

Fee For Service Program


**Medicaid Reimbursable School
Nursing Services
September 2008**

Agenda

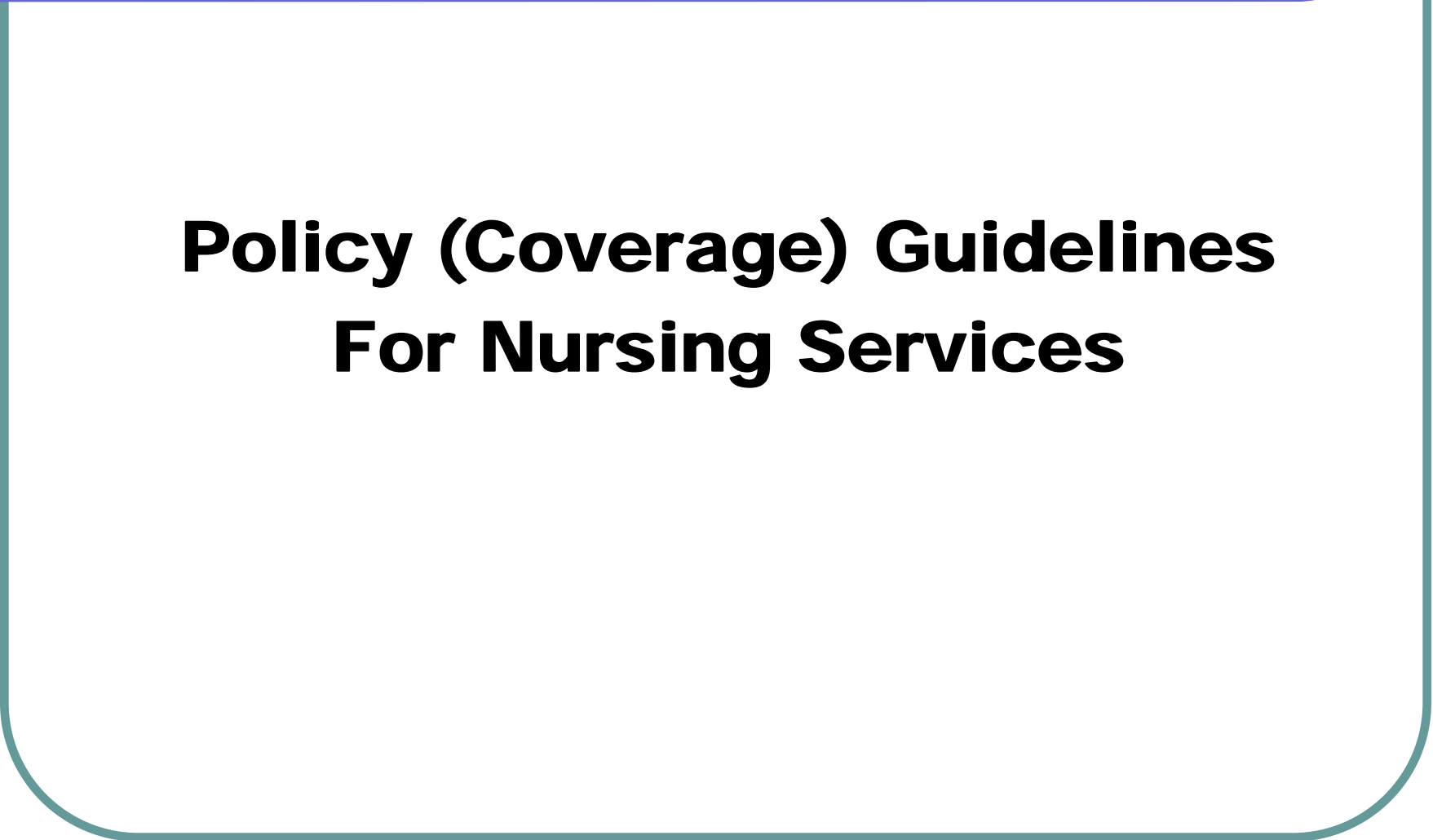
- Introductions
- Fee For Service Program
- Addition of Nursing Services
- Questions

Program Overview

- Under IDEA, children with disabilities must have access to a free and appropriate public education regardless of disability.
- Health-related services are provided at considerable costs to State and local school districts.
- Opportunities exist to offset some of these costs through NC's Medicaid program.
- Benefits of school-based claiming:
 - Improves access to needed services
 - Ensures federal participation in sharing associated costs of complying with EPSDT requirements
 - Budget-neutral to the State and enables local school districts to leverage funds



Policy (Coverage) Guidelines For Nursing Services



Definition of Nursing Services

- Nursing services must be those services that are directly related to a written plan of care based on a physician, physician assistant or nurse practitioner's written order. The plan of care must be developed by an RN and be part of IEP.
- These services may include:
 - bladder catheterizations
 - suctioning
 - medication administration and management including observation for adverse reactions, response or lack of response to medication and informing the student about the medications
 - oxygen administration, tracheotomy and ventilator care
 - enteral feedings
 - other treatments ordered by the physician, physician assistant or nurse practitioner and outlined in plan of care

Definition Cont'd

- collaboration with the student's primary physician regarding all medical/mental health-related medically necessary services that are outlined in the Individualized Education Plan
- training and oversight of delegated services by an RN
Including:
 - assessing capabilities of personnel in relation to client status and plan of nursing care and providing adequate training;
 - delegating responsibility or assigning nursing care functions to personnel qualified to assume such responsibility and to perform such functions; accountability for nursing care given by all personnel to whom that care is assigned and delegated; and
 - direct observation of clients and evaluation of nursing care given.

Eligibility

- Recipients ages 3 years through 20 years who are enrolled in a public school are eligible. Recipient eligibility for health-related services depends upon whether:
 1. the recipient is Medicaid eligible when services are provided;
 2. the recipient's need for treatment has been ordered by a licensed physician, physician assistant, or nurse practitioner; and
 3. the recipient receives the service(s) in the public school setting or a setting identified in an Individualized Education Plan (IEP) or Individualized Family Service Plan (IFSP) and the services are part of an IEP/IFSP.

Medical Necessity Criteria

- **Nursing Services** Medicaid accepts the medical necessity criteria for beginning, continuing, and terminating treatment as documented in an established plan of care ordered by a physician, physician assistant, or nurse practitioner. Services must be within the scope of practice and comply with other licensure rules as outlined in the North Carolina Nursing Practice Act. **A verbal or a written order must be obtained for services prior to the start of the services. Backdating is not allowed.**

Providers Eligibility Requirements

- **Nursing Services**
- Licensed registered nurses (RN) or licensed practical nurses (LPN) under the supervision of a registered nurse. Nurses must be licensed to practice in the State of NC. Certain tasks may be delegated by the RN to unlicensed school personnel, Delegated staff are school or contracted staff such as teachers, teacher assistants, therapists, school administrators, administrative staff, cafeteria staff, or personal care aides.
- The RN determines the degree of supervision and training required by the LPN and staff to whom duties have been delegated in accordance with the Nursing Practice Act. The RN must be available by phone or beeper to individuals being supervised.
- The plan of care must be developed by the RN based on a physician, physician assistant or nurse practitioner's written order.
- Nurses must be either employed by or under contract with the LEA.

Documenting Services

- Each provider must maintain and allow DMA to access the following documentation for each individual:
- The patient name and Medicaid identification number.
- A copy of the treatment plan. (IEP accepted for LEAs.)
- A copy of the MD, PA, or NP's order for treatment services. Date signed must precede treatment dates.
- Description of services (intervention and outcome/client response) performed and dates of service.
- The duration of service (i.e., length of assessment and/or treatment session **in minutes**).
- The signature of the person providing each service.

Documenting Services cont'd

- For medication administration under Nursing Services, a flow sheet or equivalent documentation must be used by the nurse or delegated individual. The documentation must show the nurse/ delegated individual's full name and title. The date and time administered as well as nurse/ individual's initials and title must be written after each medication given. A narrative note summarizing the medication administered must be **completed at least weekly** by the RN with (if appropriate) input from the delegated person administering medication. This note should document results from the medication, side effects of medication and any other pertinent data.
- Other nursing services outlined in the plan of care require the same documentation as all IEP services.
- For delegated services there must be documentation of training and validation of competency by the RN to the person who will be performing the procedure. In addition, **documentation at a minimum monthly**, that the RN monitors the care of the student to ensure that the procedure is being performed safely and effectively. The documentation usually is a form in which the school nurse and the assistant sign and date that the procedure is being done correctly.

Documenting Services cont'd

- Documentation does not have to be lengthy and can be accomplished in a couple of sentences. It does, however, have to be clear to a reviewer to support the services billed.
- **The student's IEP, does not serve as documentation sufficient to demonstrate that a service was actually provided, to justify its medical need, or to develop a Medicaid claim.** The IEP represents a plan of care showing what services are to be provided and at what frequency. It does not document the provision of these services.

Treatment Services

- Under Nursing Services, collaboration with the student's primary physician regarding all medical/mental health-related medically necessary services that are outlined in the Individualized Education Plan is encouraged. It is important that the student's primary physician be aware of the health related services being received by the student in the school.
- Time spent for preparation, processing of claims, documentation regarding billing or service provision, and/or travel is not billable to N.C. Medicaid or to any other payment source, since it is a part of the treatment process which was considered in the determination of the rate per unit of service. Under Nursing Services, any medical services such as acute illness or injury, routine services rendered to all students such as vision and hearing screens, are not billable if they are not designated in the IEP.

Billing

Nursing Services Code Unit of Service

- T 1002(1 unit = 15 minutes) for RN services
- T 1003(1 unit = 15 minutes)- for LPN services
- S 5125(1 unit = 15 minutes)- for delegated staff services

References and Links

- <http://www.dhhs.state.nc.us/dma/> check monthly for bulletin and policy updates
- <http://www.ncpublicschools.org/ec/medicaid/> DPI medicaid site for updates
- <http://cms.hhs.gov/medicaid/schools/scbintro.asp> Federal guidelines- FFS
- <http://cms.hhs.gov/medicaid/schools/clmguide.asp> Federal guidelines- MAC
- Billing and claims inquiries: EDS
Provider services 1-800-688-6696

References and Links

- DMA Fee for Services policy questions:
Nora Poisella 919-855-4317
Nora.Poisella@ncmail.net
- DMA Administrative Claiming:
Sandy Frederick 919-855-4153
Sandy.Frederick@ncmail.net
- DMA Cost Reconciliation Process :
Kimberly Ibrahim DMA Rate Setting
919-855-4205
Kimberly.Ibrahim@ncmail.net
- DPI Medicaid consultants
Laurie Ray- 919- 636-1827
laurie_ray@med.unc.edu
Lauren Holahan - 919.843.4466
lauren_holahan@med.unc.edu