

Schools and Medicaid Quarterly Call
February 28, 2017
Call Notes

Present on call:

District contacts

Luc Toussaint, AHCA

Ami Flanigan, AHCA

Jeffrey Douglas, AHCA

Anne Glass, USF Student Support Services Project/FDOE

Thomas (TJ) Garrett, USF Student Support Services Project/FDOE

Richard Gary, USF Student Support Services Project/FDOE

Mary Walsh, Therapy Program Specialist, FDOE

I. Introductions

AHCA and FDOE/SSS staff introduced themselves. Jeffrey reported that Pam Kyllonen is no longer with the school program and her position is in the process of being filled.

II. Fee for Service – Rule Revisions/SPA Status/Free Care

Luc reported that the Medicaid State Plan Amendment (SPA) to add charter and private schools has been submitted to the federal Centers for Medicare and Medicaid Services (CMS). CMS had questions about the submission to which AHCA will respond by March 14th.

AHCA is continuing to work on rule development on the policy for the Medicaid Certified School Match program and a draft version of the rule is circulating through AHCA. The policy is part of rule and the process for adopting administrative rule is being followed. The next step will be the announcement of a workshop and an official draft version will be released before the workshop. To make certain that you receive the information on the rule, sign up for the Florida Medicaid Health Care Alerts at <http://www.ahca.myflorida.com/medicaid/alerts/alerts.shtml>.

Luc requested that if districts have changes they would like to see in the new handbook, to let him know.

AHCA is also working on coverage policy that would address the guidance from CMS regarding free care.

District question: What does the SPA contain regarding charter and private schools billing Medicaid?

AHCA answer: The SPA contains the requirements for all providers participating in the Medicaid Certified School Match program, which consists of who can provide and receive the services as well as all services. The SPA will also contain the program's federal authority and licensure requirements for rendering providers.

District question: Will the charter and private schools have their own Medicaid numbers and function separately from their LEAs?

AHCA answer: Yes, if enrolled under the new option.

Question: Will school districts be responsible for the errors or omissions of charter school therapists who may or may not be certified?

AHCA Answer: School districts will not be responsible for the work of providers who enroll under this option.

Comment: Districts would like more information about the SPA. Can it be shared with us?

AHCA answer: If school districts would like additional information regarding the SPA, please contact Luc Toussaint at luc.toussaint@ahca.myflorida.com.

Follow up: Feedback on the handbook change can be sent to either Anne (anne.glass@fldoe.org) or Luc at luc.toussaint@ahca.myflorida.com. Anne requests that anything sent to AHCA also be copied to her.

III. Status of OT/PT Evaluation Procedure Codes in FLMMIS

Luc reported that the new codes have been added to the FLMMIS system, but are still in testing. Once the codes are ready for district submissions, a provider alert will be sent out.

District question: Are districts clear to use the new evaluation codes and what are they since we were told in the last call not to bill for OT and PT services in the last call.

AHCA answer: Districts are clear to use the new evaluation codes starting from the date of service 01/01/2017. The new evaluation codes can be found on the Medicaid Certified School Match Program Fee Schedule at the following link;

http://ahca.myflorida.com/medicaid/review/fee_schedules.shtml. If districts encounters any problems related to billing, please contact 1-877-254-1055 or file a complaint at the following link; https://apps.ahca.myflorida.com/smmc_cirts/.

District question: What can be used now if the codes are being tested now? Do we hold on to our claims and recode them later to the three new evaluation codes?

AHCA answer: Districts are clear to use the new evaluation codes starting from the date of service 01/01/2017. The new evaluation codes can be found on the Medicaid Certified School Match Program Fee Schedule at the following link;

http://ahca.myflorida.com/medicaid/review/fee_schedules.shtml. If districts encounters any problems related to billing, please contact 1-877-254-1055 or file a complaint at the following link; https://apps.ahca.myflorida.com/smmc_cirts/.

District question: It is my understanding that OT/PT evaluation codes require standardized testing to be completed but there are no tests available that match our environment (school) or student population. Therefore, these tests may over identify

needs that don't relate to environment. Will more info be provided on how best to work through this?

FDOE answer: Anne and Mary will share any information that they receive from districts that might assist others in working through this issue. Anne and Mary are not aware of any information available that would assist in this at this time.

District question: Should the "old" OT-PT evaluation codes still be used for dates of service of 12/31/2016 and earlier?

AHCA answer: That is correct, the "old" OT-PT evaluation codes can still be used for dates of service of 12/31/2016 and earlier.

District question: Can evaluations change complexity level (i.e., there are circumstances under which a high complexity evaluation might occur and then a follow up is needed a while later for low complexity)?

AHCA answer: The Agency is still researching this inquiry. We will provide additional information at a later date.

District question: Anne can your office also send us an email when the new OT and PT codes can be used?

Anne answer: Yes

District question: Please explain the (protocols) names of the tests that are low, medium and high complexity test names.

AHCA answer: AHCA does not maintain a list of tests.

District question: Do we use the reevaluation code or use one of the three evaluation codes when billing for a reevaluation?

AHCA answer: Use one of the three new evaluation codes, not the reevaluation code.

IV. Fee for Service-Behavioral Claims Denials/NCCI changes

Luc reported that claims that have been denying since October for “medically unlikely edit” are due to changes in the National Correct Coding Initiative (NCCI). The medical

The NCCI changes now limit procedure code 96150 (Behavioral-Individual Service) to 8 units per day per recipient and procedure code 96152 to 6 units per day per recipient.

District question: what is the effective date for change in 96150 and 96152?

AHCA Answer: Dates of service on or after 10/1/16.

District question: What are we to do with the denied claims for 96150 and 96152 that are over 8 and 6 units?

AHCA answer: You can rebill using the maximum number of units.

District comment: I had the medically unlikely denial (#3396) for a date of service of 9/2/16 and 9/30/16 after using behavioral services evaluation code.

District comment: The NCCI website says contact CMS if these fees conflict with local handbooks-this can't be the final answer since the handbook is still in use.

District comment: I don't believe this is the final answer since the website says to contact CMS if these conflict with your handbook.

District comment: It sounds like you can work with CMS to get the 32 units back for 96150

Note: refer to slide presentation for information on the NCCI.

<https://www.medicaid.gov/medicaid/data-and-systems/ncci/index.html>

V. Medicaid Fee Schedules

The Medicaid fee schedule for the MCSM program was updated in January and is posted on the AHCA website. Notice of the fee schedule was sent in a Medicaid Health Care Alert on 2/7/17. Luc, Anne and TJ met last week to review areas that do not match current policy. Luc is working on possible changes to the posted fee schedule.

VI. Monitoring

Jeffrey Douglas reported that 50% of the monitoring for Q are complete. Every district had at least one monitoring completed in fiscal year. AHCA expects to finish the remainder by the end of June.

Jeffrey has not received information from Medicaid policy that would change the current monitoring of OT and PT evaluations as a result of the new evaluation procedure codes.

VII. Medicaid School District Administrative Claiming (SDAC)

Ami presented information on staff certifications for the SDAC program. Please refer to the list of approved job titles that do not require certification. Districts should crosscheck this list as they build their sample pools. Staff must be certified prior to including in the sample pool. Ami reminded all that to be included in the pool, the staff must actually perform claimable activities (outreach, etc). Please include the job description and a list of claimable activities that these staff perform. Support staff may be included if they supervise or support those that perform these activities. Examples of outreach activities are located in the SDAC Guide. If you do not have a copy of the guide, please contact Ami and she will provide that to you.

If staff partially provided supervision or support for staff included in the sample pool, but also provide support to others, the reported **costs for these staff should be pro-rated.**

Anne reminded contacts to check to make sure that positions reported are not included in their indirect rates that are applied to the administrative claims.

If districts have AHCA signed approved certifications on file from previous years, please share them with AHCA. I'm building the by district database and want to include everyone and make sure they're up to date.

District question: Do non-sampled personnel who support Chapter 3 positions have to be certified?

AHCA Answer: Yes, if they are not included on the list of approved job codes.

District question: Page 3-4 under Clerical and Supervisory staff states in the last line that clerical aids such as secretaries, non-professional administrative aides and non-accounting type clerks do NOT need certification. How do we reconcile this?

AHCA answer: To ensure all are recorded appropriately, Ami suggests certifying all that are included in the cost reports.

Please make note of the Sampled and Non-Sampled check lines at the top of the Job Title Certification form as those who are support staff should not be included in the sample pool. You want to make sure your sample pool contains only those who perform administrative claimable activities.

Follow up: Anne will distribute the job codes that do not need certification with the notes from the conference call.

VIII. FDOE-Parental Consent Forms Translation

Anne reported that the parental consent forms that were approved by FDOE have been translated into Spanish and Creole. The forms can be found on the Student Support Services website at

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

IX. Updated Participation Report Posted

Anne reported that the participation report has been posted on the Student Support Services website at <http://sss.usf.edu/resources/topic/medicaid/index.html>. This report is updated annually and has information that was collected in the fall of 2016 and finalized in early December. Added to this year's report is the IEP system that each district is using.

X. FDOE Call with OT/PT District Contacts

Mary Walsh reported on a call that was held January 12th to address concerns expressed by district OTs/PTs regarding the new Medicaid evaluation procedure codes.

XI. Tribute-Harold Daniels

Mary Ellen Barkman, MPT, Medicaid Coordinator in Pinellas County Schools, spoke to the group about the contributions Harold Daniels has made over the course of his work with the Medicaid and schools program. Harold has worked with the Medicaid and Schools program for the past 18 years through his work at AHCA (beginning in 1999) and Hillsborough County Public Schools (2007 through present) and will be retiring in June.

XII. NAME Conference

Deneen Gorassini, Coordinator for School Medicaid and Section 504 Programs in Broward County Public Schools, is the national Conference Chair for the 2017 annual NAME conference announced that the national conference will be held this year in Ft. Lauderdale October 15-18, 2017. She encouraged everyone to attend, as it is an opportunity for participants to here about how states and districts around the country are implementing the Medicaid in Schools program.