School Medicaid Readiness Assessment Tool

February 2024

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Overview

Medicaid is a state and federal partnership focused on funding health and medical services for enrolled beneficiaries. Since 1988, Medicaid has permitted payment for covered medically necessary services provided to children eligible under the Individuals with Disabilities Education Act (IDEA) pursuant to an Individualized Family Service Plan (IFSP) or an Individual Education Program (IEP). School Medicaid reimburses school districts for costs of covered health related services, supplementary aids and services, and program modifications and supports for school personnel. This reimbursement is provided to school districts for services already paid. Therefore, School Medicaid can be a great way of recouping costs.

Implementing School Medicaid billing can be a complex process that requires careful analysis and planning. This tool, in conjunction with the cost-benefit analysis document, can help education administrators assess the feasibility of implementing School Medicaid billing in their school districts and make informed decisions that benefit students, staff, and the school district as a whole.

Potential Benefits:
- School districts can obtain partial reimbursement for actual costs incurred for services already provided.
- School Medicaid reimbursement may be used to fund additional FTE and health services and supplies.
- With additional funding schools can better provide health services, which improve outcomes for students. School health services are a critical component of the health care safety net for students.

Step 1: Meet with State School Medicaid Staff

- They can provide a program overview checklist for startup and help school districts and programs navigate the steps outlined in this document.
- They can provide lessons learned and offer guidance on how to implement a School Medicaid billing program.
- They can provide ongoing training and technical assistance.
- They can discuss the legal and regulatory requirements related to School Medicaid billing:
  - The federal and state laws and regulations that govern School Medicaid billing
  - Compliance and documentation requirements for billing School Medicaid

State School Medicaid Team
Oregon Department of Education:

- Jennifer Dundon - jennifer.dundon@ode.oregon.gov
- Shelby Parks – shelby.parks@ode.oregon.gov

Oregon Health Authority:

- Jennifer Smith – jennifer.smith@oha.oregon.gov
- Lasa Baxter, by contract, - lasa.baxter@imesd.k12.or.us

Step 2: Create a Project Team

- Determine who will be on the project team to ensure viability of the initiative. Decide on the roles and responsibilities of each team member. A project team should include leadership representation of key school units including administration, special education, general education personnel responsible for implementation of Section 504, business office, and health service providers. Once the project is moving forward, the project team will:
  - Define the goals of the project, based on the needs and requirements of key school units
  - Establish the scope of the project and the expected deliverables.
  - Define the day-to-day management of the project such as progress monitoring and how issues and/or barriers will be resolved.
  - Communicate effectively with all key units involved in the project. This includes keeping unit partners informed of progress, addressing any concerns or issues that arise, and ensuring that everyone is on the same page.

*See Step 5 and Step 6 for more information about how to inform these tasks.

Step 3: Conduct a Market Analysis

- Research other school districts in Oregon that are currently billing Medicaid for health services.
  - How successful have they been?
  - What challenges have they faced?
  - What can be learned from their experiences?

*The 2020 Report to the Oregon State Legislature on SB 111 School Medicaid Pilot Project contains the perspective and experience of the nine school districts that participated in the pilot project.

Step 4: Assess the Risks and Mitigation Strategies

- What are the potential risks associated with implementing School Medicaid billing?
- What are the mitigation strategies that can be put in place to minimize these risks?
- How will risks be monitored and managed over time?

Step 5: Identify the Key Partners

- Who are the key partners and practitioners that will be affected by the implementation of School Medicaid billing?
- What are their needs and expectations?
- How will you ensure their buy-in?
- How will they be involved in the process?
- Examples include:
  - Student Services Staff
  - Business Office Staff (finance, payroll, business manager)
  - School District Leadership
  - Medically-Licensed Staff (nurses, occupational therapists, physical therapists, speech-language pathologists/audiologists, licensed clinical social workers, etc.)
  - Central Office Administrators
  - Human Resources Staff
  - Information Technology Staff
  - Education Service District Staff/Contracted Service Providers
  - Community Partners
  - Students and Families

Step 6: Define Goals and Objectives

Now that you have engaged with key internal and external partners:
- What are the goals and objectives of implementing School Medicaid billing in your school district?
- Are there specific health services that your district would like to bill for initially and in the future?
- Are there specific financial goals or targets that your district is aiming to achieve through this process?

- How are you going to communicate this information?

Step 7: Assess Special Education Processes and Documentation

School Medicaid uses the IEP and/or IFSP as the prescriptive document. Therefore, IEPs and IFSPs need to clearly state the health services that the child needs in order to access their education. Additionally, School Medicaid requires that all medically-qualified staff work within the scope of practice of their licensure, including documentation. In order for School Medicaid billing to be sustainable, all education, licensing board, and Medicaid rules and regulations must be met.

- Do IEPs and IFSPs clearly reflect health services?
- Are the IEPs and/or IFSPs current?
- Is documentation of service provision tracked digitally or is it hand-written?
- Where is all IEP and/or IFSP documentation (including documentation related to the provision of health service) stored?
- Which IEP or IFSP software platform is utilized?

Step 9: Assess Internal Alignment and Operational Requirements

In order for School Medicaid billing to be sustainable, there needs to be cross-office collaboration and cooperation. Some key questions to consider:

- What are the operational requirements for implementing and maintaining School Medicaid billing?
- Are there any potential operational challenges that need to be addressed?
- Do you have the necessary staff, technology, and resources to implement and maintain the billing process?
- Will you use a 3rd party billing submitter or use the free provider web portal?
- Key offices that need to be in alignment:
  - Special Education
  - Student Services
  - Business Office (finance, payroll, business manager)
  - School District Leadership
  - Medically-Licensed Staff (nurses, occupational therapists, physical therapists, speech-language pathologists/audiologists, licensed clinical social workers, etc.)
  - Central Office Administrators
  - Human Resources
  - Information Technology

Conclusion

Before deciding whether to participate in the school Medicaid billing program, school districts should conduct a cost-benefit analysis and readiness assessment to determine whether the School Medicaid billing is currently a viable option. By following the steps outlined in this document, school districts can get a gauge on where they are at and where they need to go in order to be ready to start their program.

If a school district decides to move forward with implementation, they should connect with the State Medicaid points of contact listed above. The ODE and the OHA have the capacity to meet alongside school districts, provide technical assistance and training, provide guidance and answer questions as often as needed.