



School-Based Health Care Services (SBHS) vs. Medicaid Administrative Claiming (MAC)

Shanna Muirhead
SBHS Program Manager
Health Care Authority

Tyron Nixon & Jonathan Rush
MAC Program Specialists
Health Care Authority

Objectives

- Gain a better understanding of Medicaid & Medicaid reimbursable services
- Understand how Medicaid funding can benefit your school district (SD) or educational service district (ESD)
- Understand differences between School-Based Health Care Services (SBHS) Program and Medicaid Administrative Claiming (MAC) Program

Apple Health (Medicaid) 101

Medicaid is regulated federally by the Centers for Medicare and Medicaid Services (CMS) and is administered differently in each state. Each state has flexibility regarding how they structure their Medicaid program, but all states must follow CMS guidelines and regulations.

- In WA State, the Medicaid program is known as Apple Health
- Health Care Authority (HCA) is the single state agency that administers Apple Health (Medicaid)
- Apple Health (Medicaid) offers reimbursement to school districts and educational service districts (ESD) for both the provision of covered medical services and for the costs of administrative activities

Medicaid Funding Resources for School Districts

School-Based Health Care Services (SBHS)

- Reimburses contracted school districts and ESDs for direct health care related services
- Services must be in student's IEP or IFSP
- Services must be rendered by Department of Health (DOH) licensed provider
- SBHS Program is funded 50/50 state/federal
- Optional program, available to all school districts/ESDs
- Claims are entered directly into HCA MMIS ProviderOne billing system
- SDs/ESDs reimbursed via IGT

Medicaid Administrative Claiming (MAC)

- Reimburses contracted school districts and ESDs for Medicaid outreach and linkage activities provided by school staff to all students
- Staff do not need to hold DOH licensure
- Federally funded by Title XIX Medicaid
- Optional program, available to all school districts/ESDs
- Districts record administrative activities via Random Moment Time Study (RMTS)
- SDs/ESDs reimbursed via CPE

School-Based Health Care Services (SBHS)



Overview of SBHS Program

The School-Based Health Care Services (SBHS) Program is an optional Medicaid program which reimburses contracted school districts and ESDs for providing health-related services to students with IEPs and IFSPs. Services must be:

- Medically necessary
- Prescribed or recommended by a physician or other licensed health care provider operating within the provider's scope of practice under state law
- Included in the student's IEP or IFSP
- Provided in a school setting or via telemedicine if provided by a provider at a distant site
- Provided by WA State DOH licensed providers

School districts are allowed to receive Medicaid reimbursement per section 1903(c) and 1905(a) of the Social Security Act and the Individuals with Disabilities in Education Act (IDEA).

Covered Services

- Evaluations when a child is determined to need early intervention or special education related services
- Re-evaluations to determine whether a child continues to need early intervention or special education related services
- Health-care related services included in the child's IEP or IFSP limited to:
 - Audiology services
 - Counseling/mental health services
 - Nursing services
 - Occupational therapy services
 - Physical therapy services
 - Psychological assessments
 - Speech-language therapy services

Client Eligibility

- Children who meet definition of an “at-risk infant or toddler” or a “child with a disability” per the Individuals with Disabilities Education Act (IDEA)
- Birth through age 2 (Part C) with IFSP and age 3 through age 20 (Part B) with IEP
- Title XIX Medicaid-Categorically Needy (CN) or Medically Needy (MN)
 - Children enrolled in Apple Health Managed Care Organization (MCO) receive SBHS fee-for-service
 - Private insurance must be billed primary to Apple Health (Medicaid)

Provider Qualifications

In order for school districts to receive reimbursement through SBHS, providers must meet federal and WA State licensing and certification requirements which include:

- Holding active license/certification with WA State [Department of Health](#) (DOH)
- Obtaining a National Provider Indicator (NPI) through [NPPES](#)
- Being enrolled as a “servicing provider” under the contracted SD or ESD’s ProviderOne account
 - Providers may be enrolled as servicing providers under multiple school districts
- Providers may be school staff or contracted providers
- ESA certification is not required in order to bill Medicaid

Who May Provide SBHS?

- Audiologist
- Licensed independent clinical social worker
- Licensed advanced social worker
- Licensed mental health counselor
- Licensed mental health counselor associate
- Registered nurse
- Licensed practical nurse
- Occupational therapist
- Occupational therapy assistant
- Physical therapist
- Physical therapy assistant
- Speech language pathologist
- Speech language pathology assistant
- Psychologist

Provider licensing requirements can be found on the Department of Health website:
<http://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate>

SBHS Participation Requirements

SBHS program participation requirements include:

- Being a public school district (SD) or educational service district (ESD)
- Contracting with HCA's SBHS Program
- Signing a Core Provider Agreement with HCA's Provider Enrollment Section
- Creating a ProviderOne account and submitting all claims through ProviderOne
- Assigning 1-2 staff members to manage provider, student, and claim information
- Ensuring providers understand program requirements, documentation, and billing requirements
- Complying with Intergovernmental Transfer (IGT)

Benefits of SBHS Program

The SBHS Program allows SDs/ESDs to recover a portion of the cost incurred for providing health related services to Medicaid eligible students. Funding can be used in a variety of ways:

- Hiring additional staff
- Assistive technology
- Professional development

<u>District A</u> 10–15 qualified providers 10–20 eligible students	<u>District B</u> 30–40 qualified providers 100–150 eligible students	<u>District C</u> >100 qualified providers 800–900 students
\$3000 claim amount SD/ESD Match: \$900 HCA Match: \$600 Federal Match: \$1500	\$150,000 claim amount SD/ESD Match: \$45,000 HCA Match: \$30,000 Federal Match: \$75,000	\$480,000 claim amount SD/ESD Match: \$144,000 HCA Match: \$96,000 Federal Match: \$240,000
Total Annual Revenue: \$2,100	Total Annual Revenue: \$105,000	Total Annual Revenue: \$336,000

Questions?

More Information:

<http://www.hca.wa.gov/billers-providers/programs-and-services/school-based-health-care-services-sbhs>

Shanna Muirhead, SBHS Program Manager

Shanna.Muirhead@hca.wa.gov

Tel: (360) 725-1153

Medicaid Administrative Claiming (MAC)

What is MAC?

Program Details:


- Federally funded by Title XIX Medicaid
- Operated in the State of Washington by HCA
- A program that reimburses school districts for outreach and linkage activities that school staff routinely do
- Optional for all school districts

Why Participate in MAC?

- The Program assists students and their families by linking them to health services including dental, vision, mental health, family planning, and substance abuse or assisting families with applying for health insurance.
- There is revenue, **not grants**, for school districts that participate.

	SD/ESD Share per Quarter	Federal Share per Quarter	Potential Annual Revenue
2016 Claiming Data	\$29,188.87	\$29,188.87	\$116,755.50

Why Participate in MAC?

- This is real money that can be placed right back into your general funds and used however your school district decides.
 - Significant positive changes have occurred in the MAC Program since October 1, 2015.
- 

MAC Program Improvements

- The claiming system is **Web-Based** no longer paper.
- People who participate in the study will only need to respond to a few one-minute interval moments over the quarter, and they'll have up to two working days to respond to their moments.
- Responding to a moment is fast—it takes about one to two minutes. A moment represents a one-minute interval of time.

MAC Program Improvements

- Participants are notified by email when they have been selected to answer a moment. They respond to a series of four questions using dropdown selections, and then write a brief narrative detailing the specifics of their activity.
- Participants certify each of their moments, eliminating the need for supervisory review and obtaining multiple signatures.
- Reduced potential audit risk.

MAC Program Improvements

- Participating schools will receive payment for a “fourth” quarter (June, July, and August) based on the average of the first three quarter payments.
- **The bottom line?** From now on, there will be a significant reduction in time, effort, and resources needed to process claims, and districts can anticipate a significantly reduced turnaround time for getting reimbursement.

Claiming System Demonstration Video

- Answering a moment – Instructional Video Link: <https://youtu.be/A41jEdoO-HI>

Questions?

More Information:

Tyron Nixon, Program Specialist

Medicaid, Program Operations and Integrity

Tel: 360-725-1894

Tyron.nixon@hca.wa.gov

Jonathan Rush, Program Specialist

Medicaid, Program Operations and Integrity

Tel: 360-725-1842

Jonathan.rush@hca.wa.gov

More information is available at

<http://www.hca.wa.gov/billers-providers/programs-and-services/medicaid-administrative-claiming-mac>