

# Believing In Achieving



## **Session 9**

### ***Medicaid Updates***

Lauren Holahan

Session 9 will not have handouts; however, participants are encouraged to visit this website for Medicaid information:

<http://ec.ncpublicschools.gov/finance-grants/medicaid-in-education/resources>

63<sup>RD</sup> CONFERENCE ON EXCEPTIONAL CHILDREN

# Believing In Achieving

SHERATON FOUR SEASONS | KOURY CONVENTION CENTER | GREENSBORO, NC



# Medicaid Updates

Laurie Ray and Lauren Holahan,  
NCDPI Medicaid Consultants

Session 9, 8:30 a.m. – 9:30 a.m.  
Thursday, November 21, 2013





# Topics

- Visit limits and private SLP services
- LEA RAC audits
- Co-signature
- Documentation
- Question and answer



# Visit Limits

- Independent practitioners asking parents to deny services at school
- Visit limits are arbitrary
- Confidentiality concerns regarding sharing IEP with IP
- DPI requesting DMA to stop:
  - Stop requiring independent practitioners to access students' educational records as part their prior approval procedure
  - Stop including LEA services in the visit limits applied to independent practitioners in policy 10-A, *especially* when LEAs are not seeking DMA reimbursement for school-based services



# Recovery Audit Contractors

- LEA audits have not yet begun
- LEAs will not have access to audit rubric
- 36-month extrapolation frame
- Health Management Systems (HMS) is the NC RAC auditor
  - Email – [NCRACII@HMS.com](mailto:NCRACII@HMS.com)
  - Web site – <http://www.medicaid-rac.com/ncproviders>
  - HMS Provider portal – <https://ecenter.hmsy.com>
  - Phone – 855-438-6415



# Co-signature of Treatment Notes

- All services provided “under the direction of” must have supervision provided and documented according to the Practice Act of the licensed therapist (LEA Policy 10-C 7.2k)
- Required for SLP Assistant documentation
- Not required for PTA or COTA notes
- Signature is not proof of supervision



# Documentation

- DMA LEA Policy 7.2, p.22
- Student name and dates of service
- Copy of treatment plan
- Copy of MD, DO, DPM, CNM, PA, or NP's order (date signed must precede treatment dates)
- Description of services for each billed date
  - Skilled interventions
  - Outcome/student response
  - duration of service in minutes
  - Signature and credentials of person providing each service
- For evaluations, copy of each test performed or a summary listing all test results, and written evaluation report
- Group therapy:
  - Must be noted for each recipient in group
  - Note must reflect simultaneous treatment in classroom
  - Note should reflect how much time therapist spent with each student for that day



# **Questions, Answers, and Commiserations**