



# Billing for Occupational Therapy Services

School-Based Health Care Services  
August 2020

**Note:** This training is intended for occupational therapy providers who participate in the School-Based Health Care Services (SBHS) program. The SBHS program provides reimbursement to contracted school districts for providing health related services that are included in a Medicaid eligible student's individualized education program (IEP) or individualized family service plan (IFSP). Information provided in this training does not supersede instructions and policy found in the SBHS Billing Guide, SBHS WAC, or the SBHS contract.

# Resources for Occupational Therapy Providers

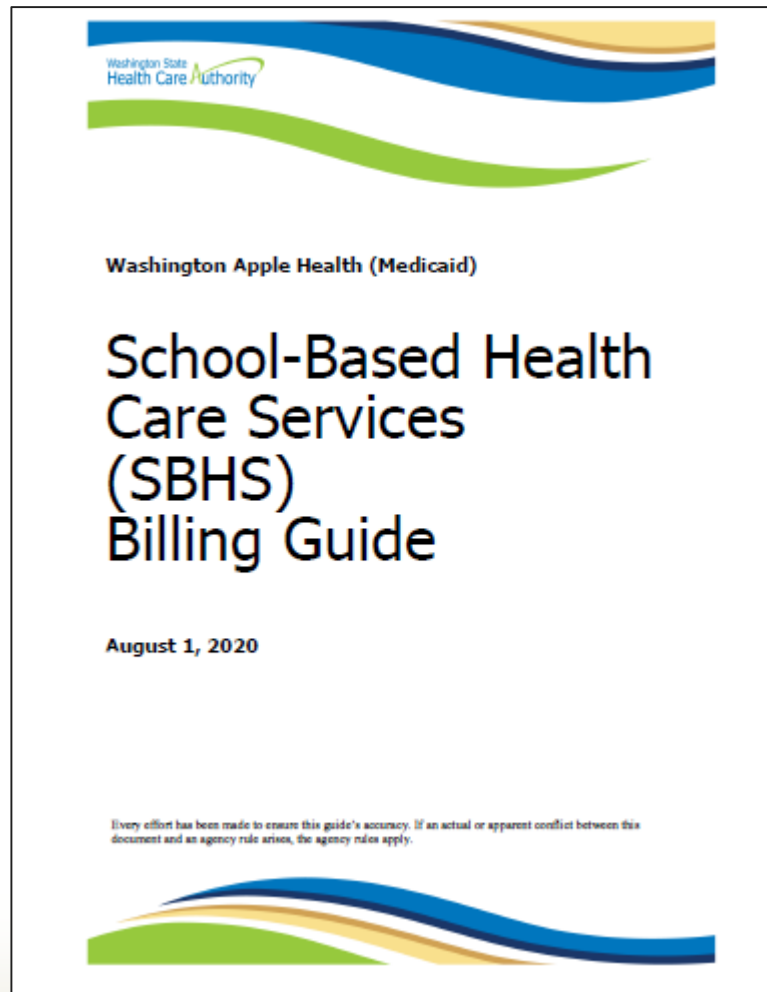
[www.hca.wa.gov/sbhs](http://www.hca.wa.gov/sbhs)

- SBHS Billing Guide
- FAQs
- PDF of this training
- NCCI training
- Links to DOH and NPI registry

SBHS billing information and fee schedule	Trainings and webinars	Additional resources
<a href="#">SBHS billing guide</a>	SBHS 101 training - <a href="#">video</a> / <a href="#">pdf</a>	<a href="#">Apply for a National Provider Identifier (NPI)</a>
<a href="#">SBHS fee schedule</a>	Billing for audiology services - <a href="#">video</a> / <a href="#">pdf</a>	<a href="#">NPI registry</a>
<a href="#">SBHS COVID-19 FAQ</a>	Billing for counseling services - <a href="#">video</a> / <a href="#">pdf</a>	
<a href="#">SBHS program expansion FAQ</a>	Billing for nursing services - <a href="#">video</a> / <a href="#">pdf</a>	
	Billing for occupational therapy services - <a href="#">video</a> / <a href="#">pdf</a>	
	Billing for physical therapy services - <a href="#">video</a> / <a href="#">pdf</a>	
	Billing for speech-language therapy services - <a href="#">video</a> / <a href="#">pdf</a>	
	NCCI edits training tool - <a href="#">pdf</a>	

Nonparticipating school districts >

# SBHS Billing Guide



The [SBHS Billing Guide](#) is the program manual for SBHS. It contains:

- Program requirements
- Provider qualifications
- Billing requirements
- Billable codes
- Documentation requirements
- ...and more!

# SBHS Billing Guide

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# SBHS Program Notifications

[www.hca.wa.gov/sbhs](http://www.hca.wa.gov/sbhs)

- Providers may sign up to receive SBHS notifications.
- Past SBHS newsletters and program notifications can be found on the SBHS webpage.
- Download RSS feed extension for Chrome if you can't view notifications.

## Resources

[SBHS coordinators](#) >

[Service providers](#) >

[Nonparticipating school districts](#) >

## SBHS quarterly newsletters and program notifications

SBHS sends updates via our email communications tool, GovDelivery.

- [Sign up for email notifications](#) <sup>12</sup>

Past notifications are available to view through our RSS feed.

- [View past program notifications](#) <sup>12</sup>

Please note: If you subscribe to our RSS feed and use the Chrome browser, you will need to [install the RSS feed extension for Chrome](#) <sup>12</sup>.

# What is the SBHS Program?

[WAC 182-537-0100](#)

The School-Based Health Care Services (SBHS) program is an optional Medicaid program which provides reimbursement to contracted school districts, educational service districts, and charter and tribal schools for providing health-related services to students with individualized education programs (IEPs) or individualized family service plans (IFSPs).

## SBHS Overview

- The SBHS program is administered by the Health Care Authority (HCA).
- HCA is the single state agency responsible for administering the state's Medicaid (Apple Health) program as well as the public employee/school employee health benefits programs.
- HCA's SBHS program manager, Shanna Muirhead, is the main contact for the SBHS program.
- Receiving services through SBHS does not affect services a child receives outside of school.



# History of Medicaid & IDEA

1965. Title XIX of Social Security Act (the Act) establishes a Federal–state matching entitlement program known as Medicaid.



1975. Congress passes Education for All Handicapped Children Act. Renamed Individuals With Disabilities Education Act (IDEA) in 1990.



1988. Section 411(k)(13) of Medicare Catastrophic Coverage Act amended section 1903(c) of the Act which allows schools to receive Medicaid reimbursement for Medicaid covered services in an IEP or IFSP.

## Who Can Participate in SBHS?

The following entities can enter into a SBHS contract with HCA and participate in the SBHS program:

- Public school districts
- Educational service districts
- Charter schools
- Tribal schools

A list of SBHS contracted districts is available on the [SBHS webpage](#).

## SBHS Eligible Occupational Therapy Providers

- **Department of Health (DOH) licensed occupational therapist (OT)**
- **The following individuals may also provide services under the supervision of a licensed OT:**
  - Occupational therapy assistant (OTA)
  - Nonlicensed school staff (e.g. paraeducator, aide, intern, etc.)

# Requirements for Licensed Occupational Therapy Providers

**The following applies to licensed occupational therapists (OTs) and occupational therapy assistants (OTAs):**

- Must hold current and unrestricted licensure as an OT or an OTA with the WA State Department of Health (DOH).
- Must obtain a National Provider Identifier (NPI) through the Federal government at the [NPPES website](#).

# Requirements for Nonlicensed Individuals

**The following applies to nonlicensed individuals (OT aide, paraeducator) providing services under the direction of a licensed OT:**

- DOH license not required
- NPI not required
- Must practice under supervision of a licensed OT per professional scope of practice standards

# License and Supervisory Requirements

License requirements and supervisory requirements for occupational therapy providers can be found on the Department of Health (DOH) [webpage](#) and in [Chapter 18.59 RCW](#) and [Chapter 246-847 WAC](#).

# Confirming Licensure and NPI

- Providers may confirm their DOH license information on DOH's Provider Credential webpage:

<https://fortress.wa.gov/doh/providercredentialsearch/>

- Providers may apply for an NPI and/or confirm and update their NPI information on CMS's NPPES webpage:

<https://nppes.cms.hhs.gov/#/>

# Student Eligibility

**In order for the school district to receive reimbursement through the SBHS program, students must:**

- Be ages birth through age 2 (Part C) with an active IFSP
- Be ages 3 through age 20 (Part B) with an active IEP
- Have active Title XIX Medicaid at the time of service delivery
- Have a parent or guardian give consent to bill to the school district (per IDEA)

Providers should work with the school district's SBHS coordinator to obtain a list of eligible students.



# Covered Services

- Evaluations and reevaluations to determine if a student requires related services per an IEP or IFSP
- Health-care related services included in the student's IEP or IFSP limited to:
  - Audiology services
  - Mental health services
  - Nursing services
  - **Occupational therapy services**
  - Physical therapy services
  - Speech-language therapy services

## Referral for Services

- **Occupational therapy services must be ordered by a licensed physician or *other licensed health care provider* within their scope of practice per:**
  - Federal regulations (42 CFR 440.110)
- For SBHS, **licensed** occupational therapists can evaluate, diagnose, and provide services per an IEP or IFSP without a script from a physician within their scope of practice per:
  - Department of Health (DOH) regulations ([Chapter 246-847 WAC](#)).
  - OTs should review DOH regulations to ensure they refer and provide services per their scope of practice.

# SBHS Billable Occupational Therapy Codes

- The SBHS program utilizes approximately 20 Current Procedural Terminology (CPT) occupational therapy codes.
- A list of all billable occupational codes can be found in the [SBHS Billing Guide](#) under the *Coverage Table: Occupational Therapy Services* Section.
- Codes are developed and owned by the American Medical Association (AMA).

Current rates associated with each code are located in the [SBHS Fee Schedule](#).

## SBHS Billable Occupational Therapy Codes, cont.

- Providers must use their professional judgement when determining the most appropriate code to use for the service(s) provided.
- The SBHS program manager can provide guidance on SBHS policies and procedures but cannot inform providers which code(s) to use.
- Providers may seek guidance from the [American Occupational Therapy Association](#) (AOTA) or a [Current Procedural Terminology \(CPT\) manual](#) for appropriate use of OT codes.

# Billing for Evaluations and Reevaluations

- The SBHS program utilizes three occupational therapy evaluation codes and one reevaluation code:
  - Evaluations codes: **97165, 97166, 97167**
  - Re-evaluation code: **97168**
- Even though time is associated with each evaluation code, evaluation codes are untimed.
- Times associated with the evaluation codes are provided as “guidance” for providers in order to determine which code is most appropriate to use.
- Providers should use their professional judgement to determine the most appropriate code to use.

Note: Providers should review the [SBHS Billing Guide](#) and the [American Occupational Therapy Association \(AOTA\)](#) for additional information on how to bill for evaluations.

## Billing for Evaluations and Reevaluations, cont.

- Licensed OTs can bill for annual evaluations/reevaluations when they result in an IEP or IFSP containing occupational therapy services.
- OTs must complete an assessment/evaluation report and complete treatment notes to validate claims.
- Separate tests/services performed as part of the evaluation may also be submitted for reimbursement.
- OTs must complete treatment notes for all separate tests/services performed to validate claims.

# SBHS Covered Occupational Therapy Services

- Occupational therapy services must be included in the IEP/IFSP as a special education service, a related service, or a consultation service.
  - Consult services are only reimbursable if direct services are provided to the student. Consult services provided to a special education teacher or another staff member are not reimbursable.
- The SBHS program will not reimburse for services provided in excess of what is authorized in the IEP/IFSP.

# SBHS Covered Occupational Therapy Services

Make-up sessions may be reimbursable when the provider clearly documents in the treatment notes that the session is a make-up.

- For example: A student's IEP states she requires OT services 30 minutes/3 x week. The student receives services on Monday and Wednesday but is out sick on Friday and misses her session. The OT can bill for 4 sessions the following week but must document in the treatment notes the reason for the extra session.



## SBHS Billable Occupational Therapy Codes: Timed vs. Untimed

- **Timed codes:** Each measure of time as defined by the code description equals one unit.
  - **Example: 97110 is timed per 15 minutes (1 unit=15 min)**
- **Untimed codes:** Can only be billed as one unit regardless of how long the procedure takes.
  - **Example: 95852 is untimed and can only be billed once per day, per provider, per student.**

**Note: Most occupational therapy codes are “timed”.**

## Billing for Timed OT Codes

- For codes timed per 15 minutes, a minimum of 8 minutes must be provided to bill for one unit.
- To calculate billing units for 15-minute timed codes, count the total number of minutes provided for the day for the eligible student.
- Divide by 15 to convert to billable units of service per day.
- More information on how to bill timed codes is available in the [SBHS Billing Guide](#).

Minutes	Units
0 min-7 mins	0 units
8 mins-22 mins	1 unit
23 mins-37 mins	2 units
38 mins-52 mins	3 units
53 mins-67 mins	4 units
68 mins-82 mins	5 units

# Timed vs. Untimed Codes

- The comments column in the SBHS Billing Guide will indicate if a code is timed or untimed.
- If the comments column is blank, the code is untimed.

Procedure Code	Short Description	Comments
97112	Neuromuscular reeducation	Timed 15 minutes
97150	Group therapeutic procedures	
97165	OT <u>eval</u> low complex, 30 min	
97166	OT <u>eval</u> mod complex, 45 min	
97167	OT <u>eval</u> high complex, 60 min	
97168	OT re- <u>eval</u> <u>est</u> plan care	
97530	Therapeutic activities	Timed 15 minutes

Diagrammatic annotations on the right side of the table:

- A red circle highlights the first and last rows (97112 and 97530).
- A bracket groups the first row as a "Timed code".
- A bracket groups the middle four rows (97150, 97165, 97166, 97167) as "Untimed codes".
- A bracket groups the last row (97530) as a "Timed code".

# Time Limits for SBHS Providers to Submit Claims

- Providers must submit the initial claim to the HCA within **three hundred sixty-five calendar days** from the date the provider furnishes the service to the eligible student.
- **Within twenty-four months** of the date the service, a provider may resubmit, modify, or adjust an initial claim that was assigned a transaction control number (TCN).
- After twenty-four months from the date the service was provided to the student, HCA does not accept any claim for resubmission, modification, or adjustment.

# Diagnosis Codes

- The SBHS program utilizes one diagnosis code:
  - R69 (illness, unspecified)
- The diagnosis code must be entered on each claim in ProviderOne but does not need to be included on treatment notes.

# National Correct Coding Initiative

- The SBHS program follows the National Correct Coding Initiative (NCCI) policy.
- The Centers for Medicare & Medicaid Services (CMS) created this policy to promote national correct coding methods.
- NCCI assists the HCA to control improper coding that may lead to inappropriate payment.

## National Correct Coding Initiative, cont.

- **Procedure-to-procedure (PTP) edits** - PTP edits prevent improper payments when incorrect code combinations are billed for the same client, on the same day, by the same provider.
  - Example: Code 97110 and 97150 cannot be billed together on the same day, by the same provider, for the same student.
- **Medically Unlikely Edits (MUEs)** – MUEs are the maximum unit of service a code can be billed for the same client, on the same day, by the same provider.
  - Example: Providers can only bill one (1) unit of code 95852 per day, per student, per provider.

## NCCI Additional Information

- PTP and MUE edits can be viewed on the CMS NCCI webpage:  
<https://www.medicaid.gov/medicaid/program-integrity/ncci/edit-files/index.html>
- The [NCCI Edits Training Tool](#) on the SBHS webpage assists providers with navigating the CMS NCCI webpage.



## Place of Service

**In addition to the school setting, the SBHS program pays for services that are provided in the following settings:**

- Natural setting (e.g. home, daycare, childcare setting)
- Alternate setting in accordance with IDEA (e.g. school bus, field trip, hospital)
- Includes in-person services and services provided via telemedicine

**Note:** When providing services in a setting other than the school, providers should document the place of service in their treatment notes.

# Telemedicine

## **Services provided via telemedicine are reimbursable through the SBHS program.**

- Providers must document when services are provided via telemedicine and document the location of the student and the location of the provider.
- Services provided by OTAs and nonlicensed staff are reimbursable when provided under the supervision of a licensed OT.
- More information about how to bill for services provided via telemedicine can be found in the current version of the [SBHS Billing Guide](#).

## SBHS Noncovered Services

- Applied behavioral analysis (ABA) therapy
- Attending meetings
- Charting
- Equipment preparation when student is not present
- Evaluations that do not result in an IEP or IFSP
- Instructional assistant contact
- Observation
- Parent consultation
- Parent contact
- Planning
- Preparing and sending correspondence
- Professional consultation
- Report writing
- Review of records
- School district staff accompanying a child to and from the school bus when services aren't provided
- Teacher contact
- Test interpretation
- Travel and transportation when services are not provided

# ProviderOne

- All licensed OTs and OTAs participating in SBHS must be enrolled as a servicing provider under the school district's ProviderOne account.
- Nonlicensed individuals practicing under the supervision of a licensed provider do not need to be enrolled in ProviderOne.
- All services provided by nonlicensed individuals are billed under the licensed provider's NPI in ProviderOne.
- Providers do not need log-in access to ProviderOne.

ProviderOne is WA State's electronic Medicaid billing system.

## ProviderOne, cont.

The school district's SBHS coordinator enrolls licensed providers in ProviderOne and will need to collect the following information from each provider prior to enrolling in ProviderOne:

- Full name
- Date of birth
- Social Security #
- Copy of DOH license
- NPI

Contact your district's SBHS coordinator for more information on ProviderOne enrollment.

# Documentation

- Medicaid requires providers to keep treatment notes/service logs that justify billed claims.
- Providers must document all services as specified in the SBHS billing guide.
- Treatment notes must be maintained for six (6) years from the date of service.
- Maintaining records in an electronic format is acceptable.

# Documentation

- **If your district contracts with a billing agent, you will need to be enrolled in the billing agent's document software (WAMR, EasyTrac, Embrace)**
  - Providers log-in to document all services electronically
  - OTs must review and co-sign treatment notes kept by OTAs or nonlicensed staff
  
- **If your district self-bills, providers may keep handwritten notes or electronic treatment notes**
  - Providers submit notes to SBHS coordinator
  - SBHS coordinator enters information from notes as claims into ProviderOne

# Documentation

## Treatment notes must contain the following information:

- Student's name
- Student's date of birth
- Students Medicaid (ProviderOne) ID
- Date of service and for each date of service:
  - Time-in/Time-out
  - Procedure code
  - Description of service provided
  - Child's progress to each service
  - Note whether individual or group therapy
- Provider's printed name, title, and handwritten or electronic signature



## Additional Resources

**All of the information included in today's training can be found in the [SBHS Billing Guide](#). In addition, occupational therapy providers participating in the SBHS program may find these resources helpful:**

- American Occupational Therapy Association (AOTA) [website](#)
  - Guidance on Medicaid billing
  - Guidance on CPT/HCPCS codes
  - Guidance on providing school-based occupational therapy services
- American Medical Association's [CPT Manual](#)

# Questions?

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SBHS webpage: <https://www.hca.wa.gov/sbhs>