



# February 2024

## Overview of Federal and State Updates



# Welcome!



## Introduction of Presenters

- Jennifer Smith, Operations & Policy Analyst, Oregon Health Authority
- Jennifer Dundon, Operations & Policy Analyst, Oregon Department of Education

# Agenda

- Housekeeping
- School Based Health Services Overview
- Federal Updates
- State Updates
- School Medicaid Advisory Committee
- Federal Technical Assistance Grant Opportunity
- Q&A Session

# Housekeeping



- Raise your hand or put your questions in the chat (preferred)
- We will attempt to answer questions but may have to table some pending additional research
- Presentations will be sent to participants and made available on the ODE Medicaid in Education website



# Introduction to Medicaid in Schools



# School Based Health Services (School Medicaid)

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- Medicaid is a state and federal partnership focused on funding health and medical services for enrolled beneficiaries.
- The Oregon Health Authority (OHA) is Oregon's State Medicaid Agency, and its Health Systems Division administers the School Based Health Services (SBHS) program.
- Oregon's Medicaid State Plan establishes how Oregon will adhere to Medicaid requirements in the Social Security Act and associated federal regulations.

# School Based Health Services (School Medicaid)

School districts can utilize two Medicaid billing programs to optimize Medicaid billing: (1) School Based Health Services (SBHS) Medicaid billing and (2) Medicaid Administrative Claiming (MAC).

1. **SBHS Medicaid Billing Direct Service:** a cost-sharing program that allows school districts to seek reimbursement for eligible health-related services provided in the school setting under the Individuals with Disabilities Education Act (IDEA) for services pursuant to an Individualized Education Program (IEP)/Individualized Family Service Plan (IFSP). (OHA is in the process of adding Section 504 plans.)
2. **Medicaid Administrative Claiming (MAC):** provides reimbursement to school districts for activities related to the administration of Medicaid. This includes activities such as referrals to medical or dental services, assisting a student in enrolling in the Oregon Health Plan, and care coordination of Medicaid services.



# Federal Updates

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# Federal Update

- On May 18, 2023, as directed by the Bipartisan Safer Communities Act, the Centers for Medicare and Medicaid Services (CMS) released an updated guidance document for School Based Health Services entitled: [Delivering Services in School-Based Settings: A Comprehensive Guide to Medicaid Services and Administrative Claiming.](#)
- The guide is intended to help states add flexibilities that will reduce administrative burden and increase billing, including reference to adding education-only licensed practitioners as billable providers.
- OHA, with the support of ODE, is seeking CMS approval to add school social workers, school psychologists, and school counselors licensed only by the Oregon Teacher Standards and Practices Commission (TSPC) as billable providers under SBHS rules. Additional information and opportunities for engagement will be provided in the coming months.

# “Free Care” Policy

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- Prior to 2014, CMS policy on “free care” only allowed federal reimbursement for no cost services on an IEP or IFSP provided to Medicaid-enrolled children. The updated guidance document is affirming the policy reversal and provides guidance for states on how to update their State Plans to allow for billing for no cost eligible health services beyond the IDEA.
- “Free Care” may include billing for Section 504 plans as well as preventative services like health care screenings, vision exams, dental sealants, etc. that are provided to all students free of charge. These services must be provided by medically-qualified staff.
- We will go over Oregon’s recently approved SPA and implementation process in the next section.

# Referring Provider Requirement

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- In a recent Payment Error Rate Measurement (PERM) audit of OHA, CMS indicated that future claims for School Based Health Services (SBHS) must include an ordering or referring provider (pursuant to 42 CFR §§ 455.410 and 455.440). To meet this requirement, OHA was approved to look to the referring provider.
- By June 1, all medically-qualified staff providing direct SBHS will need a National Provider Identifier (NPI) and to be enrolled with the Oregon Health Plan (OHP) to serve as a referring provider on claims.
- System (MMIS) set-up for this change is being finalized.
- OHA is in the process of creating guidance for school providers to:
  - Find out if each medically-qualified staff is enrolled with OHP.
  - Enroll each with OHP if they are not already enrolled.

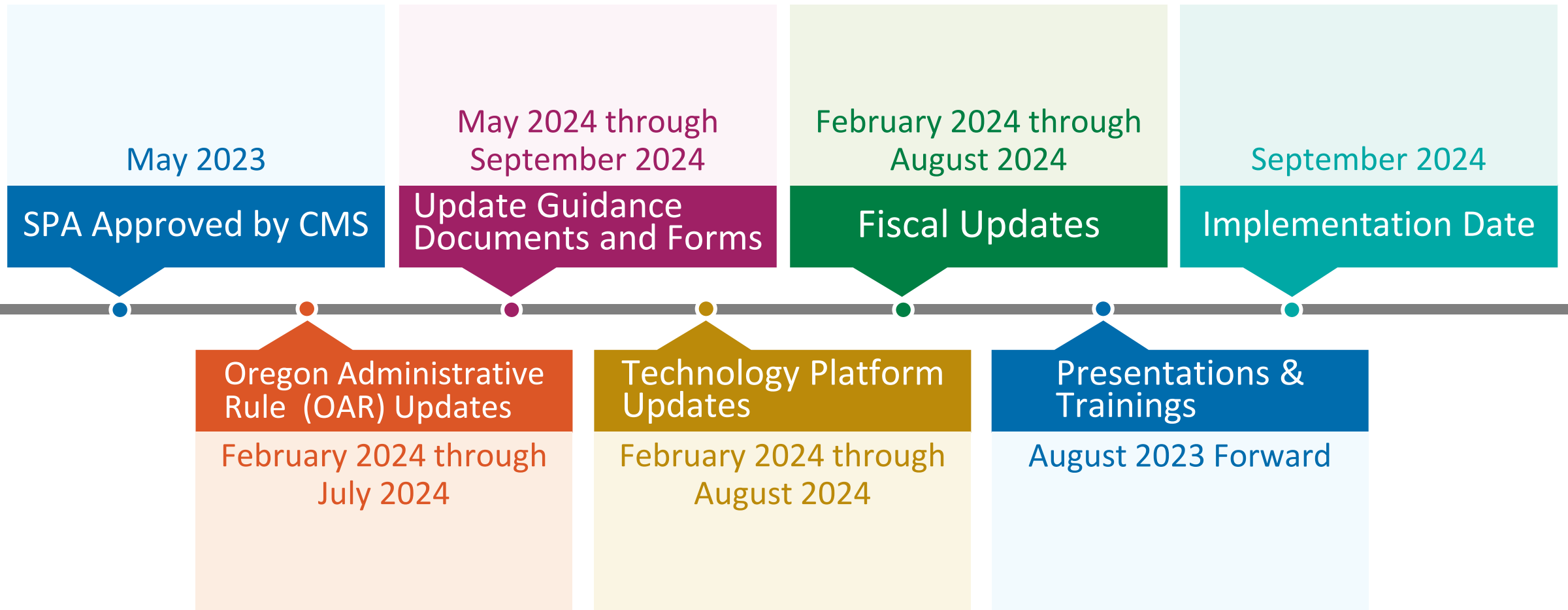


# State Updates

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# State Implementation Timeline



# Key Updates in approved SPA

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- Increases the types of billable services
- Increases the types of medically-qualified staff that can provide billable services
- Adds Section 504 plans and any other documented individualized health or behavioral health plans, or as otherwise determined medically necessary, for services provided in school programs and settings
  - OHA is taking a phased approach to implementation, beginning with Section 504 plans
- Adds potential for “free care”

# State Plan Comparison

**Previous State Plan** included health-related services required by IDEA, specified on an IEP/IFSP, and provided by a set of approved providers (medically-qualified staff).

- Physical Therapists
- Occupational Therapists
- Speech Therapists
- Audiologists
- Psychologists
- Psychiatrists
- Licensed Clinical Social Workers
- Nurse Practitioners
- Registered Nurses
- Physician
- Transportation services

**2023 SPA** includes previous services, adds health-related services specified on Section 504 and other medically necessary plans, and adds potential for additional medically-qualified staff

- Behavioral Health Services
- Dental Health Services
- Diagnostic, screening, preventive, developmental and rehabilitative services
- Nutritional Health Services
- Personal Care Services
- Respiratory Therapy Services

# Oregon Administrative Rules (OARs)

- To bill for the expanded services per the updated State Plan, OHA will need to update the current School Based Health Services (SBHS) rules (OAR Chapter 410, Division 133)
- Timeline for rule updates:
  - **April 1** – Finalize SBHS Oregon Administrative Rule language.
  - **July 1** – Expected date to adopt OARs, Chapter 410, Division 133
  - **August (TBD)** – Provide training on updated rules





# School Medicaid Advisory Committee

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# School Medicaid Advisory Committee

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ODE and OHA are bringing back our School Medicaid Advisory Committee. The committee will serve as an informal advisory body with the goals of:

- Maximizing School Medicaid billing in Oregon
- Removing barriers to participation
- Developing and updating training and resources
- Increasing the number of participating school districts
- Continuous program improvement

ODE and OHA will co-lead the committee. Membership will represent a variety of perspectives:

- School Health Practitioners
- Advocacy Groups (COSA, OASBO, FACT, OSBA, etc.)
- Parent(s) of a Student(s) with a Section 504 Plan, IEP, or IFSP
- School District Administrators
- School Business Office Personnel
- EI/ECSE Program Staff/Administrators
- Education Service District (ESD) Administrators
- School Medicaid Program Staff with Expertise in Medicaid billing, technology, or policy

# School Medicaid Advisory Committee

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## Timeline for Committee:

- **March 2024** - ODE will solicit applications
- ODE/OHA will jointly review applicants and determine membership
- **Mid-April** - Announcements of membership will be made
- **June 2024** - First meeting to be held



# CMS Grant Opportunity

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# CMS Grant – Details

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- OHA, with the support of ODE, will apply for the State Grants for the Implementation, Enhancement, and Expansion of Medicaid and CHIP School-Based Services administered by the Centers for Medicare & Medicaid Services (CMS).
- Grants will fund activities/strategies aimed at implementing, enhancing, and expanding the provision of assistance through school-based entities under Medicaid or CHIP and must be used to support infrastructure development in one of the following three categories.
  - **Implementation** of SBHS including, but not limited to, building out the school infrastructure for providing health care services, training, and assessment of needs, to allow for the provision, billing, and documentation of SBS for the Medicaid-and CHIP-enrolled students.
  - **Expansion** of SBHS including, but not limited to, State Medicaid or CHIP programs that allow for at least one enrolled provider providing non-IEP/IFSP services (such as a school nurse), the expansion of services beyond IEP/IFSPs in the State program, expanding the number and type of providers for Medicaid or CHIP services provided in schools, and/or the expansion of the availability of services provided via telehealth delivery systems.
  - **Enhancement** of SBHS including, but not limited to, increasing availability of mental health services, the removal of coordination barriers between the schools and providers in the community, and/or the creation of school-based health clinics.

# CMS Grant – Engagement and Timeline

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- We are seeking input from Local Education Agencies (LEAs) about the best use of these funds to meet the intended purpose and goals.
  - Goal: Support efforts to bolster State and local infrastructure for the provision, billing, and claiming of Medicaid and CHIP school-based health services (SBHS) programs.
  - Purpose: Grant funds are for the purpose of implementing, enhancing, or expanding the provision of assistance through school-based entities under Medicaid and CHIP.
- If you would like to provide input on potential ways that grant funds could be directed, please complete this [survey](#) by **February 28th, 2024**.
- Timeline:
  - **February 23** – Submit letter of intent to apply.
  - **March 25** – Submit application.
  - **July 1** – Anticipated Notice of Award, if awarded.



# Question and Answer Session

# Thank you!

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## Oregon Department of Education

- Jennifer Dundon, Operations & Policy Analyst,  
[Jennifer.Dundon@ode.oregon.gov](mailto:Jennifer.Dundon@ode.oregon.gov)
- Shelby Parks, Program Analyst,  
[Shelby.Parks@ode.oregon.gov](mailto:Shelby.Parks@ode.oregon.gov)

## Oregon Health Authority

- Jennifer Smith, Operations & Policy Analyst,  
[Jennifer.R.Smith@oha.oregon.gov](mailto:Jennifer.R.Smith@oha.oregon.gov)