Medicaid Certified School Match Quality Review Checklist

Documents submitted must support the review period
Originals cannot be accepted

Providers must submit the following documentation (in this order):

**For Therapy Services (OT/PT/ST):**

- ____ Service documentation supporting the date of service for the sampled claim (session/progress notes)
- ____ Current IEP (and POC, if applicable) that encompasses the date being reviewed – entire IEP must be submitted, including signature pages and any applicable attachments
- ____ Previous IEP/POC (prior to the current IEP/POC for the review date) or subsequent IEP/POC if IEP that encompasses the date being reviewed is the initial IEP – entire IEP must be submitted, including signature pages and any applicable attachments
- ____ Most recent therapy evaluation (e.g., include PT evaluation for a PT claim)
- ____ Any applicable prescriptions or medical referrals
- ____ Professional licenses/certificates for all treating providers related to claim service type requested for review (e.g., include licenses for OTA who provided the service, supervising OT who signed off on session notes, OT who signed IEP/POC, and evaluating OT)

*Please see MCSM Monitoring Tools for additional information on Wheelchair Evaluations and AAC documentation requirements or request assistance from the AHCA quality monitor

**For Behavioral Services:**

- ____ Service documentation supporting the date of service for the sampled claim (session notes and/or evaluative reports)
- ____ IEP that encompasses the date being reviewed – entire IEP must be submitted, including signature pages and any applicable attachments
- ____ Recommendation for behavioral services signed by a qualified provider who is licensed/certified with a master’s level or higher degree (if not included in IEP)
- ____ Most recent psychological evaluation and any applicable documentation/observation notes
- ____ Professional licenses/certificates for all treating providers related to claim service type requested for review (e.g., Psychologist who evaluated the student, LCSW who signed the IEP, and Counselor who is providing the service)
For Nursing Services:

____ Service documentation supporting the date of service for the sampled claim (nursing service notes/medication logs)

____ IEP that encompasses the date being reviewed – entire IEP must be submitted, including signature pages and any applicable attachments

____ Recommendation for nursing services signed by a registered nurse, an advanced registered nurse practitioner, physician, or physician’s assistant (if not included in IEP)

____ Any applicable prescriptions or medical referrals

____ Professional licenses/certificates/course completion for all treating providers related to claim service type requested for review (e.g., Health Aide who provided the service, supervising RN who signed off on session notes, and RN who signed IEP/nursing recommendation)

For Transportation Services:

____ Transportation trip log supporting the date of service for the sampled claim

____ Documentation for medical service provided the same day as transportation – following requirements for services as listed above (e.g., session notes, plans, and provider credentials for therapy, behavioral, or nursing services)

____ IEP that encompasses the date being reviewed – entire IEP must be submitted, including signature pages and any applicable attachments

In addition to student-specific records:

____ Contract or agreement with local health department (if applicable)

____ Contract or agreement with local behavioral services organization (if applicable)

____ District or vendor/consultant electronic signature policy

Organization for paper submissions:

Please do not staple or affix sticky notes-tabs to documents, as all records will be scanned into our system for records retention purposes (district may use highlighter to mark pertinent sections of records). Organize all documentation by student/claim (including provider licenses).

Organization for electronic submissions:

Please use the directions for paper submissions and scan each student record as one PDF (if possible). Electronic records must be encrypted/password protected or shared through an approved secure file transfer (e.g., Microsoft OneDrive or district FTP). For questions or additional assistance, please reach out to the AHCA quality monitor.