



Connecticut interChange MMIS

Provider Manual

Chapter 7 - School Based Child Health

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CONNECTICUT MEDICAL ASSISTANCE PROGRAMS

School Based Child Health Services Policy/Regulation

Chapter 7

Medical Services Policy

7.1

This section of the Provider Manual contains the Medical Services policy sections pertaining to school based child health services.

Policy updates, additions, and revisions are approved in accordance with the Connecticut Uniform Administrative Procedure Act. Should this occur, providers are notified through the Provider Bulletin process and sent policy update pages to place in Chapter 7 of their manuals.

School Based Child Health
Services

Requirements for Payment of School Based Child Health Services (Regulations of Connecticut State Agencies)

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Requirements for Payment of School Based Child Health Services

Sec. 17b-262-213 . Scope

Sections 17b-262-213 to 17b-262-224 inclusive set forth the requirements for payment of school based child health services provided by or on behalf of Local Educational Agencies (LEAs) under Section 10-76d of the Connecticut General Statutes (CGS), and Part B of the Individuals with Disabilities Education Act (IDEA) 20 U.S.C Section 1411 et seq., to children determined eligible to receive such services under Connecticut's Medical Assistance Program pursuant to Section 17b-262 of the CGS.

Sec. 17b-262-214 . Definitions

For purposes of Section 17b-262-213 through 17b-262-224 the following definitions shall apply:

- (1) "Allied Health Professional" means an individual who is licensed or certified by the Department of Public Health (DPH) or the SDE to provide school based child health services as defined within the context of this regulation.
- (2) "Child" means an individual as defined in Subsection (e) of Section 10-76a of the Connecticut General Statutes (CGS).
- (3) "Children Requiring Special Education" means an individual as defined in Subsection (e) of Section 10-76a of the CGS.
- (4) "Department" means the State of Connecticut Department of Social Services (DSS) or its designated agent.
- (5) "Diagnostic Services" means those services as defined in the Code of Federal Regulations (CFR) under 42 CFR, Part 440, Subsection (a) of Section 440.130, as amended from time to time.
- (6) "Individualized Education Program (IEP)" means the ongoing plan of treatment services as defined in Section 10-76d-11 of the Regulations of Connecticut State Agencies, and Part B of IDEA, as amended from time to time.
- (7) "Evaluation" is the process defined under Section 10-76d-9 of the Regulations of Connecticut State Agencies.
- (8) "Licensed Practitioner of the Healing Arts" means those practitioners as defined in Section 20-1 of the CGS.
- (9) "Local Educational Agencies" or "Board of Education" means local or regional boards of education as defined in Subsection (b) of Section 10-76a-1 of the Regulations of Connecticut State Agencies and in Part B of IDEA, as amended from time to time.
- (10) "Medical Appropriateness/Medically Appropriate" means health care that is provided in a timely manner and meets professionally recognized standards of acceptable medical care; is delivered in the appropriate setting; and is the least costly of multiple, equally effective, alternative treatments or diagnostic modalities.
- (11) "Medically Necessary" means medical care provided to correct or diminish the adverse affects of a medical condition, assist an individual in attaining or maintaining an optimal level of well being, diagnose a condition or prevent a medical condition from occurring.
- (12) "Planning and Placement Team" (PPT) means the definition contained in Subsection (p) of Section 10-76a-1 of the Regulations of Connecticut State Agencies.
- (13) "Provider" means the local educational agencies or boards of education that participate in the medicaid program as providers of school based child health ("SBCH") services.

(14) "Qualified SBCH Service Providers" include, but are not limited to: licensed physicians, licensed osteopaths, licensed optometrists, licensed chiropractors, licensed naturopaths, licensed audiologists, speech therapy assistants working under the direction of licensed speech pathologists, licensed speech pathologists, licensed advanced practice registered nurses (APRN), licensed registered nurses (RN), licensed physician assistants, licensed practical nurses (LPN), licensed psychologists, certified family and marital counselors, SDE certified school psychologists, SDE certified school social workers, DPH certified independent social workers, DPH certified substance abuse counselors, DPH certified marital and family therapists, SDE certified school counselors, SDE certified guidance counselors, licensed occupational therapists, licensed occupational therapy assistants, licensed physical therapists, physical therapy assistants meeting requirements of Section 20-66 of the CGS, licensed respiratory care practitioners and licensed optometrists.

(15) "Rehabilitative Services" are those services as defined under 42 CFR, Part 440, Subsection (d) of Section 440.130, as amended from time to time.

(16) "School Based Child Health Services" are those diagnostic and rehabilitative treatment services which are medically necessary and appropriate and which meet the needs of children as provided in accordance with Part B of IDEA, as amended from time to time, and Section 10-76d of the CGS and supporting regulations, and are recommended in writing by a licensed practitioner of the healing arts within each respective practitioner's scope of practice as defined under state law in accordance with 42 CFR, Part 440, Subsections (a) and (d) of Section 440.130, as amended from time to time.

(17) "Triennial Reevaluation" is the process of reevaluation at least once every three years as described under Section 10-76d-9 of the Regulations of Connecticut State Agencies.

(18) "Type of Placement" means, for the purposes of this regulation, the type of setting in which the child receives special education services. These settings include, but are not limited to: in-district, out-of-district public residential, out-of-district private residential, out-of-district public day and out-of-district private day.

Sec. 17b-262-215 . Provider Participation

In order to participate in the Connecticut Medical Assistance Program and provide SBCH Services eligible for Medicaid reimbursement from the Department, the provider shall meet the following requirements:

(1) Enroll with the Department, and have on file, a valid provider agreement. This agreement shall be updated annually in order to continue billing the Department for services.

(2) Ensure that all professionals employed by or under contract arrangements with a LEA to provide school based child health services meet all applicable federal and state licensing and certification requirements.

(3) Comply with all Medicaid documentation and other requirements, including, but not limited to those delineated in the provider agreement.

(4) Follow all laws, rules, regulations, policies and amendments which govern Medicaid reimbursement for services provided pursuant to Part B of IDEA, as amended from time to time, and Section 10-76 of the CGS, and which are specified by the federal government and the State of Connecticut.

Sec. 17b-262-216 . Eligibility

Medicaid funding is available for SBCH Services under Section 17b-262-218 below on behalf of all children who are Medicaid recipients.

Sec. 17b-262-217 . Need for Services

Medicaid shall reimburse for SBCH Services provided the following requirements are met:

(a) The diagnostic and evaluation services recommended by the PPT and a licensed practitioner of the healing arts in the initial evaluation or triennial reevaluation of the child are supported by reports containing recommendations by licensed or certified practitioners within the scope of their practice as defined by state law.

(b) The ongoing treatment services, as recommended by the PPT and a licensed practitioner of the healing arts, are specified in the child's IEP on file with the respective LEA. The IEP shall include, either in the IEP document itself or in an attachment to the IEP, but is not limited to:

- (1) applicable medical diagnoses in a format acceptable to the department;
- (2) anticipated treatment goals;
- (3) a description of the type, amount, frequency and duration of the services to be furnished;
- (4) identification of the type(s) of service providers(s); and
- (5) signature(s) of licensed practitioner(s) of the healing arts, within their scope of practice as defined by state law, recommending the plan of medical services.

Sec. 17b-262-218 . Services Covered

The Department shall pay for the following services:

(a) Audiology

Audiology services include, but are not limited to: (1) identification of children with hearing loss; (2) determination of the range, nature and degree of hearing loss, including referral for medical or other professional attention for the treatment of hearing; (3) provision of treatment activities, such as language habilitation, auditory training, speech reading (lip reading), hearing evaluation and speech conservation; (4) creation and administration of programs for the prevention of hearing loss; (5) counseling and guidance of children, parents and teachers regarding hearing loss; and (6) determination of the child's need for individual or group amplification, selecting and fitting an appropriate aid and evaluating the effectiveness of amplification, provided that these services are within the scope of practice set forth in Subsection (3) of Section 20-408 of the CGS.

(b) Clinical Diagnostic Laboratory Services

Clinical diagnostic laboratory services means services recommended by the PPT such as simple diagnostic tests and procedures performed in the school. These services include, but are not limited to: (1) blood sugar by a finger stick, (2) urine dipstick and (3) hematocrit.

(c) Durable Medical Equipment, Other Medical Supplies and Devices

Durable medical equipment means the purchase or rental of medically necessary and appropriate assistive devices such as: (1) augmentative communication device; (2) crouch screen voice synthesizer; (3) prone stander; (4) corner chair; (5) wheelchair; (6) crutches; (7) walkers; (8) auditory trainers; (9) suctioning machines. Other medical supplies and devices means supplies and devices necessary, and incidental to, IEP related services.

(d) Medical Services

Medical services means medical diagnostic and evaluative services recommended by the PPT to determine the child's medically related disability as approved by the licensed practitioner of the healing arts as defined in Section 20-1 of the CGS and provided by the qualified SBCH service provider.

(e) Medical Transportation

Medical transportation means the transportation of a child identified as requiring special education and related services to sites of medically appropriate and necessary services. This includes the cost of staff required to accompany the child, as prescribed in the IEP, in order to transport the child to and from school and other sites of medically appropriate and necessary services.

(f) Mental Health Services (Psychological & Counseling Services)

Mental health services means diagnostic and treatment services involving mental, emotional or behavioral problems and disturbances and dysfunctions, or the diagnosis and treatment of substance abuse. These services include, but are not limited to: mental health evaluations; (2) psychological testing such as the (A) administering of psychological tests and other assessment procedures; (B) interpreting of assessment results; (C) obtaining, integrating and interpreting of information about child behavior and conditions related to learning; (D) planning and managing of a program of psychological services including psychological counseling for children and parents; and (3) counseling services such as individual, group or marital and family counseling or psychotherapy for the treatment of a mental, emotional, behavioral or substance abuse condition to alleviate the condition and encourage growth and development, as performed by qualified SBCH providers, provided these services are within the scope of practice set forth in Subsection (a) of Section 20-74o, Section 20-187a, Subsections (a) and (b) of Section 20-195, Subsection (a) of Section 20-195a, Subsection (a) of Section 20-195m, and Subsection (b) of Section 20-195q of the CGS, and Sections 10-145d-555 through 10-145d-566, inclusive, of the Regulations of Connecticut State Agencies.

(g) Nursing Services

Nursing services include, but are not limited to:

(1) health assessment and development of individualized health care plans; (2) nursing procedures including suctioning, tracheostomy care, catheterization, toileting, ostomy management and care; (3) monitoring of health status, for example, monitoring of shunt functioning or respiratory status; and individual health counseling and instruction and emergency interventions, provided that these services are within the scope of practice set forth in Subsections (a), (b) and (c) of Section 20-87a of the CGS.

(h) Occupational Therapy

Occupational therapy services means those services as defined in Subsection (1) of Section 20-74a of the CGS.

(i) Physical Therapy

Physical therapy services means those services as defined in Subsection (2) of Section 20-66 of the CGS.

(j) Respiratory Care Services

Respiratory care services means those services as defined in Subsection (b) of Section 20-162n of the CGS.

(k) Speech/Language

Speech pathology services include, but are not limited to: (1) identification of children with speech and language impairments; (2) diagnosis and appraisal of specific speech and language impairments; (3) referrals for medical or other professional attention necessary for the treatment of speech or language impairments; (4) provision of speech or language services for the treatment or prevention of communicated impairments; and (5) counseling or guidance of parents, children and teachers regarding speech and language impairments, provided that these services are within the scope of practice set forth in Subsection (1) of Section 20-408 of the CGS and Sections 10-145d-543 through 10-145d-546, inclusive, of the Regulations of Connecticut State Agencies.

(l) Optometric Services

Optometric services include, but are not limited to: (1) assessment for visual acuity, color blindness, near vision and strabismus; and (2) diagnosis of abnormalities related to the eye and optic nerves, provided that these services are within the scope of practice set forth in Subsection (2) of Section 20-127 of the CGS.

Sec. 17b-262-219 . Limitations

(a) No payments shall be made by Medicaid:

- (1) directly to health professionals or organizations under contract to a LEA for medically appropriate and necessary services covered under Section 17b-262-218 above;
- (2) for services of an unproven, experimental, cosmetic or research nature or for any diagnostic, therapeutic or treatment procedures in excess of those deemed medically appropriate and necessary by the Department to treat the child's condition;
- (3) for any immunizations, biological products and other products or examinations and laboratory tests for preventable diseases available free of charge from the Department of Public Health;
- (4) for speech services involving non-diagnostic, non-therapeutic, routine, repetitive and reinforced procedures or services for the child's general good and welfare (e.g., the practicing of word drills which are not planned and performed or supervised by a licensed speech pathologist);
- (5) for services which are provided free of charge to all students such as routine screenings; or
- (6) for cancelled visits or appointments not kept.

(b) Services may be provided to an individual until the end of the school year in which a student reaches twenty-one (21) years of age.

Sec. 17b-262-220 . Documentation and Record Retention Requirements

(a) A permanent service record documenting each SBCH Service provided to each medicaid eligible child shall be maintained by the LEA at which the child is enrolled at the time of service. The permanent service record shall include, but is not limited to:

- (1) the written evaluation and the results of any diagnostic tests;
- (2) the diagnosis(es), in a manner acceptable to the Department;
- (3) the IEP signed by a licensed practitioner of the healing arts in a manner acceptable to the Department; and

- (4) the actual service delivery record including: the type of service; the date of the service; the units of service; the name and discipline of the person performing services and, for persons affiliated with an organization under contract to the LEA, the name of the organization; the signature of the individual performing the service; and progress notes signed by a licensed or certified allied health professional who performed or supervised the services within the scope of his or her practice under state law.
- (b) The Local Educational Agency (LEA) shall maintain a current record of the applicable licenses or certificates of practice of all licensed or certified persons performing SBCH Services.
- (c) The Local Educational Agency (LEA) shall maintain all supporting records of costs reported for SBCH Services.
- (d) All records shall be maintained for at least six (6) years.

Sec. 17b-262-221 . Billing Requirements

- (a) All SBCH Services performed on behalf of Medicaid-eligible children shall be recorded on the required claim forms for the SBCH provider and submitted to the Department in accordance with the billing instructions provided by the Department.
- (b) All claims submitted to the Department for payment of services covered under Section 17b-262-218 above shall be substantiated by documentation in the eligible child's permanent service record pursuant to Section 17b-262-220 above.

Sec. 17b-262-222 . Establishment of Rates

- (a) The Department shall establish payment rates for three (3) types of service specific to type of placement for SBCH Services:
 - (1) a per month per child unit rate for SBCH treatment services, specific to type of placement;
 - (2) a rate for initial evaluations and triennial reevaluations, specific to type of placement; and
 - (3) a rate for Durable Medical Equipment, Other Medical Supplies and Devices. Rates shall be determined based upon annual cost and utilization filings made on forms prescribed by the Commissioner of the Department, except that for the July 1, 1999 through June 30, 2000 rate period, such rates shall be determined based upon the July 1, 1996 through June 30, 1997 cost reports inflated by the increase in the consumer price index (urban - all items). Rates shall be based on cost and utilization data for all children referred for special educational services. The Commissioner may establish interim rates for the billing periods.
- (b) On an annual basis, except for the July 1, 1999 through June 30, 2000 period, the participating local educational agencies (LEA), shall provide to the Commissioner of the Department of Social Services, for all Medicaid eligible and non-Medicaid eligible children receiving SBCH services through such agencies, the following information and supporting documentation including, but not limited to:
 - (1) the average monthly unduplicated count of children receiving initial evaluations for special education services by type of placement;
 - (2) the costs of providing initial evaluations for special education services by type of placement;
 - (3) the average monthly unduplicated count of children receiving triennial reevaluations and diagnostic testing for special education services by type of placement;
 - (4) the costs of providing triennial reevaluations and diagnostic testing for special education services by type of placement;

- (5) the average monthly unduplicated count of children receiving ongoing special education-related health treatment services independent of initial evaluations and triennial reevaluations by type of placement; and
 - (6) the costs of providing ongoing special education-related health treatment services independent of initial evaluations and triennial reevaluations by type of placement.
- (c) Cost and utilization data provided to the Department by the State Department of Education shall be audited in accordance with Generally Accepted Government Auditing Standards (GAGAS). Cost and utilization data shall be maintained for a minimum of six (6) years from the billing period by the LEA.

Sec. 17b-262-223 . Audit/Compliance Review

All supporting accounting and business records, statistical data, the child's permanent service record and all other records relating to the provision of SBCH Services paid for by the Department shall be subject to audit or compliance review by authorized personnel. If an audit discloses discrepancies in the accuracy or allowability of actual direct or indirect costs or statistical data as submitted for each state fiscal year by the Department of Education and its LEAs, the Department's rates for said period shall be subject to adjustment. All documentation shall be made available to authorized personnel upon request in accordance with 42 CFR, Part 431. SDE shall take full responsibility for any Medicaid claims disallowed due to inadequate documentation by any LEA or failure to comply with requirements set forth in statute or regulations.