



# Funding School Health Through Medicaid

March 17, 2025

## An Introduction to Oregon's Direct Service Program

# Webinar Team

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- Jennifer Dundon
- Shelby Parks

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# Session Objectives

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By the end of the session, participants will



Learn about the Oregon School-Based Health Services (SBHS) Medicaid Program, including the program purpose and goals.



Understand what is required for an education agency to enroll in the program and start billing.



Identify concrete next steps for enrollment in the program.

# Webinar Agenda

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- Welcome and Opening
- Program Overview
- Covered Services and Billable Practitioners
- Enrollment 101
- Documentation
- Service Examples
- Questions and Answers



# Program Overview



# Benefits of Pursuing School Medicaid Reimbursement

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School health services are a critical component of the health care safety net for students and support improved lifetime outcomes for students.



EAs can obtain partial reimbursement for costs incurred for services already provided.



School Medicaid reimbursement is a flexible funding stream that may be used to increase access to comprehensive school health and behavioral health services.

# School-Based Health Services Medicaid (1)

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Medicaid is a state and federal partnership focused on funding health and medical services for enrolled beneficiaries.



Medicaid reimburses EAs for medically necessary and appropriate Medicaid-covered services provided to children and young adults (birth–21) provided pursuant to an Individual Plan of Care (IPOC).



The Centers for Medicare and Medicaid Services (CMS) approved two SBHS State Plan Amendments (SPAs). OHA is taking a phased approach to implement the expansion of Medicaid covered services and provider types.



# Types of School-Based Health Services Medicaid Billing

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## **Medicaid Administrative Claiming (MAC)**

- Care Coordination
- Health Services Program Planning & Policy Development
- Referral
- Monitoring
- Outreach

## **Medicaid Direct Services**

- Care Coordination
- Health Services
- Evaluations & Assessments



# School-Based Health Services Medicaid (2)

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OHA is Oregon's State Medicaid Agency and has authority over, and administers, the SBHS (School Medicaid) program and associated rules and regulations.



ODE provides support to EAs for efficient and sustainable Medicaid billing, alignment of education systems and processes in schools, interpreting education rules and regulations, and navigating the crossover between health and education.



Together, OHA and ODE partner to provide training, technical assistance, guidance, and resources for school districts and programs.

# Qualified Education Agencies

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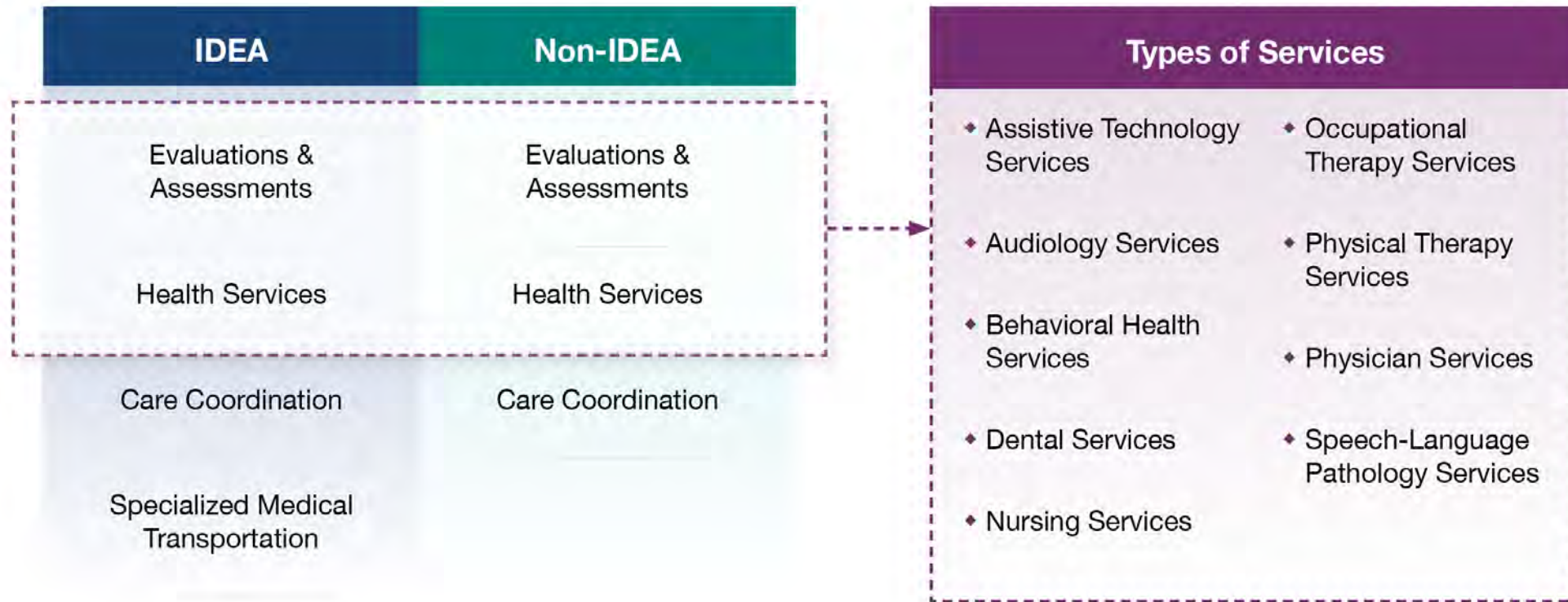
- State institutions
- Early Intervention/Early Childhood Special Education (EI/ECSE) contractors
- School districts
- Education service districts (ESDs)
  - IDEA and non-IDEA billing require separate enrollment as school Medicaid providers.



# Covered Services and Billable Practitioners



# Covered Services



# Medically Qualified (Billable) Practitioners

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## **Behavioral Health Services**

- Licensed Psychiatrists
- Psychologists
- Psychologist Associates
- Psychology Technician
- Licensed Clinical Social Worker
- Clinical Social Work Associate,
- Licensed Professional Counselor
- Marriage and Family Therapist

## **Dental Health**

- Licensed Dentists
- Expanded Practice
- Dental Hygienist
- Licensed Dental Therapist

## **Nutrition Services**

- Licensed Dietitians

## **Rehabilitation and Therapeutic Services**

- Licensed Occupational Therapist
- Certified Occupational Therapist Assistant
- Licensed Physical Therapist
- Licensed Physical Therapist Assistant, Speech-Language Pathologist
- Speech-Language Pathologist Assistant
- Licensed Audiologists

## **Nursing Services**

- Nurse Practitioners
- Registered Nurses
- Licensed Practical Nurses
- Unregulated Assistive Persons

## **Physician Services**

- Medical Doctors
- Doctor of Osteopathic Medicine
- Doctor of Podiatric Medicine,
- Physician Assistants

# Enrollment 101



# Getting Started

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Before enrolling in the School Medicaid Program, your EA should complete the following steps to identify if the program is right for you and your agency's unique needs.

1. Meet with state school Medicaid staff.
2. Conduct a cost-benefit analysis.
3. Conduct a readiness assessment.

Impact vs. Effort: Focus effort on what will bring the highest reimbursement while balancing administrative effort.

# Two Enrollment Categories

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## Billing Provider

- School districts
- Education service districts
- EI/ECSE contractors
- State institutions



## Referring Provider

- Supervisory-level medically qualified individuals

# Billing Provider: Three Program Types

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## 1. IDEA Health Services

- If you are already enrolled, nothing is changing.
- For new EAs, a separate National Provider Identifier (NPI) and enrollment is required.

## 2. Non-IDEA Health Services

- For everyone, a separate enrollment is required for billing non-IDEA 0-21 services, including a separate NPI.

## 3. EI/ECSE

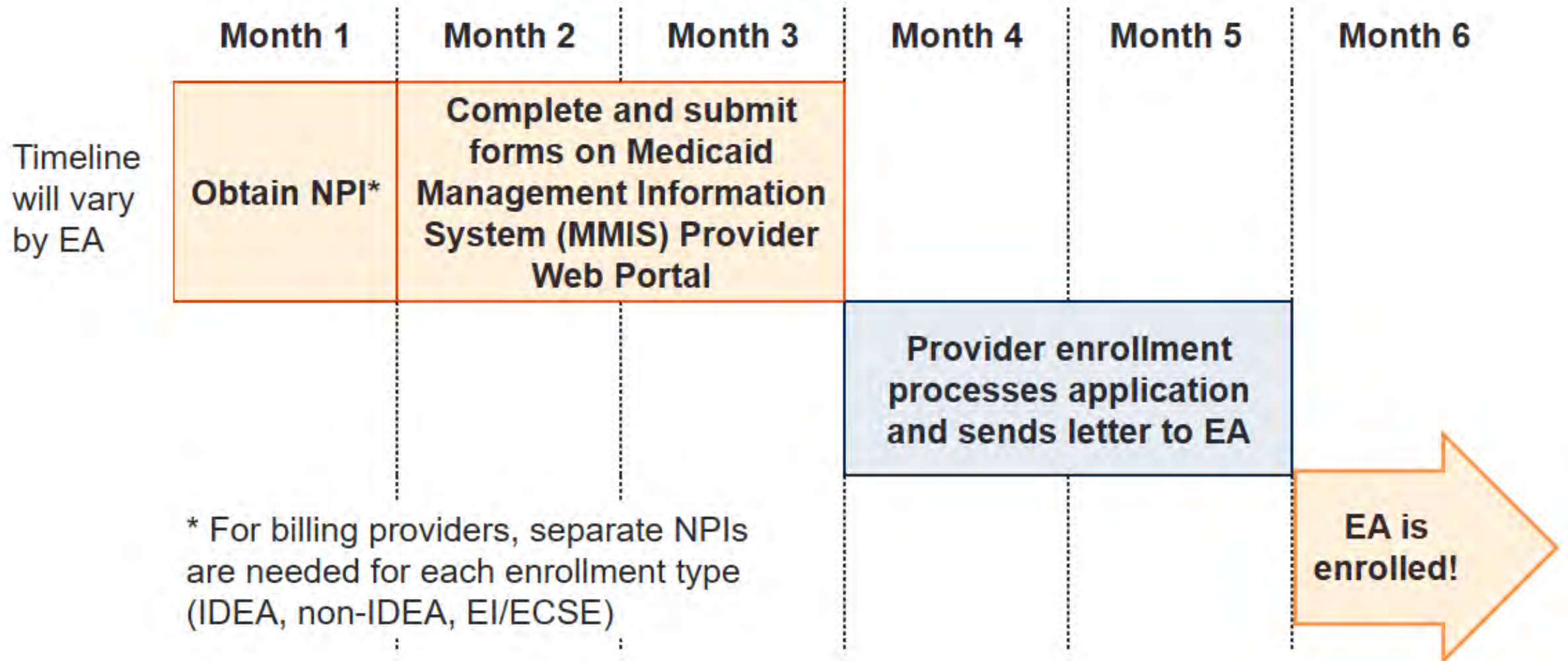
- ODE contracts with EAs.
- Nothing is changing around enrollment.

# Referring Provider: One Enrollment

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- EAs must include a supervisory-level medically qualified individual as the referring provider on each claim submitted to OHA.
- Supervisory-level medically qualified individuals (e.g., registered nurses, licensed physical therapists, speech language pathologists, licensed audiologists, licensed clinical social workers) providing covered health services in educational settings must be individually enrolled and have an active Medicaid provider ID.
- Referring providers **do not** need separate enrollments for IDEA, non-IDEA, and EI/ECSE services.

# General Enrollment Process



# Enrollment for ESDs for 0-21 Services

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ESDs became eligible billing providers in 2024.

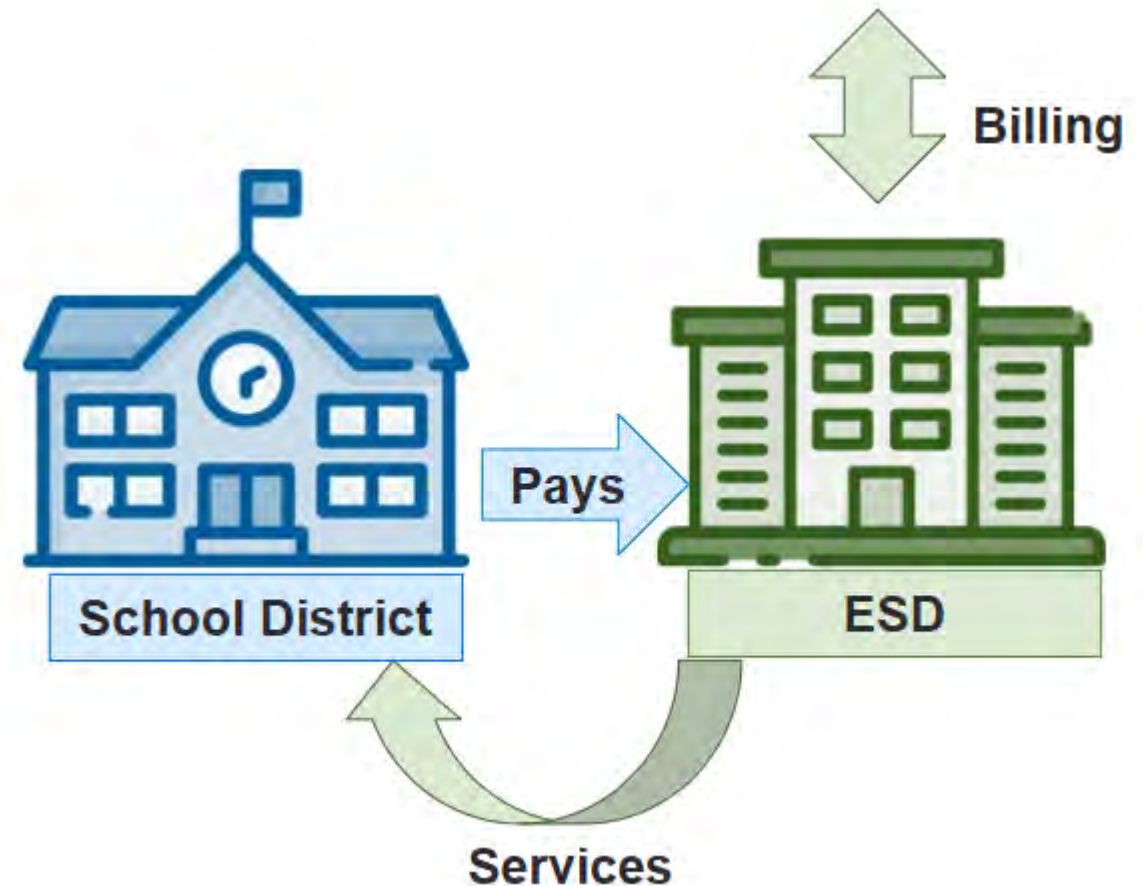
For ESDs to bill

- The school district where the student is enrolled must consent to allow the ESD to bill for services provided on behalf of the school district.
- A formal process needs to be in place to ensure there is no duplication of Medicaid billing.
- A contract or memorandum of understanding (MOU) must be executed to delineate the billing relationship.



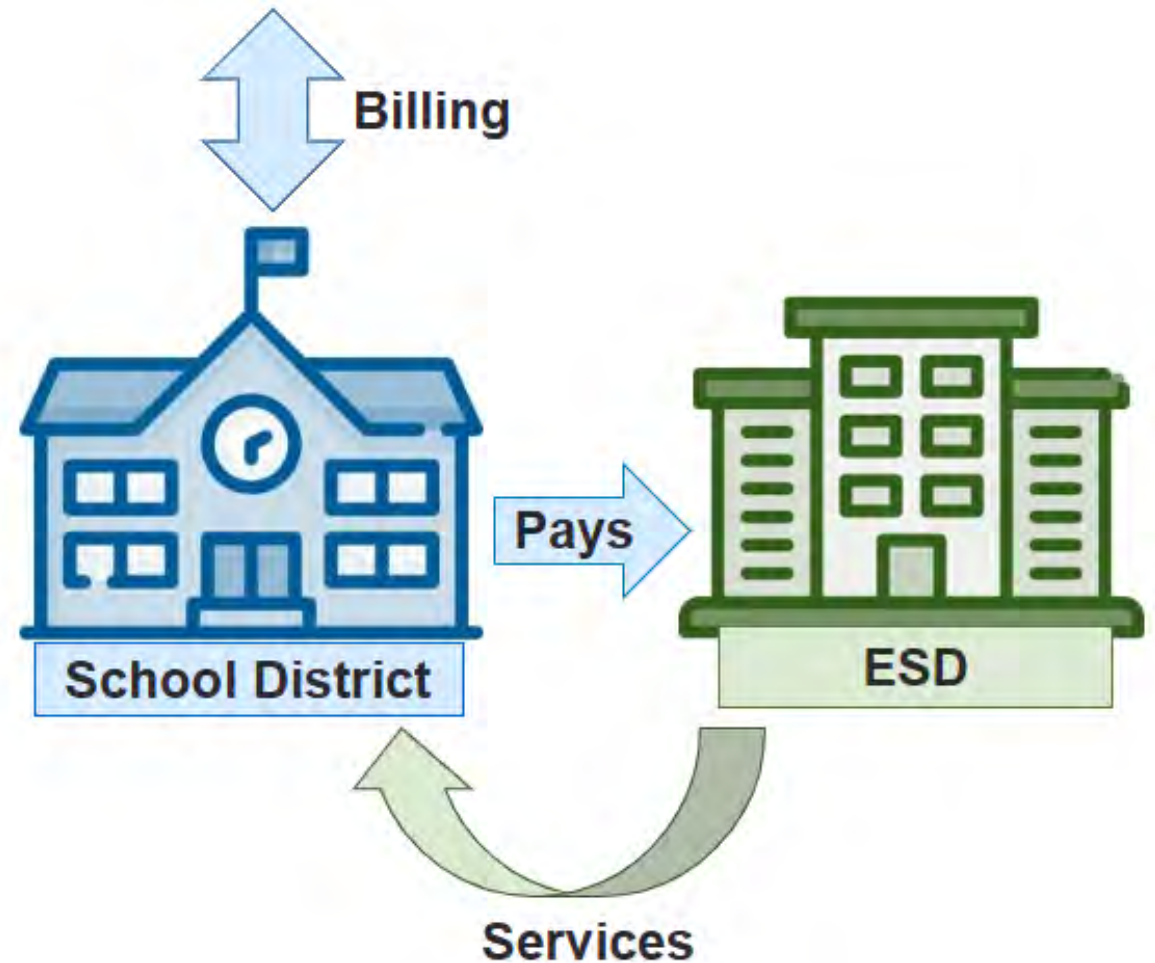
# ESD Example Model #1

The school district contracts and pays the ESD for covered health services. The ESD bills for those services provided by ESD employees and offsets the school district's cost based on reimbursement received through billing.



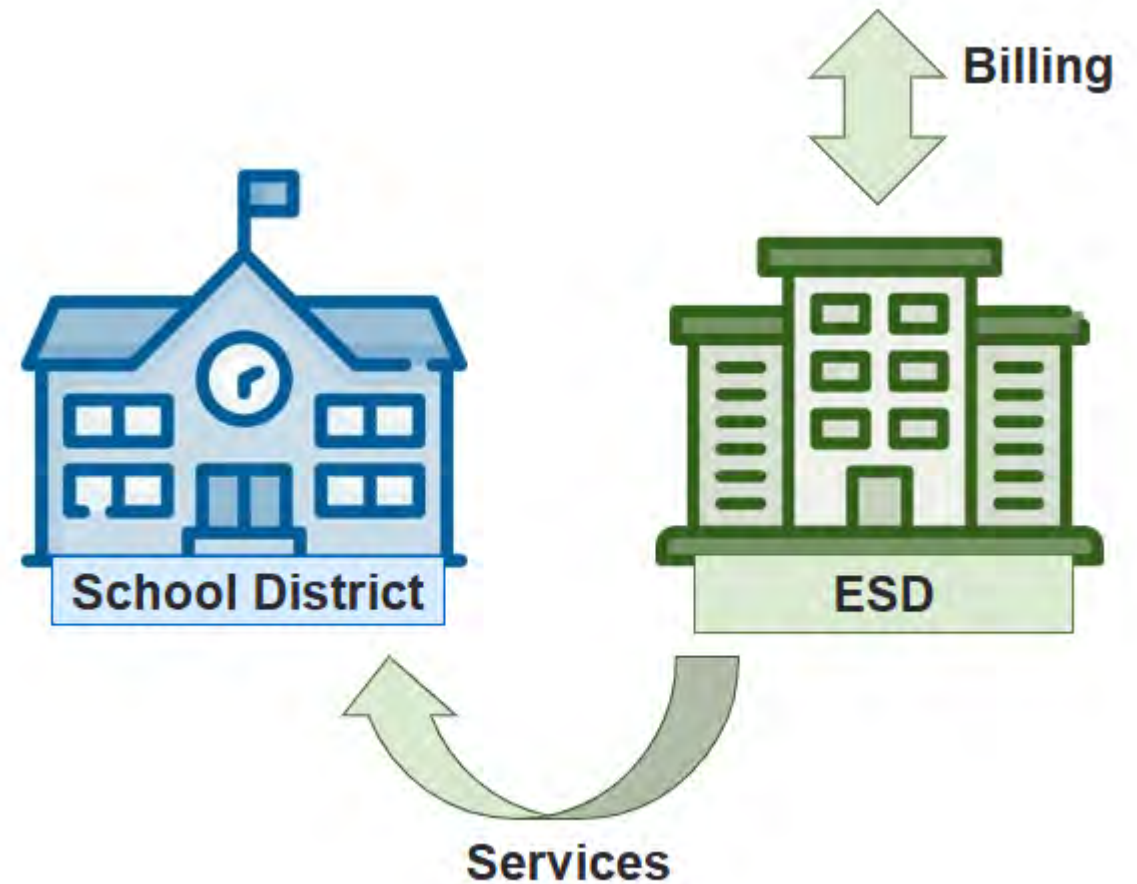
## ESD Example Model #2

The school district contracts and pays the ESD for covered health services. The contract costs are included in the school district's cost calculations, and the school district is the billing provider for services provided by ESD employees. The school district receives all billing reimbursements.



## ESD Example Model #3

The ESD, under an agreement, provides covered health services, documentation support and staff training to the school district. The school district authorizes the ESD as the billing provider. The ESD receives all billing reimbursements and reinvests into the ESD's program budget.



# Enrollment Best Practices (1)

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- Begin discussions between ESDs and school districts as soon as possible to allow for MOU drafting and execution timelines.
- Ensure separate NPIs are assigned to the billing provider (i.e., EA) for each program type:
  - IDEA
  - Non-IDEA
  - EI/ECSE services
- Make sure all supervisory-level medically qualified individuals enroll as referring providers.

## Enrollment Best Practices (2)

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- Complete all forms and review the *SBHS Provider Enrollment Instructions* before starting the enrollment process via the MMIS portal.
- Ensure forms are completed entirely. A date of birth and social security number are required for the EA's designated signatory. Providing this information is essential and does not expose the designated signatory to personal liability claims.
- Develop a written notification and parent consent process.



# Documentation









# Supporting Documentation

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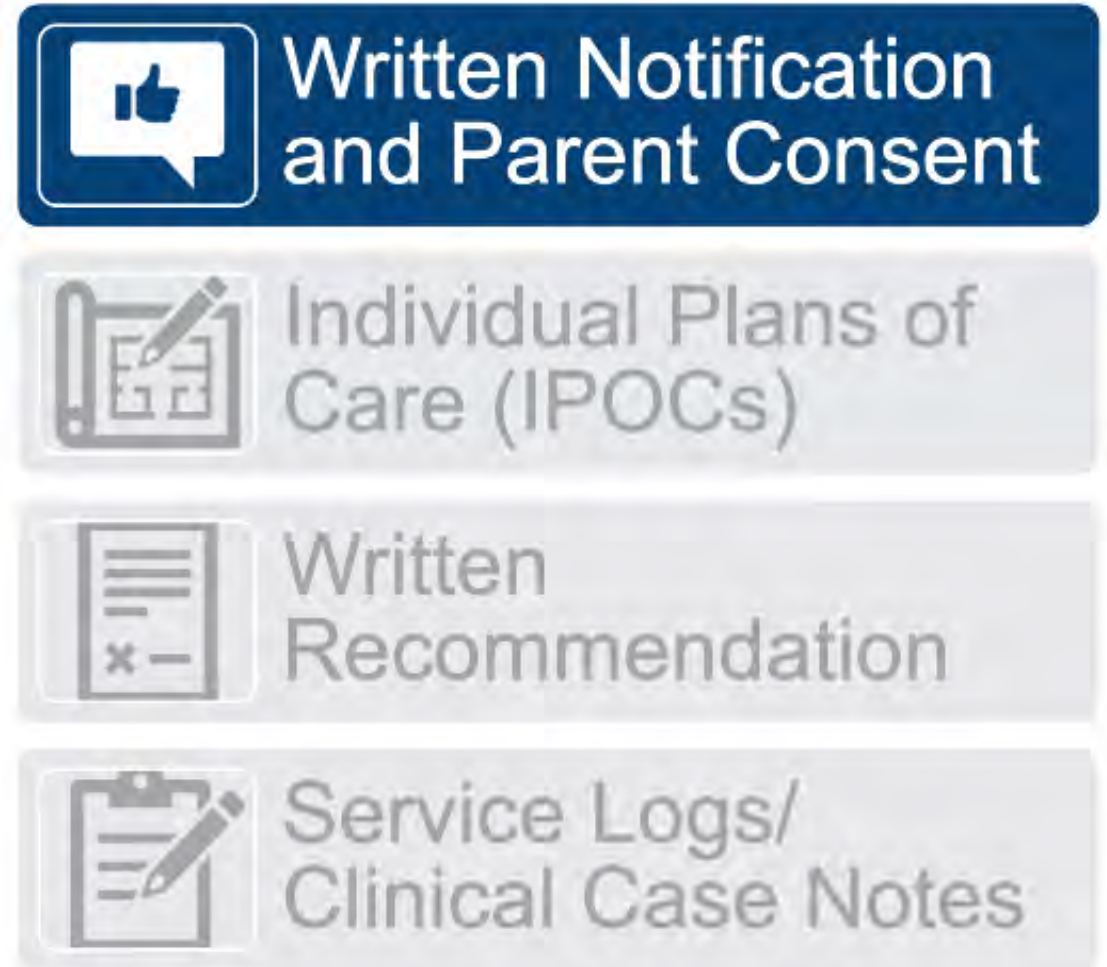
Documentation includes **all relevant records** required to document services provided to students.

-  Written Notification & Parent Consent
-  Individual Plans of Care (IPOCs)
-  Written Recommendation
-  Service Logs/  
Clinical Case Notes

# Written Notification and Parental Consent

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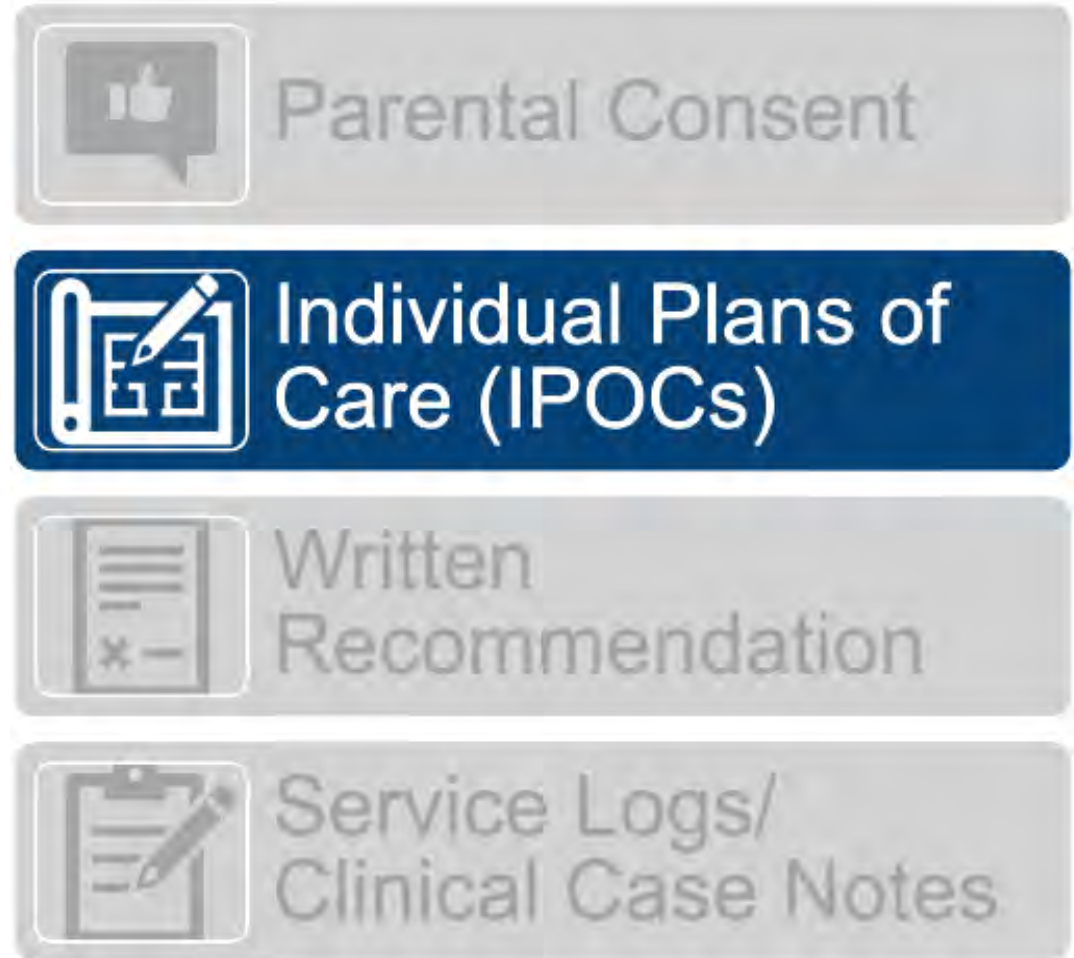
- EAs must provide written notification and obtain parent consent before disclosing information about a student to access Medicaid reimbursement.
- The effective date of the parent consent is the date it is signed. The parent consent may not be backdated.
- ODE has written notification and parent consent forms and information online.



# What is an IPOC?

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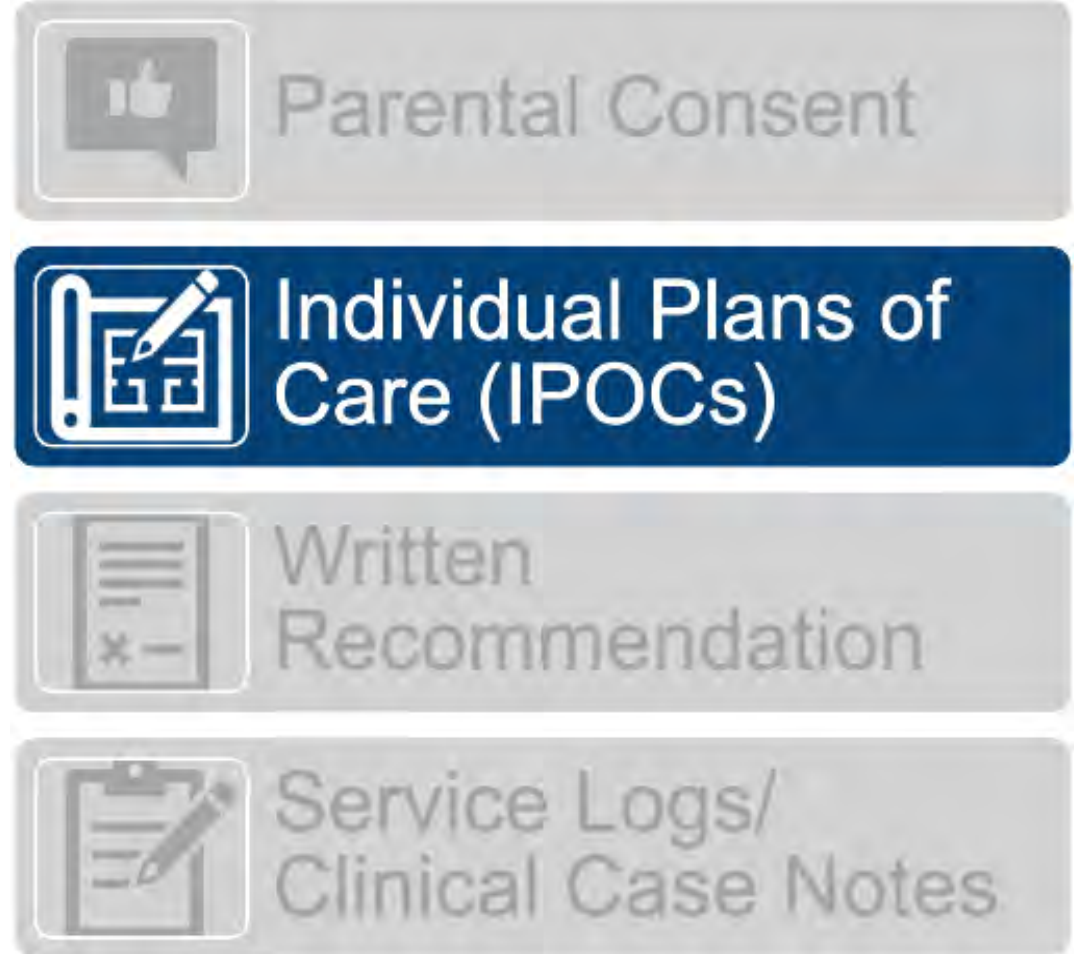
- A prescriptive document required for billing Medicaid for school-based health services
- A general term that may cover a variety of plans
- Not a stand-alone document
- Examples include Individualized Education Plans (IEPs), Individualized Family Support Plans (IFSPs), nursing care plans



# IPOC Required Elements

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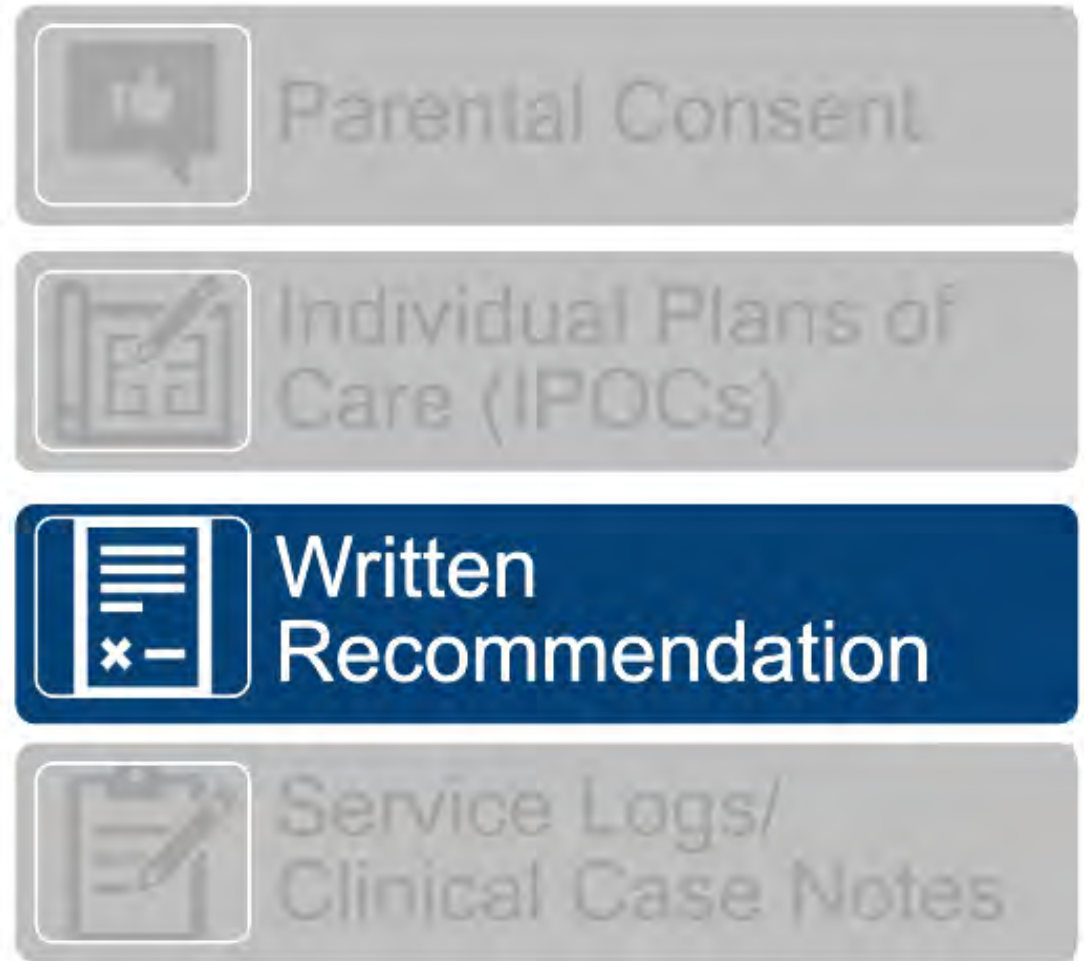
- The effective dates of the IPOC
- The specific child or young adult's name
- The EAs name
- Each necessary and appropriate health service category, including the nature, extent **or** units of service and the therapeutic value for each service



# Written Recommendation

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- Medicaid-covered health services must be supported by a licensed practitioner recommendation.
- Medically qualified individuals must document, within their scope of practice, the services they recommend to meet the definition of medically necessary and appropriate.
- Medically necessary and appropriate are defined in OAR 410-151-0001.

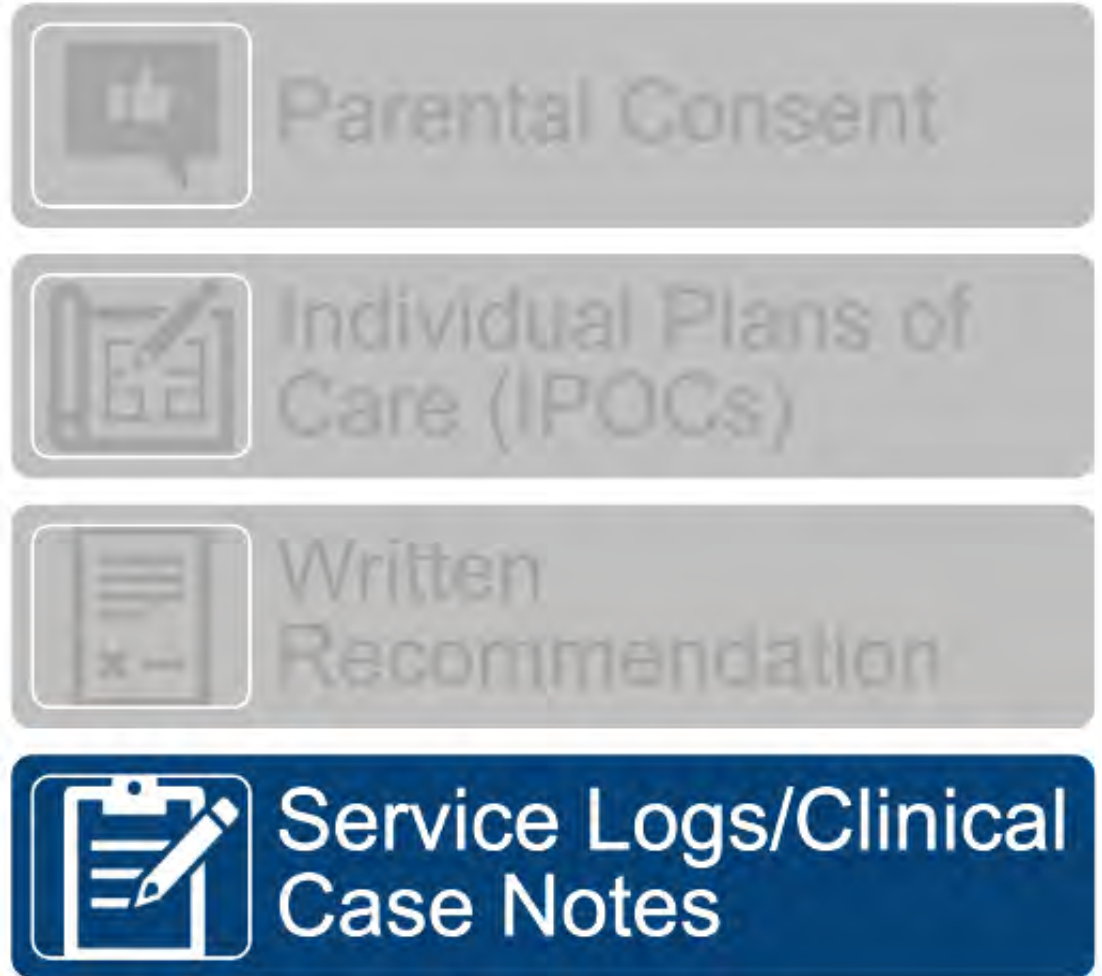




# Service Documentation

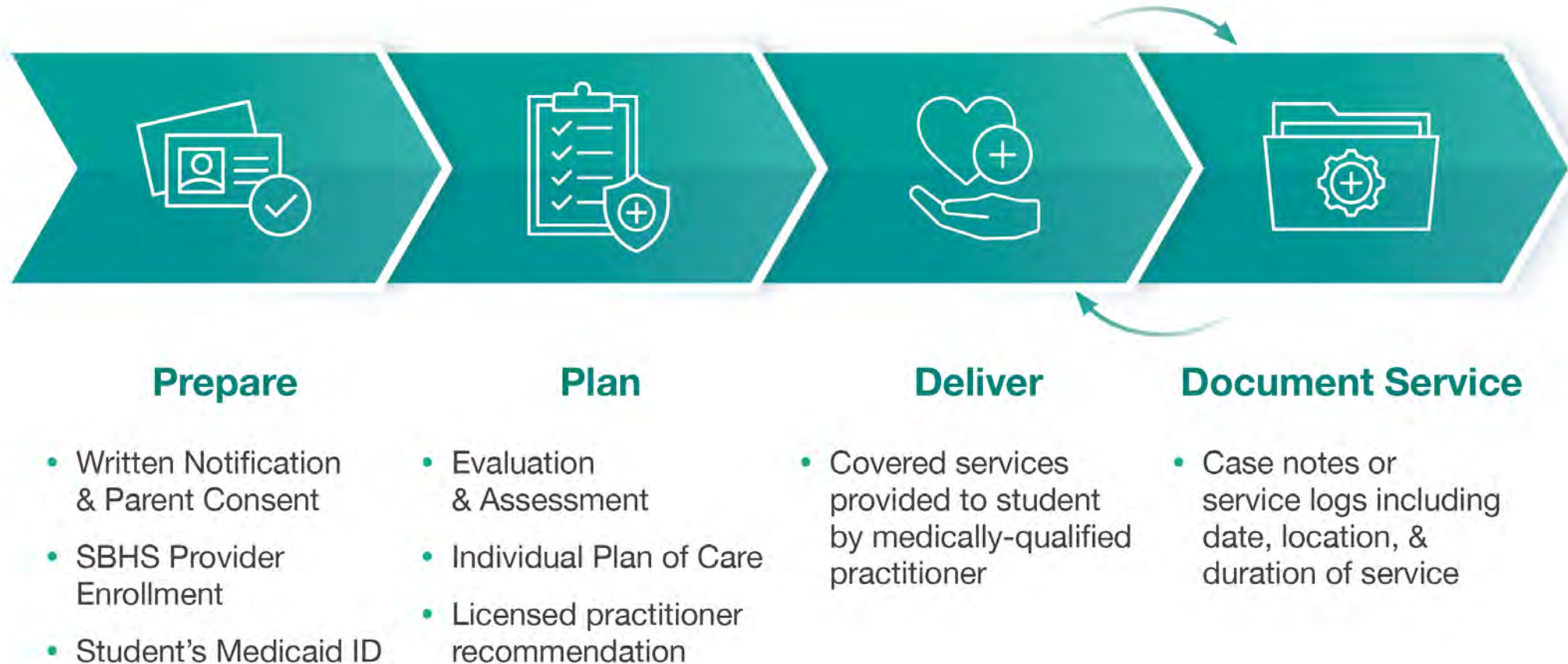
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- Practitioners should follow the requirements for service documentation set by respective Board licensing requirements.
- Medicaid requires that service documentation include a diagnosis code.
- Generally, service documentation could include
  - date, location and duration of service; and
  - practitioner and student name
  - Supervisor's name, if needed.



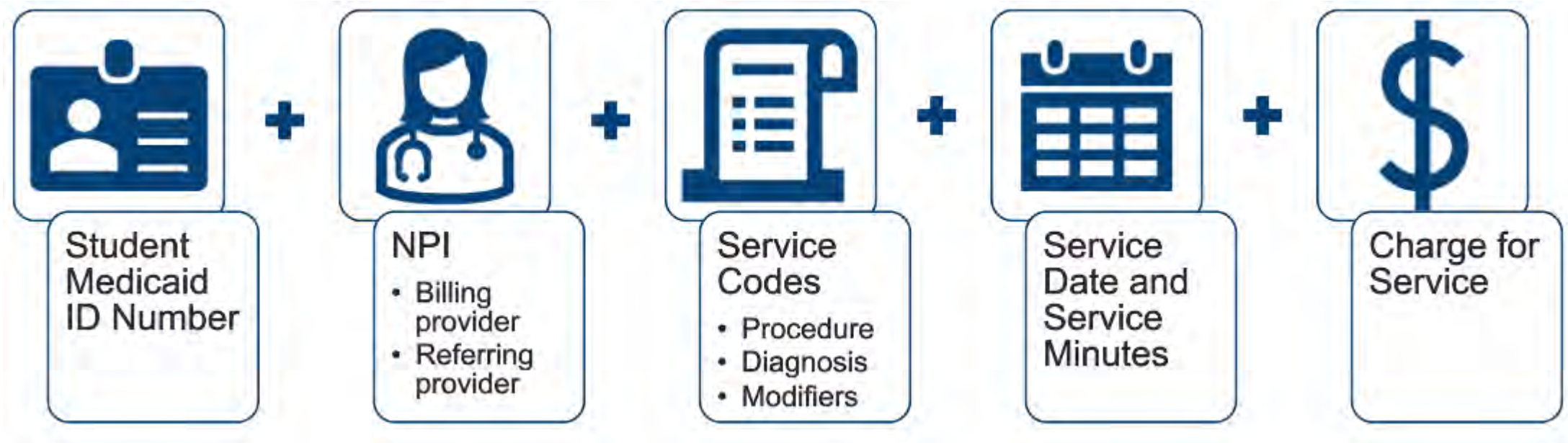


# Example Documentation Process



# Required Elements for Submitting Claims

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# Service Examples

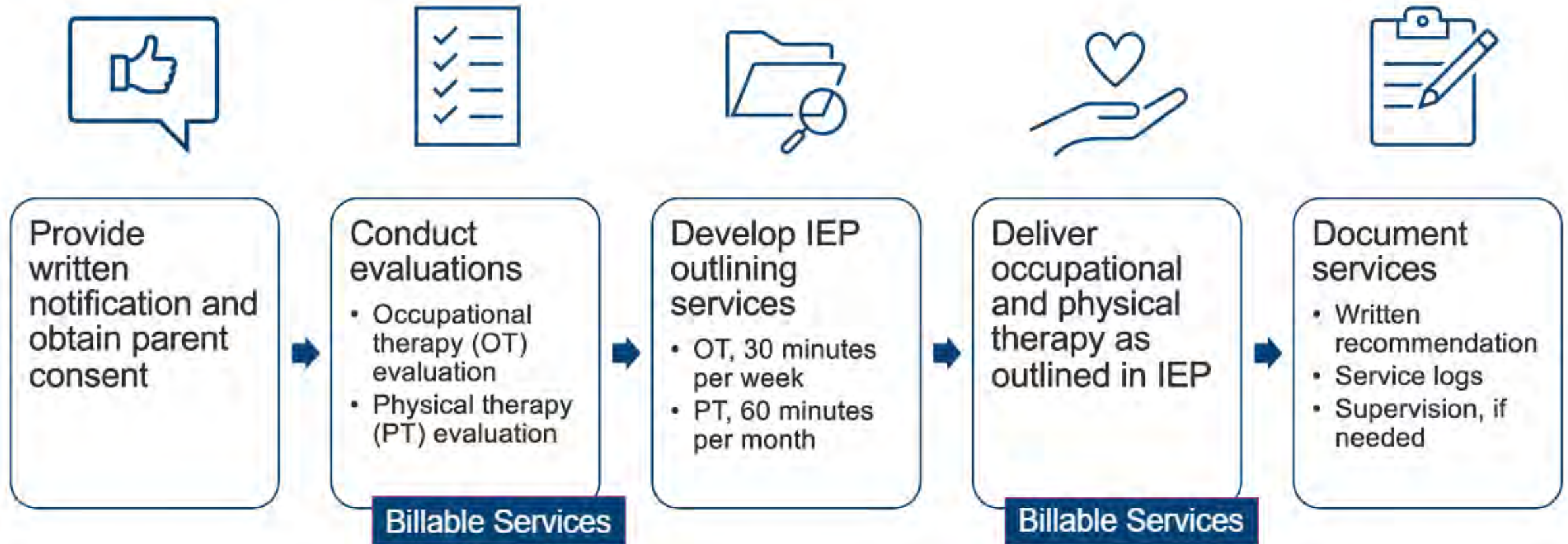
## Scenario A

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Liam is a 5-year-old kindergarten student. His teacher notices he struggles with fine motor tasks such as holding a pencil. She also observes that he has difficulty maintaining balance during playground activities and frequently falls. His teacher discusses her observations with Liam's parents and learns that Liam was born prematurely and previously received services for motor delays. Based on these concerns, the teacher submits a referral for an initial evaluation under Child Find to determine if Liam qualifies for special education under the IDEA. Liam and his family are enrolled in the Oregon Health Plan (Medicaid).



# Medicaid Services: Scenario A



## Scenario B

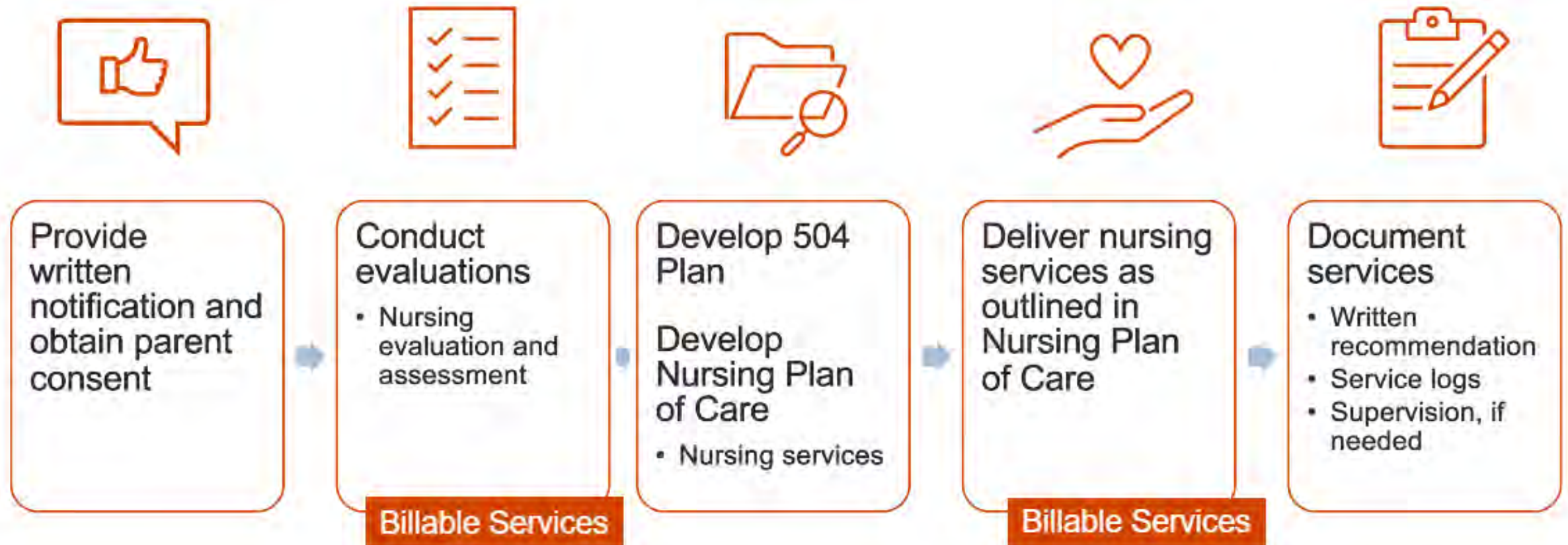
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Emma is a 6-year-old 1st grade student. Her parents let the school know that she was diagnosed with Type 1 Diabetes and requires insulin injections to manage her blood glucose levels. The school refers her for a Child Find evaluation to determine eligibility under Section 504. Emma is enrolled in the Oregon Health Plan (Medicaid).





# Medicaid Services: Scenario B





# Questions and Answers

# Enrollment Resources

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- [Enrolling in Oregon Medicaid SBHS](#) (webinar recording)
- [SBHS Provider Enrollment Guide](#)
- [Enrolling in Oregon Medicaid SBHS FAQ](#)
- [Guide to Getting Started](#) webpage

# Other Program Resources

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- [Oregon Administrative Rules \(OARs\)](#)
- [Oregon SBHS Medicaid Program Tipsheets](#)
- [School Medicaid Billing Manual](#) (for school business offices)
- [OHA SBHS Monthly Medicaid Discussions](#)
- Direct technical assistance requests, contact: [Shelby Parks](#), School Medicaid Program Analyst

# Stay in Touch

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- [School Medicaid listserv](#)
- [OHA](#) website
- [ODE](#) website
- [Medicaid in Education](#) website
- [Questions and TA requests](#)