
- B. A medical service other than the transportation itself is provided on the day of the transportation.
- C. The LEA provides special accommodations in providing the transportation service beyond what otherwise are routine transportation services provided to all students.

All three of these conditions must be met to bill for a transportation service.

Transportation

Special Education Transportation **MUST** be part of a student's IEP as required and listed as a related service

Specialized Equipment such as a lift, safety vest, aid on the bus.

Billable Transportation Types:

- Medicar
- Private Automobile
- Service Car
- Taxicab Services
- Special School Bus
 - (Round Trip Only)



Specialized Transportation

FACTS

- Medicaid eligible students with an IEP = \$500 - \$1,000 EACH
- Transportation claiming = 10-15% of total FFS claims



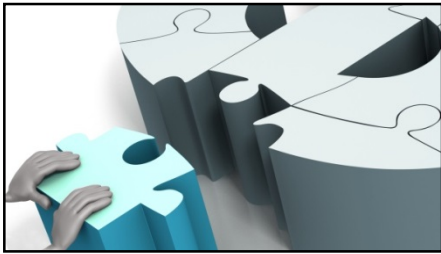
Determinants

- Is Special Transportation Listed on the IEP?
- How many of my Special Transportation Students are Medicaid Eligible?
- How Many of my Special Transportation Students Receive Related Services?
 - Nursing Services
 - Occupational Therapy
 - Physical Therapy
 - Psychological Services
 - Social Work Services
 - Speech/Language Services

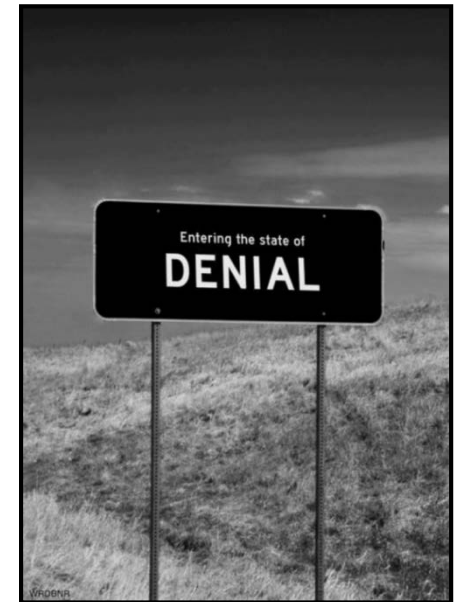
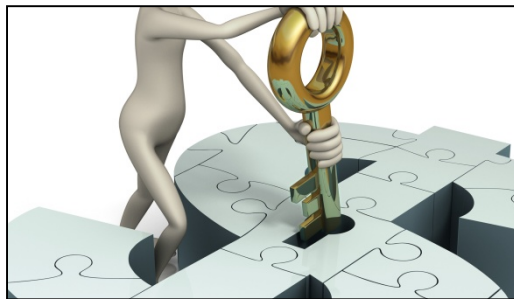


Data Collection

There are multiple ways to collect ridership data

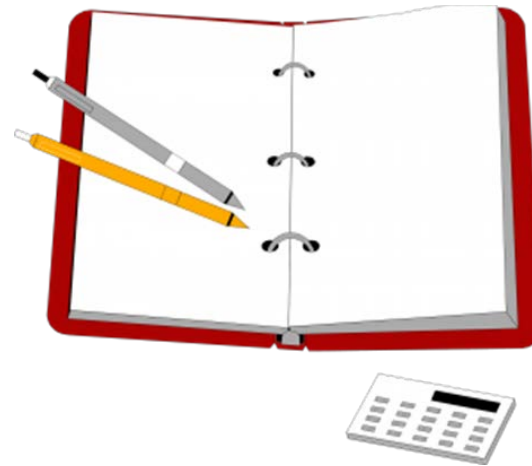


- Paper
- Scantrons
- RFID/GPS



Transportation Logs

- Proof of ridership is a **MUST!**
- Must document dates student rode the special transportation round-trip
- **School attendance records are not proof of ridership**
- Subjected to audit scrutiny



Paper Log Sample

Bus Staff Log Trips Per Student

Formatted By LASEC

Service Month: January 2014 Bus #: AO1 Driver: _____

School Staff Signature: _____ Printed Name: _____

Student Name: _____

STATUS? ☒ Y

Begin Date 08-26-13

End Date _____

Medicaid Elig ☒ Y

Medicaid No: _____

"TRANSPORTATION SERVICE TRIP LOG"

Pick-up Code		Destination Code	
H	S	S	H

Code Key:
H = Home
S = School
P = Other

✓ DM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
							H/S	H/S	H/S			H/S	H/S	H/S	H/S
							S/H	S/H	S/H			S/H	S/H	S/H	S/H
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
H/S				H/S	H/S	H/S	H/S					H/S	H/S	H/S	
S/H				S/H	S/H	S/H	S/H					S/H	S/H	S/H	

GPS – RFID Report Sample

Pass Reporting Events Reports Export Help

View: Unreviewed Events Events

Filters

Event Type: All events Last Name:

Cardholder Type: Rider Unique ID:

Asset No.: Date: 2014/04/05 2014/04/19

☐ Created event ☐ Inactive card ☐ Partial scan ☐ Unassigned card

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Last Name	First Name	Card No	CH Type	Unique ID	Asset No.	Odometer	Date	Time	Event Type	Options
Baldwin	Doug	581816	Rider	581816	Matto_8000018	932058	2014-04-17	17:43		/ i
Baldwin	Doug	581816	Rider	581816	Matto_8000018	932058	2014-04-17	17:47		/ i
Baldwin	Doug	581816	Rider	581816	Matto_8000018	0	2014-04-17	17:44		/ i
Baldwin	Doug	581816	Rider	581816	5332190	21760	2014-04-17	17:42		/ i
Baldwin	Doug	581816	Rider	581816	5332190	21760	2014-04-17	17:38		/ i
Baldwin	Doug	581816	Rider	581816	5332190	21760	2014-04-17	17:33		/ i
Smith	Aaron	581868	Rider	581868	5332190	21760	2014-04-17	18:45		/ i
Smith	Aaron	581868	Rider	581868	5332190	21700	2014-04-17	18:15		/ i

Transportation Reimbursement Sample

- 30 Number of Medicaid-eligible students with specialized transportation needs
- 175 Days of student attendance
- 140 Days receiving related services and riding bus
 - Average reimbursement rate K-12 (\$30.00 per day):
 - Federal match = 50% = \$15.00 per day

30	<i>Number of Medicaid-eligible students on specialized buses</i>
<u>X 140</u>	<i>Days receiving related services and riding bus</i>
4,200	<i>Total number of service days for eligible students</i>
<u>X \$15</u>	<i>Federal reimbursement match rate</i>
\$63,000	<i>Reimbursements received</i>

Resources

- <http://www.sbhsillinois.com/>
 - 1-800-226-0768
- www.hfs.illinois.gov
- http://www.myhfs.illinois.gov/MediHelp/MEDI_Help.htm
- IMPACT.Help@Illinois.gov
 - 1-877-782-5565 option 1
- www.fairbanksllc.com
- **N.A.M.E. – National Alliance for Medicaid in Education**
www.medicaidforeducation.org

Contacts

Kathy Gavin
kgavin@ntdse.org

Julie Jilek
jjilek@nsseo.org

Questions and Answers

We thank you for your time!

Presenters:

MODERATOR INFO:

Barbara Watson, Asst. Superintendent; SEDOL

PANELISTS INFO:

Julie Jilek, Asst. Superintendent;
CSBO Northwest Suburban Special Education Organization
jjilek@nsseo.org

Kathy Gavin, Director of Fiscal Svc;
CSBO Niles Township District for Special Education 807
kgavin@ntdse.org

Gus Brecht, President;
Brecht's Database Solutions
bdsteam@poweriep.com