



Billing for Physical Therapy Services

School-Based Health Care Services
August 2020

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Note: This training is intended for physical 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 Physical Therapy Providers

www.hca.wa.gov/sbhs

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

Resources

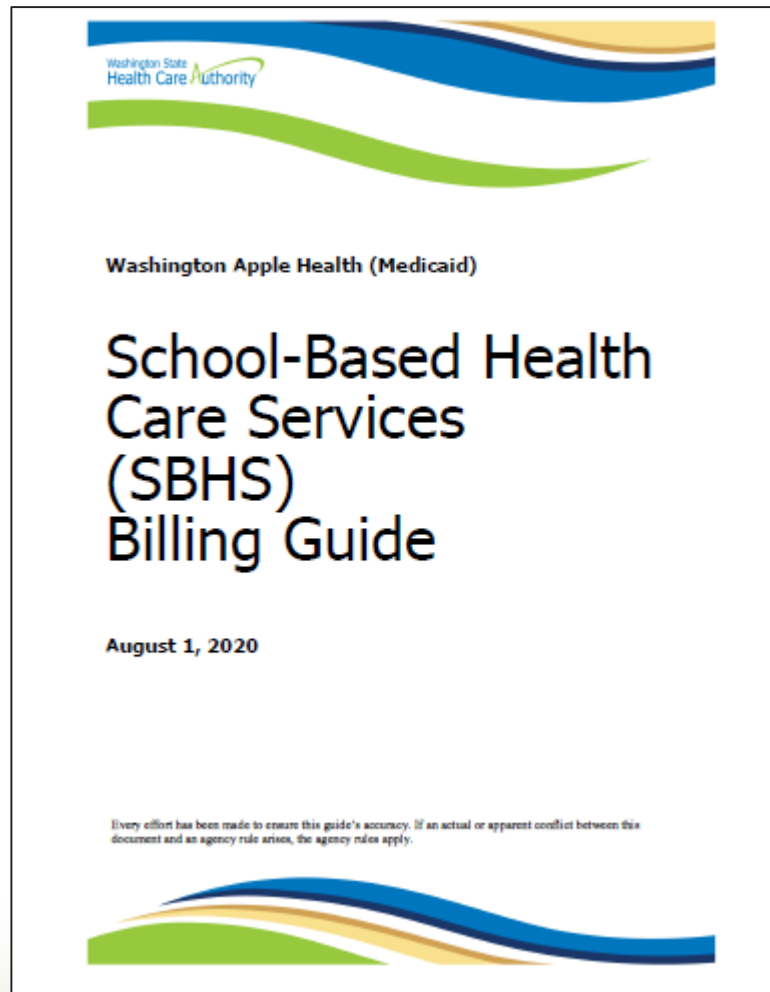
SBHS coordinators >

Service providers v

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

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

- 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](#)

Past notifications are available to view through our RSS feed.

- [View past program notifications](#)

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](#).

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 Physical Therapy Providers

- **Department of Health (DOH) licensed physical therapist (PT)**
- **Physical therapy compact license holder**
- **The following individuals may also provide services under the supervision of a licensed PT:**
 - Physical therapy assistant (PTA)
 - Nonlicensed school staff (e.g. paraeducator, aide, intern, etc.)

Requirements for Licensed Physical Therapy Providers

The following applies to licensed physical therapists (PTs) and physical therapy assistants (PTAs):

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

Note: PT compact license holders must have an NPI and must meet requirements outlined by the WA State Department of Health.

Requirements for Nonlicensed Individuals

The following applies to nonlicensed individuals (e.g. paraeducator, aide, intern) providing services under the direction of a licensed PT:

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

License and Supervisory Requirements

License requirements and supervisory requirements for physical therapy providers can be found on the Department of Health (DOH) [webpage](#) and in [Chapter 18.74 RCW](#), [Chapter 246-915 WAC](#) and [Chapter 246-915A 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 health 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

- **Physical 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** physical 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 246-915 WAC](#)).
 - PTs should review DOH regulations to ensure they refer and provide services per their scope of practice.

SBHS Billable Physical Therapy Codes

- The SBHS program utilizes approximately 20 Current Procedural Terminology (CPT) physical therapy codes.
- A list of all billable occupational codes can be found in the [SBHS Billing Guide](#) under the *Coverage Table: Physical 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 Physical 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 Physical Therapy Association](#) (APTA) or a [Current Procedural Terminology \(CPT\) manual](#) for appropriate use of PT codes.

Billing for Evaluations and Reevaluations

- The SBHS program utilizes three PT evaluation codes and one reevaluation code:
 - Evaluations codes: **97161, 97162, 97163**
 - Re-evaluation code: **97164**
- 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 Physical Therapy Association \(APTA\)](#) for additional information on how to bill for evaluations.

Billing for Evaluations and Reevaluations, cont.

- Licensed PTs can bill for annual evaluations/reevaluations when they result in an IEP or IFSP containing physical therapy services.
- PTs 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.
- PTs must complete treatment notes for all separate tests/services performed to validate claims.

SBHS Covered Physical Therapy Services

- Physical 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 Physical 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 PT 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 therapist can bill for 4 sessions the following week but must document in the treatment notes the reason for the extra session.

SBHS Billable Physical 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 physical therapy codes are “timed”.

Billing for Timed PT 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
97139	Physical medicine procedure	Timed 15 minutes
97150	Group therapeutic procedures	
97161	PT eval low complex, 20 min	
97162	PT eval mod complex, 30 min	
97163	PT eval high complex, 45 min	
97164	PT re-eval est plan care	
97530	Therapeutic activities	Timed 15 minutes

Diagrammatic annotations: A red circle highlights the 'Comments' column. Brackets on the right side of the table group rows into three categories: 'Timed code' (rows 1 and 8), 'Untimed codes' (rows 2-7), and 'Timed code' (row 8).

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 PTAs and nonlicensed staff are reimbursable when provided under the supervision of a licensed PT.
- 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 PTs, PTAs, and compact license holders 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, licensed providers and nonlicensed staff need to be enrolled in the billing agent's document software (WAMR, EasyTrac, Embrace)**
 - Providers and nonlicensed staff log-in to document all services electronically
 - PTs must review and co-sign treatment notes kept by PTAs or nonlicensed staff
- **If your district self-bills, providers may keep handwritten notes or electronic treatment notes**
 - Providers submit notes to the district's SBHS coordinator
 - PTs must review and co-sign treatment notes kept by PTAs or nonlicensed staff
 - 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, physical therapy providers participating in the SBHS program may find these resources helpful:

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

Questions?

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