



AN INTRODUCTION TO SCHOOL-BASED BEHAVIORAL HEALTH SERVICES MAY 2022

Rebecca Anderson
DMAS



Please put your questions in Q&A

Objectives

- ❑ What are Medicaid school-based services?
- ❑ How are schools reimbursed?
- ❑ What changes are being planned for behavioral health services?
- ❑ What are the qualifications for providers of school-based services?
- ❑ What type of work activities are reimbursed by Medicaid?

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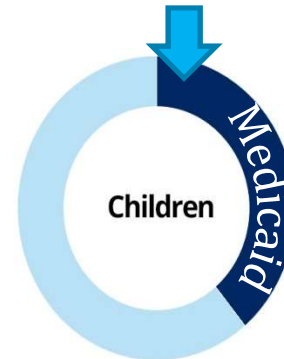
DMAS School Services

What are Medicaid School-Based Services?

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- Schools are reimbursed for their expenditures related to providing certain health services to students on Medicaid
- This helps students access needed health services so that they can participate in school
- What is reimbursed?
 - Salaries and benefits of professionals that provide school health/student support services to students with Medicaid or FAMIS benefits.
 - Materials and supplies used in providing services to these students
- How are these costs calculated?

How schools are reimbursed



School spends \$ providing student health and support services

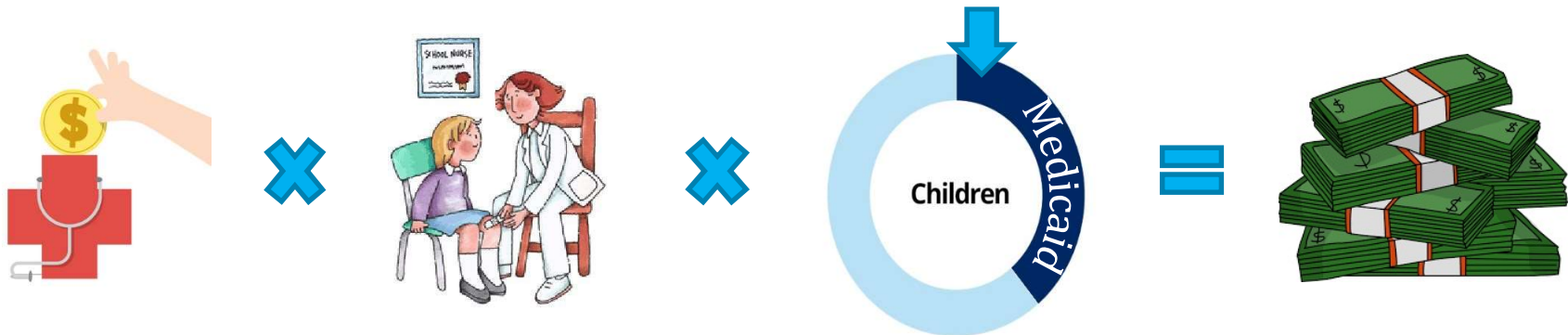
The percentage of staff time spent directly with students providing services

The proportion of students with Medicaid

Allowable expenditures

How schools are reimbursed

Example



School spends
\$1M

50% of staff time

40%

\$200,000

\$200,000 of the total spending can be “claimed”. Federal government then reimburses a portion of this amount.



The percentage of time?

This relates to the “Random Moment Time Study (RMTS). It’s very important to properly capture time here correctly.

More to come...

What changes are being planned for school-based services?



Expanding options for schools

- DMAS is seeking approval from CMS to expand the options for schools to seek cost-based reimbursement
- Currently limited to services provided to students with an IEP (with some exceptions)
- Planning to expand reimbursement for costs of providing services to all students – provided all Medicaid-required criteria are met.

Expanding options for schools

- Plan to add licensed school counselors, licensed substance abuse treatment professionals, licensed behavior analysts and assistant behavior analysts to the list of professionals whose direct time with students may be reimbursed.
- Plan to allow schools to include the costs associated with adaptive behavior therapy services in cost settlement.
- In certain cases cost associated with unplanned (crisis, acute, impromptu) behavioral health services will be allowed

What are the qualifications for providers of school-based services under Medicaid?





The term "provider" for Medicaid purposes refers to:

- The licensed person rendering the service, or
- An unlicensed person rendering the service under supervision of a licensed person.



- Licensed person rendering the service
 - Licensed by the Virginia Board of Health Professions, or
 - Licensed by the Virginia Department of Education



- What Virginia Board of Health Professions licenses?
 - Clinical psychologist
 - School psychologist
 - Clinical social worker
 - Board-certified behavior analyst
 - Board-certified assistant behavior analyst
 - Substance abuse treatment professional



- What Virginia Department of Education licenses?
 - Pupil personnel license with endorsement as:
 - School psychologist
 - School social worker
 - School counselor



- Also, others supervised by the licensed professional when they are:
 - Carrying out school health-related activities according to a written plan of care that has been prepared and signed by the licensed provider, and
 - The written plan of care meets all DMAS requirements set forth in the *Local Education Agency Provider Manual*

What type of work activities, when performed by a provider, are reimbursed by Medicaid?





The term "health care service" (sometimes "direct service", "covered service", "medically necessary service") refers to:

- Work activities ***for which the staff time spent*** can be reimbursed by Medicaid,
- When performed by a licensed person or an unlicensed person working under supervision of a licensed person.



- A licensed person has determined that *the service is needed to ensure the student's safety and/or ability to participate in learning in the school setting*; or
- A team has included the service in the students individualized education program (IEP) plan for special education



- There is a plan of care* written by a licensed provider that includes the covered service.

*Plan of care, treatment plan, intervention plan



- Exceptions to the Plan of Care requirements:
 - Assessments and evaluations do not require a plan of care
 - Unplanned, "crisis", impromptu services do not require a plan of care (when performed and documented by a licensed professional).



These are not new services, but the way you document them/describe them for Medicaid purposes may be different.

Where to find more information:

□ <https://www.dmas.virginia.gov/>

- Local Education Agency (LEA) provider manual
- Memos and bulletins
- Provider enrollment

Want to learn more about expansion of school-based services?

□ <https://www.dmas.virginia.gov/providers/general-information/medicaid-provider-manual-drafts/>

- Draft LEA Provider Manual, Chapter 2 (Provider Participation Requirements)
- DRAFT LEA Provider Manual, Chapter 4 (Services)
- Draft LEA Provider Manual, Chapter 6 (Documentation)

Rebecca Anderson

Program Lead

Medicaid School-Based Services

Department of Medical Assistance Services

(804)688-5467

Rebecca.Anderson@DMAS.Virginia.gov