

Purpose

This document is intended to be a companion to the [School Medicaid Cost-Benefit Analysis Tool](#). It provides a simple, practical roadmap for completing a cost-benefit analysis and helps education agencies identify a manageable starting point, understand potential work and costs involved, and decide whether and how to move forward with School Medicaid billing.

Ideas for Getting Started

- Review the cost-benefit analysis tool.
- Set up an onboarding conversation with the State School Medicaid team.
- Reach out to other education agencies of your size that bill Medicaid.
- Think through the benefits of entering a billing partnership with an ESD.

And Remember...

You can start small! You don't have to bill for every eligible service right away. You can start with evaluations, a specific service like nursing, or with a group of students that have high needs and then build over time.



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Cost-Benefit Checklist: Project Team



Bring the right people together

School Medicaid crosses multiple areas of an education agency, including health services, special education, finance, IT, HR, and administration. Bringing the right people together early helps the team understand the opportunity, support sustainability, and identify roles and responsibilities.

Action Steps:

- Identify a School Medicaid Lead or Coordinator
- Review the offices listed above and figure out who needs to be part of the team
- Learn what services are shared/provided by the ESD and map out how you will partner (if applicable)
- Schedule an initial planning meeting
 - Invite Representatives from the offices listed above
 - Include your ESD (if applicable)

Timeline: _____

Deliverable: Planning team and lead identified





Decide how you will manage billing

The school district responsible for providing a free appropriate public education (FAPE) must consent to allow another EA to bill on their behalf. If an EA is partnering with another EA for billing support, OHA requires that the EAs have an executed agreement.

Decide whether an ESD partnership could make the work easier. Things to consider:

- Does the ESD provide health services practitioners? If so, what is the cost?
- Do you share student information and documentation platforms with the ESD?
- Does the ESD offer School Medicaid billing support, including access to a School Medicaid billing submission platform and Medicaid coordinator services?

Who: District leadership, School Medicaid Coordinator, Business Office, ESD Leadership (if applicable)

When: _____

Deliverables:

- ☐ Billing Arrangement Identified
- ☐ Roles and Responsibilities Documented
- ☐ ESD Agreement Needed?





Look at the services you already provide

You already have information that can help you estimate your billing opportunity. Start with what you know rather than creating new data collection processes. The project team can work together to put together the information below (or at least come up with a reasonable estimate).

Identify the:

- **Number of SBHS-recognized providers** employed or contracted by the education agency who provide covered services, by service type (nursing, occupational & physical therapy, speech-language pathology, mental and behavioral health).
- **Estimated number of evaluations and assessments** conducted by SBHS-recognized providers and the amount of time they take to complete.
- **Number of Medicaid-enrolled students** that receive covered health services.
- **Estimated service minutes** documented in IEPs or other plans of care, by discipline. Higher volumes of service minutes generally indicate greater billing potential.
- **Students with complex health or support needs**, such as students in complex-needs classrooms, students who qualify for the High-Cost Disability Grant, or students with a 1:1 nurse or health aide.

Timeline: _____

Deliverable: List of potential services and an estimate of service volume



Choose a manageable place to start

Remember - you do not have to begin billing for every possible service! Starting with an area where your team already has strong documentation, established processes, practitioner buy-in, and/or significant service volume can make implementation more manageable.

Action Steps:

- **Review** and discuss the service information that you gathered
- **Consider** the amount of service, number of students, available practitioners, and current documentation processes
- **Identify** two or three potential starting points
- **Discuss** with key partners and select the starting point that is both valuable and manageable

Timeline: _____

Deliverable: Our proposed starting point(s)



Cost-Benefit Checklist: Estimate Revenue



Understand the potential revenue

An estimate can help your team determine whether the potential reimbursement is large enough to justify the work and resources needed to implement a School Medicaid billing program.

Action Steps:

- Take the services identified in the previous step
- Find the average cost-based rate for the services that you want to bill (see appendix)
- Apply the current FMAP rate
- Conduct calculation (see example below)

Nursing Cost Per/Hour	Frequency of 1:1 Nursing Support	Nursing Cost Per/Hour x Service Hours Per/Week	FMAP	Paid Claim
\$95.38	• 6 hours per day • 5 days per week	$\$95.38 \times 30 \text{ hours} = \$2,861.40 \text{ per week}$ $\$2,861.40 \times 24 \text{ weeks} =$ \$68,673.60 per year	34% Match: $\$68,673.60 \times .34 =$ \$23,349.24 66% Reimbursement: $\$68,673.60 \times .66 =$ \$45,324.58	\$45,324.58 reimbursement + return of match payment of \$23,349.24 for a total of \$68,673.60

Timeline: _____

Estimate of Potential Revenue: _____



Identify what it will take to get started

School Medicaid participation requires an investment of staff time and resources. Understanding these costs up front helps your team make realistic decisions about implementation.

Action Steps:

- Estimate staff time needed to set up and operate the program.
- Identify one-time program setup and training needs.
- Identify software integration and/or billing platform costs (if applicable).
- Plan for the initial match payment and related cash-flow needs.

Timeline: _____

Estimate of Potential Revenue: _____



Estimated Costs: _____



Estimated Net Revenue: _____



Cost-Benefit Checklist: Next Steps



Make a decision and plan the next steps

The purpose of this analysis is to help your team make an informed decision – not just calculate potential reimbursement. Consider the most strategic way forward.

Action Steps:

- Share the data with planning team and review the estimated reimbursement and costs.
- Use the data to hold discussions with key school staff involved in decision-making.
- Discuss whether starting smaller would make implementation more manageable. For example, begin billing for just **evaluations** or students that have a **1:1 nurse**.
- Decide whether to move forward, gather more information, or wait until your organization is ready. See the [School Medicaid Readiness Assessment](#).
- Identify specific next steps, responsible staff, and target dates.

Timeline: _____

Decision: _____

Next Steps: _____

Responsible Person: _____

Target Date: _____



Cost-Benefit Checklist: Action Steps



Have you completed the following steps?



Project Team

Person Responsible:

Completion Date:

Notes:



Managing Billing

Person Responsible:

Completion Date:

Notes:



Services

Person Responsible:

Completion Date:

Notes:



Starting Place

Person Responsible:

Completion Date:

Notes:

Learn more at <https://www.oregon.gov/ode/students-and-family/healthsafety/Pages/medicaid.aspx>

Cost-Benefit Checklist: Action Steps (cont.)



Have you completed the following steps?



Estimate Revenue

Person Responsible:

Completion Date:

Notes:



Estimate Startup Costs

Person Responsible:

Completion Date:

Notes:



Next Steps

Person Responsible:

Completion Date:

Notes:

Learn more at <https://www.oregon.gov/ode/students-and-family/healthsafety/Pages/medicaid.aspx>