



FLORIDA DEPARTMENT OF
EDUCATION
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Medicaid in Schools

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Medicaid in Schools

- Medicaid is one of many federally funded programs that assist financially eligible children/families to receive health services.
- In 1988, Congress passed the Medicare Catastrophic Coverage Act to provide medically necessary services for children who have an IEP in conjunction with IDEA. In 1995, school districts became eligible under the federal Medicaid program to receive reimbursement for school based services.
- The Medicaid Certified School Match (MCSM) program was authorized by the Florida legislature in 1997.
- Florida statute revised in 2017 to allow for participation in the program by charter/private schools.
- Reimbursement in regular Florida Medicaid is shared- general revenue/federal dollars.



Medicaid Certified School Match Program

The purpose of the Medicaid Certified School Match program is to provide reimbursement for medically necessary services provided by schools or school district employees or contractors by a school district or schools to Medicaid-eligible students.



Medicaid State Plan Amendment (SPA)

- SPA approved by federal Medicaid agency October 2, 2017
- Includes private and charter schools in the match program
- Incorporates concept of free care-services can be provided to all Medicaid recipients with a plan (IEP, IFSP, behavior, nursing-but not limited to those)
- Policy is following the rule development process



Options for Medicaid Financing Health Care in Schools-Medicaid Eligible Students

- Use providers in the community-they bill Medicaid
- County Health Departments (CHDs) or other health agencies-CHD or other agency bills Medicaid
- School district or school enrolls as Medicaid provider and bills for services provided by school district or contracted health staff



Fee for Service (FFS)

- All Medicaid service-specific policies are in state rule (Florida Administrative Code)
- Current fee for service policy handbook can be found at [Medicaid Certified School Match Program Coverage and Limitations Handbook](#)
- Districts have option of revising rates from existing fee schedule [Medicaid Certified School Match 2020 Fee Schedule, Updated November 2020](#)
- Medicaid **DOES NOT** require any one billing/reimbursement system to be used.
 - FDOE service capture/billing system
 - Vendors
 - State Medicaid FLMMIS (Florida Medicaid Managed Information System)



FFS Relevant Federal Regulations State Laws and Rules

- Title XIX of Social Security Act
- Chapter 59G, Florida Administrative Code (Medicaid)
- Title 42 of the Code of Federal Regulations
 - Part 440.110
 - Part 440.130
- Chapter 409, Florida Statutes (Medicaid)
 - 409.9071
- 1011.70, Florida Statutes

[Online Sunshine](#)



Students Qualified for Certified Match

- Medicaid-eligible on date of service
- Under the age of 21
- Considered disabled under the State Board of Education state rule definitions
- Entitled to school district services under IDEA
- Medicaid reimbursable services referenced in individual educational plan (IEP) or individual family support plan (IFSP)
- Medicaid reimbursable services recommended by school district employees/contracted staff



Nursing Services

- Includes “face time” and other “non-face time”
 - Health assessments, individual student health training and counseling, catheterizations, tube feedings, maintenance of tracheostomies, oxygen administration, specimen collection, ventilator care, health monitoring and management, health care treatments and procedures, management of chronic health care, health care coordination and referrals, crisis intervention, compilation of health histories, screenings, emergency health care, consultation and coordination
- No reimbursable group services
- Consultation/Coordination is a Medicaid administration covered service



Nursing Service Providers

- Registered Nurses
- Licensed Practical Nurses (*must be performed under the direction of a licensed registered nurse*)
- School Health Aides (*must be performed under the direction of a licensed registered nurse*)
 - School health aides must complete the following courses/trainings:
 - first aid
 - CPR
 - medication
 - “patient specific” training

Note: Only requires training, not certification

Document all trainings!



HB 81: Health Care for Children

- The bill aligns Florida law with the 2014 CMS guidance by eliminating the requirement that Medicaid recipients receiving services through the Florida Medicaid Certified School Match Program qualify for Part B or H of the IDEA, or for exceptional student services, or have an IEP or IFSP.
- Passed on March 12, 2020
- Approved by the Governor June 23, 2020
- Effective July 1, 2020



School District Administrative Claiming (SDAC)

- Allows reimbursement for some of costs associated with school based health and outreach activities that are not claimable under FFS
- To determine amount of time school district staff spend on these activities, a quarterly time study is performed
- Examples:
 - Referral of students/families for Medicaid eligibility
 - Provision of health care information and referral
 - Coordination and monitoring of health care services
 - Interagency coordination



School District Administrative Claiming (SDAC)

- Policy Handbook can be found at [School District Administrative Claiming Guide](#)
- FFS billing requirement: one reimbursable therapy, nursing, and behavioral service
- Required to have 75% valid responses completed
- Some districts still use paper forms
- No billing/reimbursement system required to be used
 - Department of Education EMACS system
 - Individual district system
 - Vendors



SDAC Direct Billing Requirement

- District must submit at least one claim for the following services
 - Therapies (PT, OT, SL)
 - Behavioral
 - Nursing
- Can refer students to providers in the community to meet this requirement if they are a Medicaid eligible provider.
- If claims are not submitted for the services referenced above or if there is no documentation of referrals to community providers, activity code 5 cannot be reimbursed for the quarter.



Time Study- Random Moment Sampling (RMS)

- RMS method measures work effort of entire group of approved staff that are in the sample
- Samples and analyzes work efforts of only a cross-section of the group
- “Polls” selected staff at random moments (one minute) over given time and tallies results of polling over that period
- There are notification timeframes to assure the integrity of the sampling:
 - Notification to participant on the day of the sample that he/she has been selected
 - Participant has 7 days to complete the information from the “moment” in electronic system or 30 days on paper



SDAC-Time Study Turn Around

- For electronic sampling, sample participants have 7 working days to complete their moments and 30 days for paper.
- If a participant does not complete the moment within 7/30 day timeframe, the RMS moment will be invalid and will not count towards the 75% participation.
- Especially important for ISRD districts to monitor completion of moments, as they receive fewer sample moments than larger districts and easier to fail to meet the 75% requirement.



FDOE Products to Assist You

- Medicaid Tracking System (MTS 2.0)-paper based fee for service billing
- Medicaid Tracking System (MTS 3.0)-electronic fee for service documentation and billing
- Electronic Administrative Claiming System (EMACS)-administrative claiming
- Fully supported by FDOE staff, including training, technical support, day to day assistance



FDOE Contact Information

Nanci English-FDOE liaison with AHCA, school districts

Nanci.English@fldoe.org

Thomas Garrett-PEER, Medicaid Tracking System 3.0

Thomas.Garrett@fldoe.org

Richard Gary-EMACS, Medicaid Tracking System 2.0

Richard.B.Gary@gmail.com

Medicaid in Schools Website

<http://sss.usf.edu/resources/topic/medicaid/index.html>