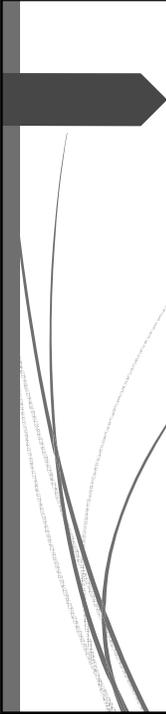


Medicaid School Program (MSP): *Education and Medicaid Perspectives on School-Based Therapy*

*Lesley Scott-Charlton, Ohio Dept. of Medicaid
Mark Smith, Ohio Department of Education*



Presentation Outcomes

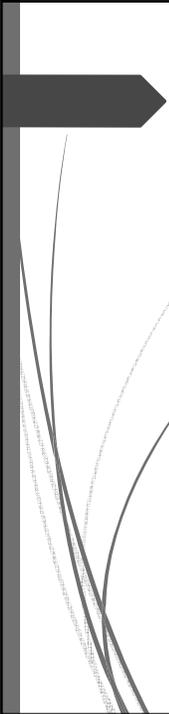
- Give perspective on education and healthcare perspectives of school-based therapy
- Discuss broader perspective of non-IEP school based services
- Answer questions
- Seek feedback

The Reason We Deliver IEP Services



MSP Overview

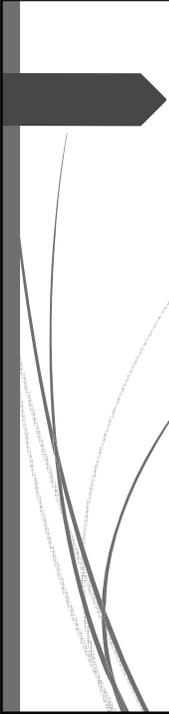
- Services Provided:
 - Speech and Language Pathology (by far largest percentage of services, dollars)
 - Audiology
 - Occupational Therapy
 - Physical Therapy
 - Mental/Behavioral Health
 - Psychology Services
 - Social Work Services
- Transportation
- Durable Medical Equipment and Supplies
- Administrative Costs



MSP Impact

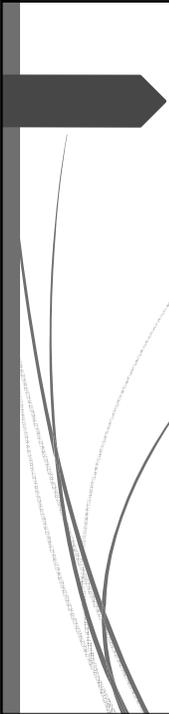
- ▶ 608 schools (85% of traditional schools)
- ▶ 88% of all Ohio students attend a MSP provider district
- ▶ 2001- CAFS: \$13M
- ▶ 2008: MSP Year 1: \$45M
- ▶ 2015 (est.): \$125M

- ▶ Level of IDEA (Title VI-B) funding: \$400M+



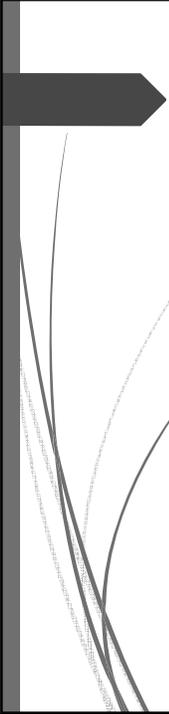
MSP basics

- ▶ Service must be defined on an IEP
- ▶ Service must be connected to evaluation at least annually
- ▶ Reimbursement must be connected to service that is:
 - ▶ Medically necessary
 - ▶ Educationally relevant (only Medicaid service where medical improvement isn't primary rationale for service delivery)
 - ▶ Within the scope of the IEP
 - ▶ Delivered by a licensed professional of the healing arts
 - ▶ Demonstrable to have efficacy within 2, 90-day service periods
 - ▶ If not- approach must be changed, or billing must cease



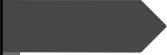
Service documentation basics

- ▶ Must be on the IEP
- ▶ Must have amount, scope, and duration clarified in the IEP
- ▶ Service frequency: defined by the IEP
 - ▶ Modality and interval of service is defined by IEP span overall
 - ▶ Services can be 'caught up' over the IEP span
- ▶ Prior authorization can sought (IEP change)
- ▶ Documentation must address the medical necessity of the service delivery
 - ▶ Goes beyond the IDEA requirements of IEP
 - ▶ 'Therapeutic' - the magic word



MSP Program Requirements *Therapist Focused*

- ▶ Ongoing documentation of progress
- ▶ Ongoing interim claiming for appropriate services
- ▶ Time studies completed by district employees
- ▶ Therapy must be referred by MSP-enrolled provider



MSP Program Requirements

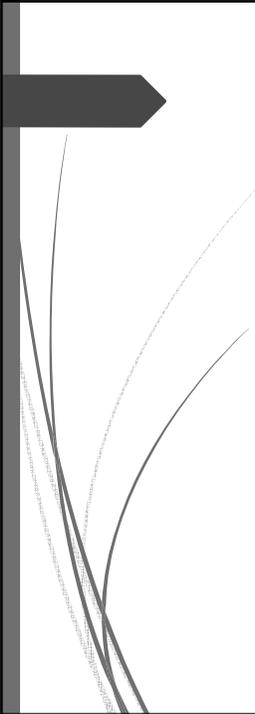
District Focused

- ▶ FAPE respected (no cost to family for IEP services)
- ▶ Parental consent for MSP
 - ▶ Rational based on FERPA
 - ▶ NOT permission to bill Medicaid
- ▶ Cost report completed with state to demonstrate costs and determine overall reimbursements
 - ▶ Agreed Upon Procedures Audit of *every school, every year*

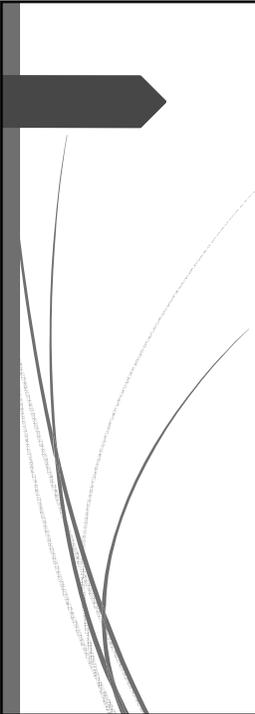


Allowability of Telehealth

- ▶ Telehealth is a modality of the same service (SLP)
- ▶ Billing agents use a code modifier to indicate telehealth
- ▶ SLP currently only service in MSP using telehealth
- ▶ Ohio was first state in US to allow SLP-telehealth for their school IEP services
- ▶ Ohio looking at other services to offer via telehealth
- ▶ Telehealth is a large topic of discussion at the national level
- ▶ TELEHEALTH IS NOT ABOUT FORCING THERAPISTS OUT OF WORK



Questions about MSP



Medicaid and Educational Perspectives on Non IEP-Services

- Educational Overview
- Medicaid Overview

Goals of current Ohio work

- Data Sharing
 - Bring health and education data sets together
 - Respect FERPA and HIPAA
 - Use data to connect educational outcomes with healthcare concerns
- School Health Centers
 - Develop a collaborative between partners
 - Change Education agency policy to recognize social and emotional impact of learning
 - Encourage partnerships between state agencies, managed care, local medical AND education partners
 - Develop a toolkit to outline the process
- Paradigm shifts in Healthcare and Education
 - Shift the Education agency goals to include health

Ohio School Health Work to Date

- Ohio SBHC Toolkit
 - Help schools develop locally focused SBHC by giving examples of success already found in Ohio
 - Ohio PCP model for partnering schools and medical practices
- ODE Agency goals include health factors
 - Dedicated position to help with SBHC day-to-day activities
 - ODE restructure to highlight school health and better incorporate health issues into larger agency framework
- Ohio School Health Collaborative
 - Ongoing state/local meetings to discuss issues and develop results
 - Use of data to address known issues of mental health, asthma, and diabetes

Statewide Focus on School-Based Health Care

► *State agencies have a shared mission to expand school-based health care to improve student outcomes*

- Improved student health
- Lower rates of chronic absenteeism
- Increased classroom engagement
- Higher graduation and lower dropout rates

Participating Agencies

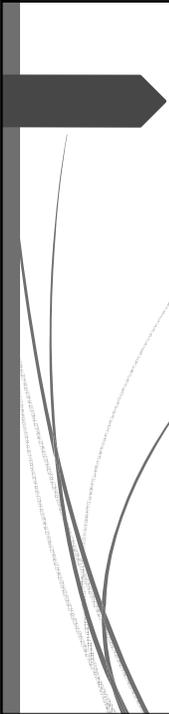
Ohio | Governor's Office of
Health Transformation

Ohio | Department
of Education

Ohio
Department of Health

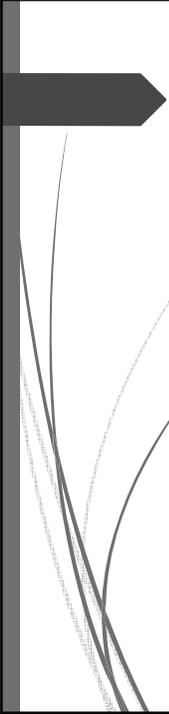
Ohio
Department of Medicaid

Ohio MHAS
Promoting wellness and recovery
ADDITIONAL SERVICES | MENTAL HEALTH & ADDICTION SERVICES



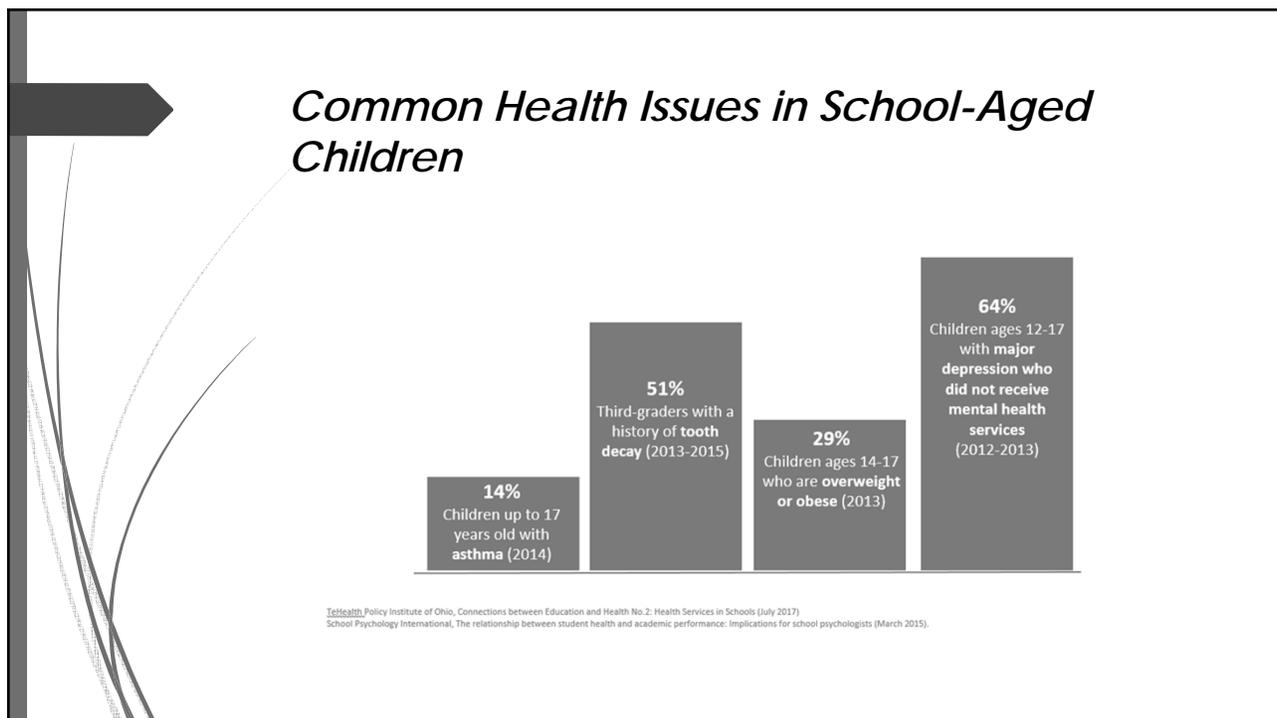
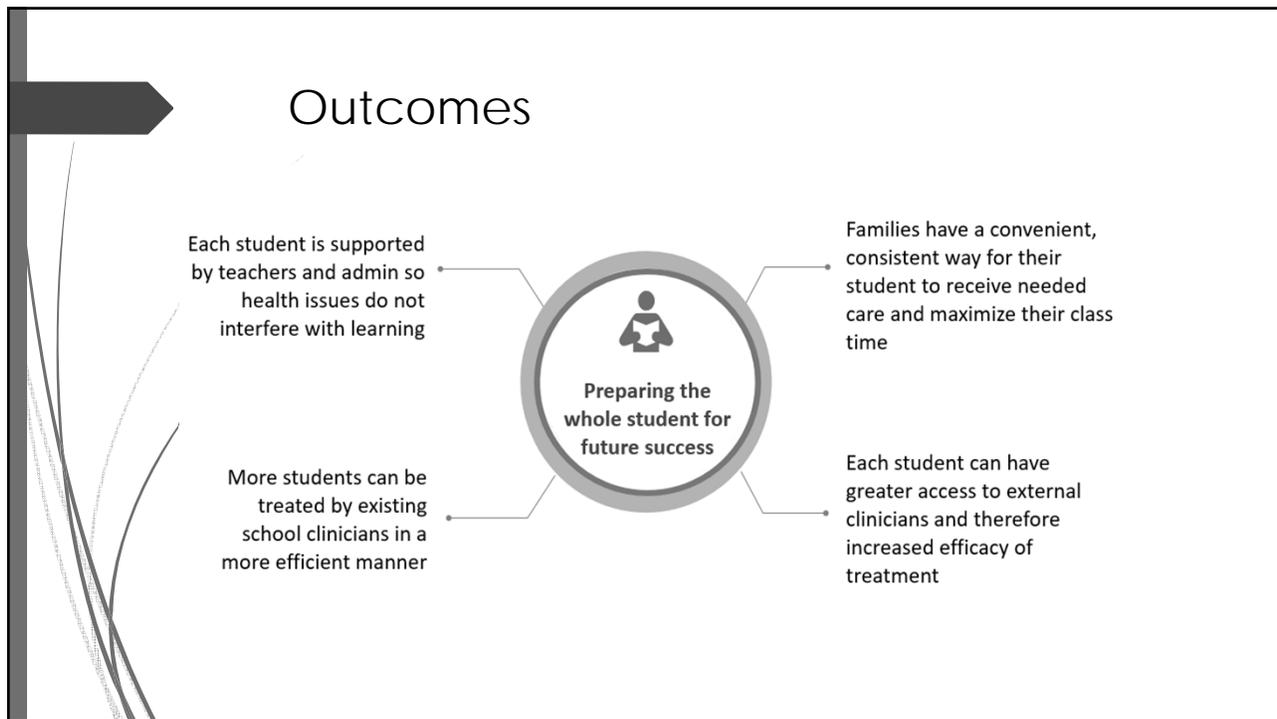
Rationale for School Based Healthcare

- Improve access to care
- Improve patient experience
- Improve quality of care
- Improve community connections

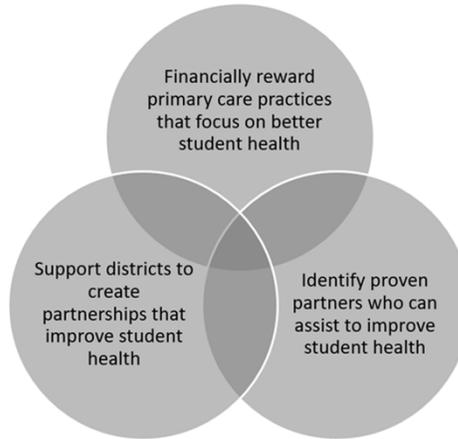


School Healthcare Workgroup Collaborative

1. **Many schools are confident** they can come together with their provider community to offer outstanding health care to students – their main concern is funding the operation
2. **Important to connect organizations** to the districts and schools where there is a tremendous level of need and the community is excited to build or augment a program
3. **Support can be transformative** in improving health access, health outcomes, and academic outcomes for students

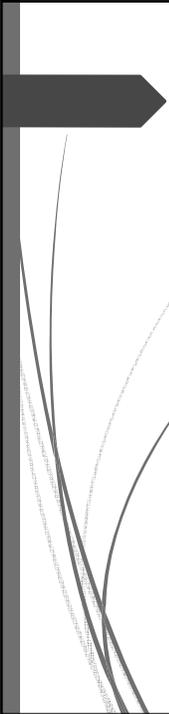


School-Based Health Care Strategic Framework



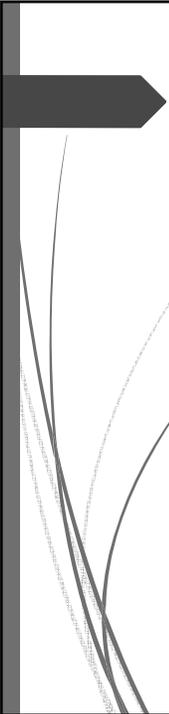
The Reason We Deliver Non-IEP Services





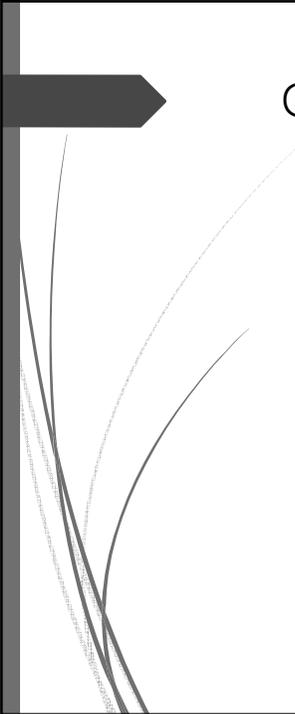
Ohio School Based Healthcare Toolkit

<http://education.ohio.gov/SBHealthcareToolkit>



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Questions on School Based Healthcare

