



SCHOOL-BASED BEHAVIORAL HEALTH SERVICES OCTOBER 2022

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Agenda

- ❑ Basic requirements
- ❑ Services
- ❑ Telemedicine
- ❑ Provider requirements
- ❑ Providing Medicaid services in a school setting
- ❑ Documentation

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DMAS School Services

Basic requirements for participating
in Medicaid School-Based Services

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Basic Requirements

LEA Provider Manual (Ch. II – Provider Participation)

- School division (aka LEA) is the “billing provider”
- School employs or contracts with individual service providers
- Licensed providers whose NPI is used for claims must also enroll with DMAS (aka ordering, referring, prescribing providers)
- An NPI number of an enrolled referring provider must be on every claim for services requiring an order or referral under Virginia or DMAS policy.

LEA – Local Education Agency

*Includes VSDB – Virginia School for the Deaf and Blind

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Basic Requirements

LEA Provider Manual (Ch. II – Provider Participation)

- All claims require an NPI of a DMAS-enrolled, licensed provider, EXCEPT:
 - Personal care services
 - Transportation services
 - Medical evaluations

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Basic Requirements

LEA Provider Manual (Ch. II – Provider Participation)

What do we mean by “refer”?

An appropriately licensed professional has determined that the service is needed”.

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Basic Requirements

LEA Provider Manual (Ch. IV – Covered Services & Limits)

- Student must be enrolled through DMAS in:
 - Medicaid, or
 - CHIP (FAMIS)
- Generally speaking,
 - The student must have an active IEP in place at the time the services are rendered
 - The service being billed must be listed in the IEP

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Basic Requirements

LEA Provider Manual (Ch. IV – Covered Services & Limits)

- However,
 - In the case of a student being evaluated for special education, there may not be an IEP in place at the time of evaluation; however, if a subsequent IEP is developed and the evaluation is listed there, it may be billed.
 - This is regardless of whether or not the evaluation resulted in the recommendation for further billable services.

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Basic Requirements

LEA Provider Manual (Ch. IV – Covered Services & Limits)

- In the case of a student with an existing IEP being evaluated for the need for a particular service; if the evaluation is listed in the IEP, it may be billed.
- This is regardless of whether or not the evaluation resulted in the recommendation for further billable services.

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Basic Requirements

LEA Provider Manual (Ch. IV – Covered Services & Limits)

- On-going services must also have a written treatment plan (aka plan of treatment)

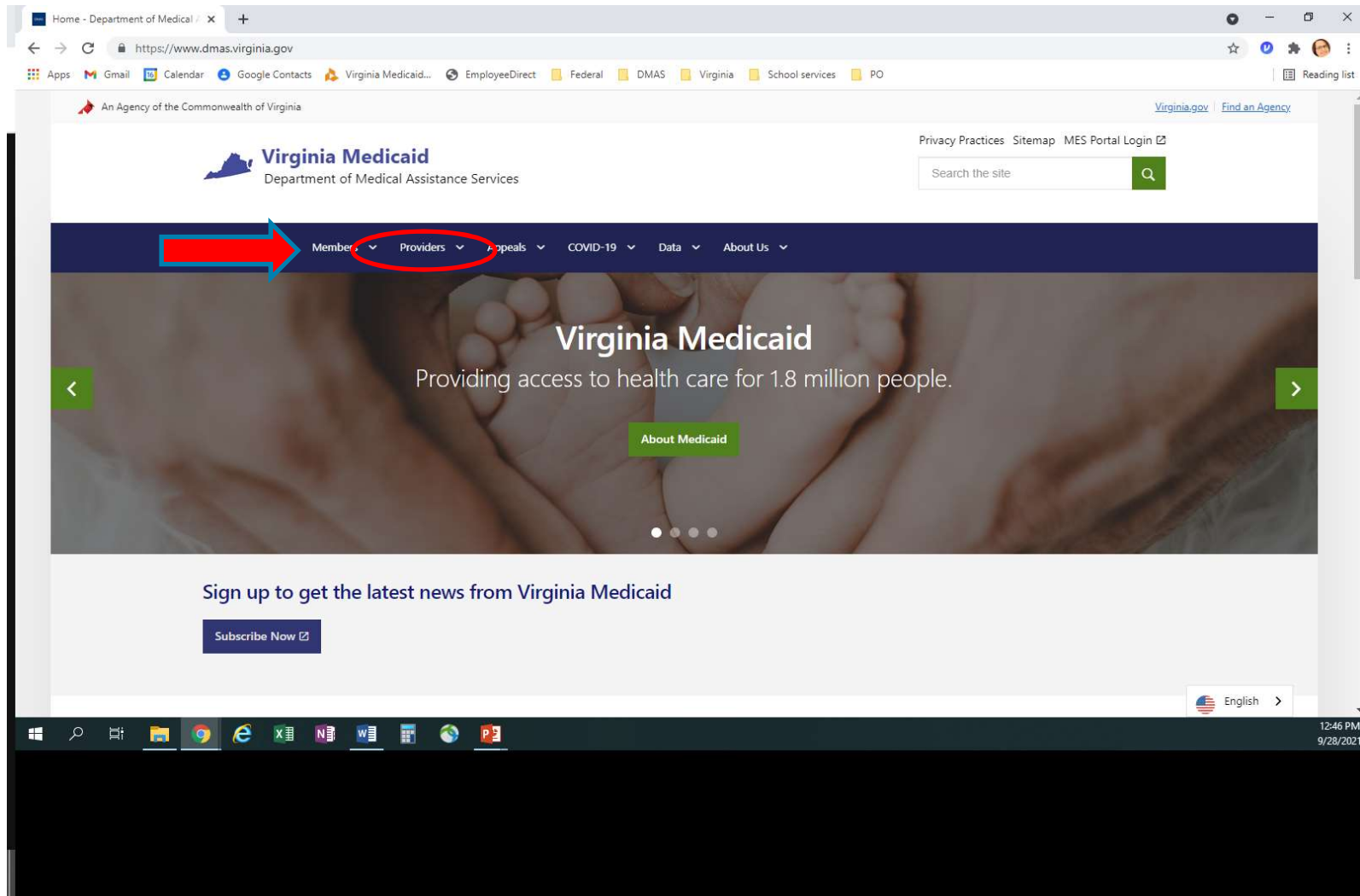
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Basic Requirements: Summary

- ✓ The school division must be enrolled with DMAS,
- ✓ Child must be eligible (Medicaid, FAMIS),
- ✓ The service must be a covered service (reference LEA manual chapter 2),
- ✓ The service must be listed in the student's IEP in order to bill,
- ✓ The service must be provided by a person qualified to provide that service under licensing rules, and
- ✓ The provider rendering the service must be employed by or contracted with the school division.

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DMAS has a new website!

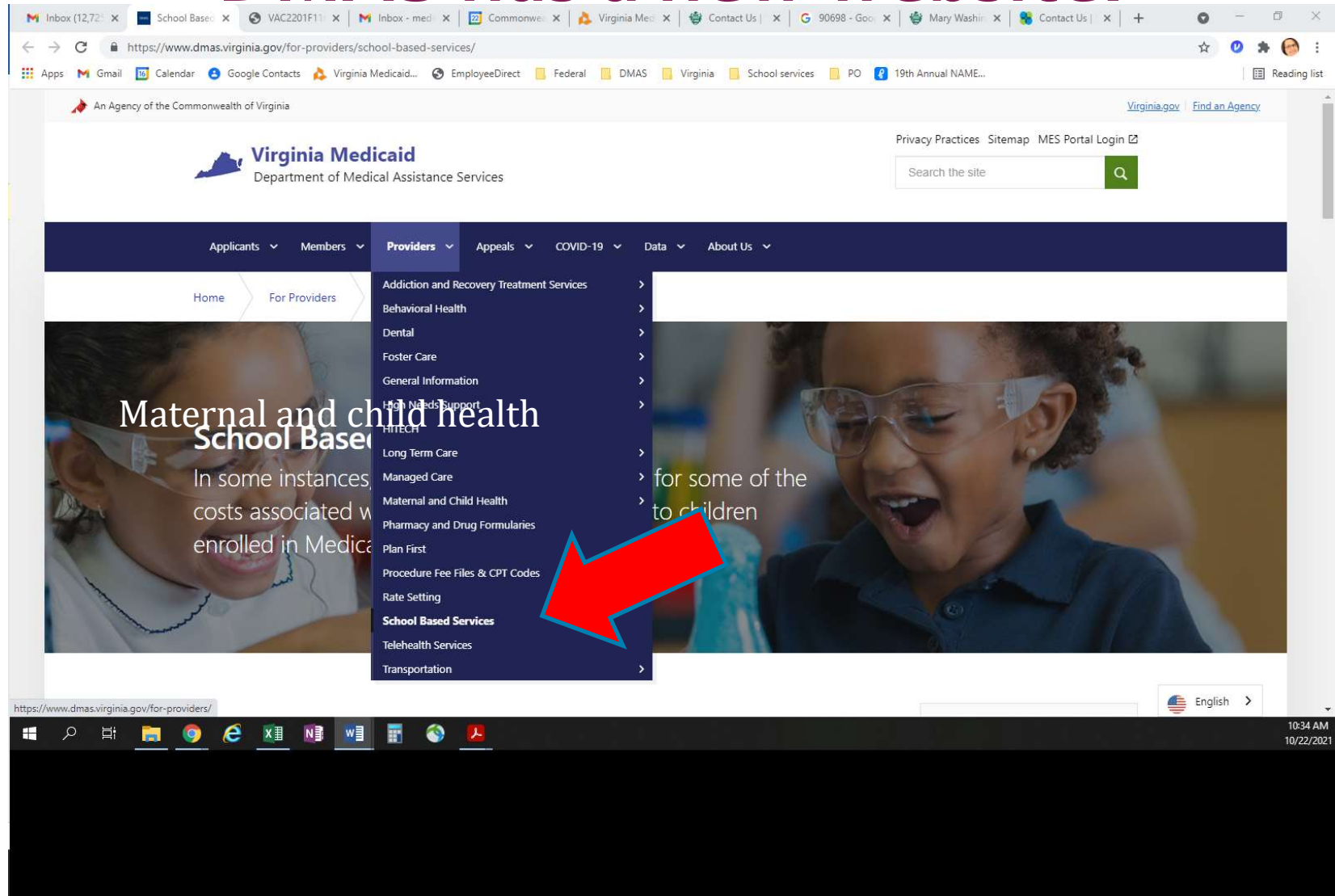


See: www.dmas.virginia.gov

RA



DMAS has a new website!

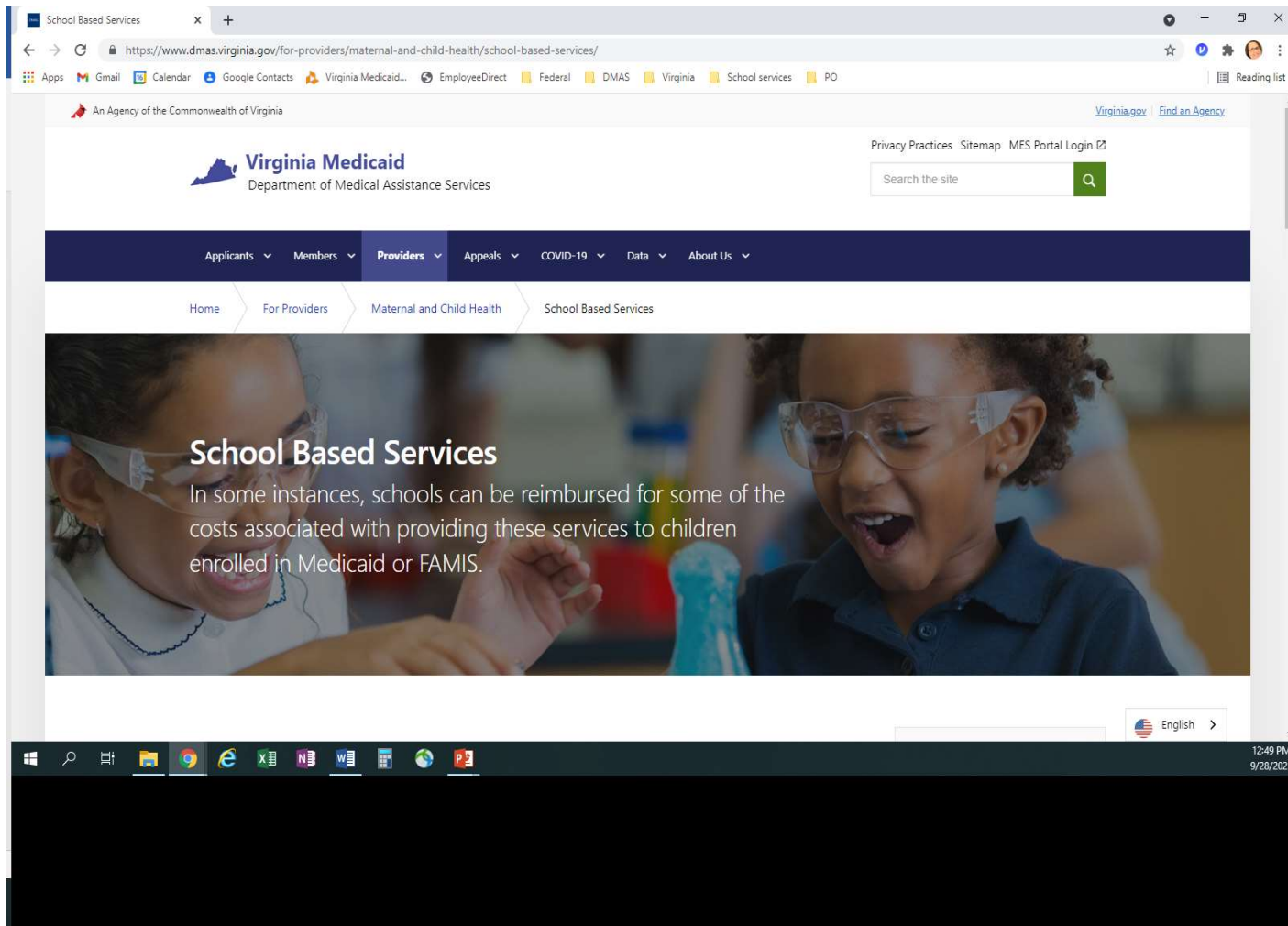


See: www.dmas.virginia.gov

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DMAS has a new website!



RA

See: www.dmas.virginia.gov



DMAS School Services

Where to find DMAS requirements on-line

□ <https://www.dmas.Virginia.org>

- Training materials
- Cost settlement guidance
- RMTS information

□ <https://vamedicaid.dmas.virginia.gov/provider>

Provider enrollment

- Policy manuals

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DMAS School Services

Services

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DMAS School Services

LEA Provider Manual (Ch. IV – Covered Services & Limits)

- Assessments and evaluations
- Counseling

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DMAS School Services

LEA Provider Manual (Ch. IV – Covered Services & Limits)

- Services must be provided:
 - Within the limits and scope of individual license and Board requirements
 - In accordance with Special Education regulations
 - In accordance with school division requirements and
 - Within scope of DMAS covered services requirements (See LEA provider manual).
 - And carefully and thoroughly documented in the student's record

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DMAS School Services

Telemedicine

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Delivering services through telemedicine

DMAS' current policy put into place due to COVID-19

Telemedicine is a means of providing covered services through the use of two-way, real time interactive electronic communication between the student and the DMAS-qualified provider located at a site distant from the student. This electronic communication must include, at a minimum, the use of audio and video equipment.

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Delivering services through telemedicine

DMAS' current policy put into place due to COVID-19

- Psychological and mental health services may be provided via telemedicine and the provider's and school's discretion.
- A paid staff person does NOT have to be with the student at the time of the telemedicine visit.

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DMAS School Services

Provider Requirements

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DMAS Provider Requirements

Provider manual contents

- Chapter II
 - Provider Participation Requirements
- Chapter IV
 - Services
- Chapter V
 - Billing
- Chapter VI
 - Documentation

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DMAS Provider Requirements

- Behavioral health services may be provided by:
 - A psychiatrist licensed by the Board of Medicine;
 - A licensed clinical psychologist, licensed school psychologist, or licensed school psychologist-limited licensed by the Board of Psychology;
 - A licensed clinical social worker (LCSW) licensed by the Board of Social Work;
 - A licensed professional counselor (LPC) licensed by the Board of Counseling;
 - A psychiatric clinical nurse specialist (CNS) licensed by the Board of Nursing and certified by the American Nurses Credentialing Center;
 - A licensed marriage and family therapist (LMFP) licensed by the Board of Counseling; or
 - A school social worker endorsed by Department of Education.

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DMAS Provider Requirements

- Psychological testing technician:
 - A DMAS qualified provider acting within the scope of his or her licensure may utilize a psychological testing technician to administer psychological tests as a component of the psychological testing evaluation service. The qualified provider must provide general supervision which, in this context, means under the qualified provider's overall direction and control, but his or her presence is not required during the performance of the procedure.
 - It is acceptable for a psychology intern to perform the role of psychological testing technician. These services may be billed as long as the testing technician/psychology intern is a LEA-paid position.

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DMAS School Services

Providing Medicaid services in a school setting

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Providing Medicaid services in a school setting

- Requires a shift in thinking/different model of thinking
- Making the shift
 - Medical Necessity
 - Qualifications
 - Schools are paid based on cost
 - Diagnosing

RQ

Parts of the Shift...

- Medical Necessity
 - Services are not inherently different or “less” when provided in the school or by a school provider
 - Included or referred in the IEP, performed by a DMAS-qualified provider, must be necessary/required
 - On-going services must also be supported by a Mental Status Examination, associated with an ICD-10 diagnosis, and include treatment plan with services specific and effective for the student’s condition.

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Parts of the Shift...

- DMAS Qualified Providers
 - A licensed, qualified psychologist, psychiatrist or mental health provider must be listed on the claim form. This is us!
 - Being a school-based provider or having the 'limited" license does not limit our service delivery, scope of practice, or make our services less professional or inherently different.
- Grasping Cost-Based Reimbursement
 - One thing that makes Medicaid & Schools different
- The Debate – DSM/ICD Diagnosis
 - Translating special education terminology into medical model using ICD 10 Codes
- Consider Best Practices
 - Many of the requirements for Medicaid can be viewed as best practices

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Parts of the Shift...

- The myths and the reality
 - This is not within my scope of practice
 - It's too much paperwork
 - It's not worth the money
 - It's unethical to take Medicaid money

DMAS School Services

Documentation

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General documentation requirements

- National Provider Identifier (NPI)
- Service included or referenced in IEP
- Maintain records for 6 years
- Documentation must be complete, accurate, readily accessible and systematically organized.
- Clearly identify the recipient of services using student's full name, and Medicaid or FAMIS ID number.
- Signatures – must include first initial, last name and title, and dated (m/d/year)

Documenting Evaluation Services

- Educational history, medical history, family history and previous psychological treatment
- Clear referral questions and presenting concerns
- Sources of information used in completing the evaluation
- Tests administered
- Interpretation of test data and other clinical information
- Diagnostic Impressions
- Recommendations

Documenting On-going Psychological Services

- Educational history, medical history, family history and previous psychological treatment
- Mental status examination
- Treatment Plan
 - Individual-specific goals related to symptoms and behavior
 - Treatment modalities
 - Estimated length that treatment will be needed
 - Frequency of treatment/duration of the treatment
 - Documentation of family/caregiver participation in the plan for treatment
- Diagnostic impressions documented within the previous 12 months

Documentation Supporting On-going Psychological Services

Counseling Sessions

- Length of session
- Level of participation in treatment
- Type of session
- How the activities of the session relate to the student-specific goals
- Progress or lack thereof toward the goals
- Plan for next session
- Signature of the provider

LEA Provider Manual -
Chapter 6

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Plan for Treatment

- Plan for Treatment is not a “form”. Treatment planning must be incorporated into all of the following:
 - Diagnostic Interview Examination
 - Therapy Progress Note
 - Psychological Testing Evaluation

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Billing and CPT Coding

ICD-10 Diagnosis

- Assign an ICD-10 Code which best corresponds with the mental, behavioral, or neurodevelopmental disorder (F-Code)
 - www.icd10data.com
- Must be documented
- Used in schools only for Medicaid documentation; Does not have to be used in any school reporting (psychological evaluation reports, IEP)

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ICD-10 Diagnosis – Example 1

Use the ICD-10 code that most closely represents the student's eligibility.

- If a student is identified under the classification of Specific Learning Disability, use a Learning Disorder diagnosis code.

ICD-10 Diagnosis – Example 2

Use the ICD-10 code that most closely represents the student's eligibility.

- If a student is identified under the classification of Other Health Impairment due to ADHD, use an ADHD diagnosis code.

ICD-10 Diagnosis – Example 3

Use the ICD-10 code that most closely represents the student's eligibility.

- If a student is identified under the classification of Emotional Disability, use a behavioral (ADHD, ODD), Mood (Depression), or Anxiety (GAD) diagnosis code.

CPT Coding - Evaluations

- **96130/96131 – Psychological testing evaluation services (2-test rule)**
- **96136/96137 – Psychological or neuropsychological test administration and scoring (2-test rule)**
- 96116/96121 – Neurobehavioral status exam (clinical assessment of thinking, reasoning, and judgment)
- 96112/96113 – Developmental test administration, interpretation and report
- 96127 – Brief emotional/behavioral assessment (ADHD rating scale or Suicide Screening only)

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CPT Coding - Evaluations

- 96138/96139 – Psychological or neuropsychological test administration and scoring by technician (2-test rule)
- 96146 – Psychological or neuropsychological test, with single automated instrument via electronic platform, with automated result only
- 96110 – Developmental Screening
- 96132/96133 – Neuropsychological testing evaluation services (2-test rule)

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2-Test Rule

- What is a test?
 - How was the test administered and scored?
 - How was the test interpreted?
 - Was the test required for the evaluation?

CPT Coding – On-going Services

90791 – Psychiatric diagnostic interview examination

90791 and 90785 – Interactive psychiatric interview examination

90832/90843/90837 – Individual psychotherapy 30/45/60 minutes

90832/90834/90837 and 90785 – Individual psychotherapy, interactive...30/45/60 minutes

90846/90847 – Family psychotherapy

90853 – Group psychotherapy

90853 and 90785 – Interactive Group Psychotherapy

Simplified Billing Option (for evaluations)

90791

- Can be used for psychological evaluations
- Flexible to cover most evaluations
- No more 2-test rule
- Can still be used again at a later time to bill for a Diagnostic Interview Examination prior to providing on-going services
- Good documentation including dates and times of services still required.
- Reports/documentation must still include required information

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■ Psychological Testing Technician

- A DMAS qualified provider acting within the scope of his or her licensure may utilize a psychological testing technician to administer psychological tests **as a component of the psychological testing evaluation service.**
- The qualified provider must provide general supervision which, in this context, means under the qualified provider's overall direction and control, but his or her presence is not required during the performance of the procedure.
- It is acceptable for a psychology intern to perform the role of psychological testing technician. These services may be billed as long as the testing technician/psychology intern is a LEA-paid position.

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Real-world, practical tips

- For efficiency and compliance:
 - Fold documentation into your evaluation routine (it's not an "add-on")
 - Create a documentation plan that works for you (there's no one "right way" to do it)
 - Build time in your schedule for documentation (don't just hope you will find time somewhere)
 - When in doubt, go back to the source (use the DMAS website)
 - Avoid acronyms
 - Trust your clinical judgment (you have specialized training – you are the expert)
 - Call each other

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What is Personal Care?

- *Includes a range of "assistance activities" provided by unlicensed staff to help students participate in school.*

Examples of Personal Care Services:

- Prompting and Redirection
- Following a reinforcement schedule for a student exhibiting desired behavior
- Escorting students through building
- De-escalation

Personal Care Services must also...

- Be performed by unlicensed staff under the supervision of a school counselor, school psychologist, or school social worker.
- Follow a written plan developed by school counselor, school psychologist, or school social worker.

Documentation Requirements:

Intervention Plan that includes:

- Diagnosis or identifying clinical issue to be addressed
- Description of intervention including frequency of service
- Measurable long-term goals
- Date service begins

Service Log:

- Date and amount of time of service
- Activity
- Student Response

What does it mean by “qualified provider”?

- DMAS Qualified-Provider
- Licensed through DHP or VDOE

***School Counselors, School Psychologists,
School Social Workers as Qualified Healthcare
Service Providers!***

Supervision activities for Medicaid and Schools...

- Supervision of unlicensed staff providing assistance services covered as Personal Care.
- Supervision of psychological testing technicians.

Examples:

- *An instructional assistant is following an intervention plan developed by a school counselor, school psychologist, or school social worker to monitor attention and provide verbal redirection every 10 minutes during math class. This is observed and discussed with the instructional assistant at least 1 time per 9 weeks.*
- *School psychology intern assists with cognitive testing as part of a comprehensive evaluation completed by a school psychologist. The school psychologist and school psychology intern meet to discuss evaluation session and the information is included in the evaluation report.*

Introducing the RMTS

<https://www.youtube.com/watch?v=7NX1-tMeYQM>

Why all the talk about the RMTS?

- The Random Moment Time Study (RMTS) is an essential component of how school divisions are reimbursed through the Medicaid and Schools program.
- The RMTS is used to measure and quantify the amount of time all staff (qualified providers) employed by school divisions across the state spend doing work activities that qualify for Medicaid reimbursement.
- Includes direct services AND services that provide and promote access to services.

How do we improve our responses for the RMTS?

- School Counselors, School Psychologists, and School Social Workers are Qualified Healthcare Service Providers
- Services provided in schools are healthcare related services
- Be specific and offer context
- No “justs”

Examples for improving RMTS responses...

Don't say "just":	Think about this instead:
Completing paperwork	Documenting notes about a counseling session I provided to a student.
Professional Development	Engaging or providing PD to learn a specific counseling strategy.
In a meeting	In a meeting with the school psychologist discussing a student's recent health concerns and their impact on treatment
Driving	Traveling from an elementary school to a middle school to complete a risk/threat assessment
Student Absent	My schedule was cancelled because the student was absent, so I was preparing materials for my afternoon counseling session.
Providing services pursuant to an IEP	Providing counseling to a student who is identified for special education services.

Q&A

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