Oklahoma School Based Medicaid (OSBM) Program

Information Session

Oklahoma State Department of Education 2024



Introductions

Presenters

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Current Projects

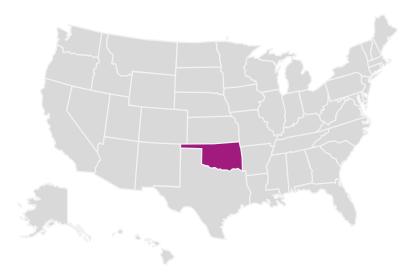
- Nurse Mentor Program
- Diabetes Management and Vision Screening Training
- Medication Administration Training
- Creation of Seizure Training Administration Rules
- Networking with Nurses
- ECHO Project- Diabetes Education for School Nurses
- School Nurse Advocacy
- State Plan Amendment
- Managed Care Transition
- School-Based Medicaid Claiming



Program Overview

SBHS Program

Since the start of the 2019 school year, the Oklahoma State Department of Education (OSDE) has been responsible for the School-Based Health Services (SBHS) program, overseeing program practices and policies as well as administering the program statewide with support from Public Consulting Group (PCG). Once enrolled in the SBHS program, school districts can be reimbursed for certain health-related services, such as: Occupational Therapy, Physical Therapy, or Speech Therapy in the Individualized Education Programs (IEPs) of students who are enrolled in SoonerCare. The Oklahoma Health Care Authority (OHCA) has approved over \$10,000,000 in school-based claims.





Two Reimbursement Programs

Districts have the option to participate in two mutually exclusive reimbursement programs which can assist schools in recovering funds used to provide these services:



Fee For Service (FFS)

- Delivers direct health services to special education students
- Currently districts are billing for speech-language, physical therapy and occupational therapy
- Staff are required to log services
- Providers are licensed

2 Medicaid Administrative Claiming (MAC)

- Assist in outreach and enrollment of students in Medicaid
- Assist in coordination and referrals for medical services
- Provide administrative services that support the delivery of direct services
- Staff are not required to be licensed
- Staff are required to participate in the RMTS

Note: Districts cannot participate in the MAC program unless they participate in the FFS program.



Changes to the Program

- Signed, written Parent Consent is required only once prior to billing Medicaid.
 - Local Education Agency (LEA's) must provide initial and annual written notice to help ensure that
 parents are fully informed of their rights before the Medicaid agency can access their or their
 child's public benefits or insurance to pay for services under Individuals with Disability Act (IDEA).
- A separate Physician Order is only required for Physical Therapy.
 - Physician Authorizations must be obtained initially and annually thereafter.
- There is no longer a need to obtain a separate Prior Authorization for Occupational Therapy, Physical Therapy, or Speech Therapy.
- School-based therapy claims will not to be denied because a student is also receiving private therapy.
- Telehealth Services are being reimbursed (Individual Therapy Only)



Steps in EDPlan/EasyTrac

- Services providers must be credentialed with a National Provider Identifier (NPI), Oklahoma Health Care Authority (OHCA) ID, and Board Certified.
- Medicaid Eligibility (PCG will run eligibility monthly)
- □ Document Parent Consent (Personal Page of EDPlan)
- □ Input Doctor Authorization for Physical Therapy service only (Personal Page of EDPlan)
- Annual Evaluations
- Annual IEP
- □ Log Services in EasyTrac (Logging Wizard)



Logging Wizard

New Log Entry						₩ Save 🛍 Clear Form —
Service Date				<u></u>	Service Type	·
	(Required)					(Required)
Service Times	Start	0	End	2	Group Size	•
Progress Report				~	Diagnosis	Please enter a valid Service Date value to populate Diagnosis options.
					Location	•
-Areas Covered/Assessed						
☐ Articulation			Auditory Processing			☐ Augmentative & Alternative Communication
Augmentative Communication			☐ Aural Rehab Following Cochlear Implant			☐ Disorder of Speech Flow
Expressive Language			Fluency			☐ Language Therapy
☐ Oral Motor Dysfunction - Swallowing			☐ Phonological Development			□ Pragmatic Language
☐ Previously Recorded Service Log			☐ Receptive Language			Resonance Pattern
Rhythm/Fluency			☐ Sound Production			☐ Vocal Quality
☐ Vocal Quality and Resonance Pattern			☐ Voice Therapy			
Goal: Reading - Students will	an objective summary, inc	luding main id	ea and supporting details, v	vhile mair	ntaining meaning and a logical sequence of	events.
Comments						ℰ Auto Text
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Fee For Service Insights

Looking ahead

Expansion of Billing for Services on the IEP

Current Services

- Speech Therapy
- Occupational Therapy
- Physical Therapy

Future Expansion

- Nursing Services
- Personal Care
- Behavioral Health



Free Care Expansion

Background

December 2014 CMS reversed their decision of not allowing Free Care to be reimbursed. This reversal means Medicaid eligible services provided to enrolled students are available for reimbursement if all other Medicaid requirements are met

Free Care definition: services provided to Medicaid enrolled students at no charge, and/or provided to the community at large free of charge

What does this mean for the School Based Reimbursement Programs?: Expansion of program covered services will be reimbursable to districts for Medicaid enrolled students that have other medical plans of care (outside of IEPs/IFSPs) where medical necessity has been established



Free Care Basics

Services

- Services covered in the community can be performed in a school-based setting by a qualified medical provider
- Established medical necessity by a qualified medical provider operating within the scope of his/her practice outside of IEP/IFSPs
- Mental/behavioral health services that are identified on a medical plan of care outside IEP/IFSPs and performed by a qualified medical provider

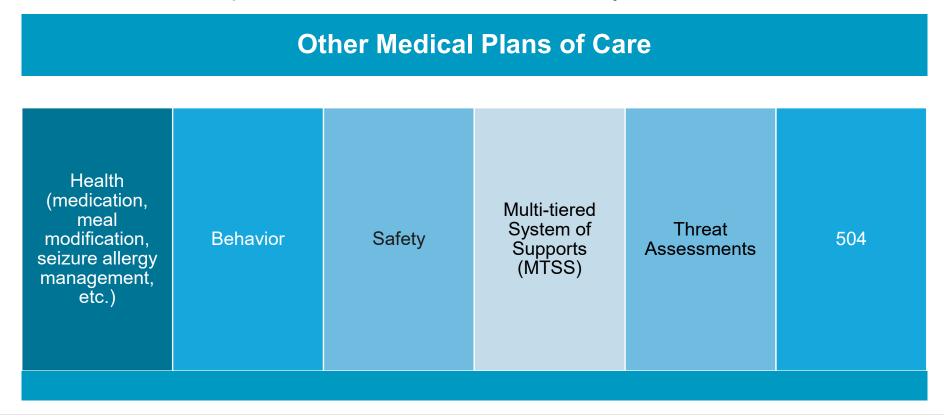
<u>Providers</u>

 Additional qualified medical providers may be identified that are eligible for reimbursement when delivering services in schools



Documenting on New Medical Plans of Care

Expansion of Free Care services will allow districts to be reimbursed for services prescribed and rendered on other medical plans of care <u>if</u> medical necessity has been established:



Q & A

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