



April 23, 2007 Topical Conference Meeting – Individualized Education Programs (IEP)

**Participants:**

Chris Bess, WA Department of Social and Health Services  
Kris Johnson, Jordan School District, UT  
Marybeth Wells, ID Department of Education  
Sue Fischer, UMass Medical School  
Becky Stoddard, KY Department of Education  
Brenda Lenhart, Virginia Beach City Public Schools, VA  
Hal Matot, Steve Wright etc. NY Department of Health  
Cynthia Hall, Infohandler  
Tallie Tollen, NM Department of Human Services  
Suzy Whitehead, NM Department of Human Services  
Susan Horne, Alpine School District, UT  
Ashley Barton, VA Department of Medical Services  
Michelle Cowart, Contra Costa County Office of Education  
Janice Fruge, Louisiana Department of Education  
*\*Please excuse us if your name was omitted or misspelled.*

**Faculty**

Facilitator: Nora Poisella, NC Department of Health and Human Services  
Notetaker: Susie.Gaines, NC Department of Health and Human Services  
Q and A: Terry Reyes-Gavilan, Miami-Dade County Public Schools, FL  
Overview/Q and A: Cathy Griffin, MN Department of Education  
Q and A: Maryikay Litzau, MN Department of Education  
Notetaker/Q and A: Joe Greene, Seminole County Public Schools, FL  
Conference Call Host: Liz Touhey, CA Department of Health Services

**Overview**

Cathy Griffin, Minnesota Department of Education, presented an overview of the IEP process. The text of her overview may be found on the NAME website.  
<http://www.medicaidforeducation.org/content.asp?a=158>

Typically, if an IEP is written well, the services for OT, PT and SpL Pathology will be articulated well in the IEP. Some services are precluded by the need for confidentiality. Nursing and personal care plans, for instance may be mentioned and referenced on a different plan. Need to have the frequency and time on these documents in order to bill.

**Questions and Answers**

**Question:** Recently our Medicaid agency is enforcing their policy that children in Private Schools cannot have private developmental services provided in the private school setting when the parent makes the placement. We have educated them as to the proportionate share that private schools may receive and that it is not sufficient for payment of developmental services.

**Answer:** Parents can choose to place a child in a private school. Medicaid eligible students can be enrolled in a private school and get services from private disability (rehab) agencies but Medicaid will not pay for them as School-Based service. It is important for parents to understand these distinctions prior to placing their children in private schools. It is the public school's responsibility to provide the service. In Minnesota, for example, the resident district can contract with a private provider (school) to give the services. Another commenter reminded to make sure the IEP clearly distinguishes what may be an educational developmental need as opposed to a medically related developmental need if Medicaid will be billed..

**Question:** We have been told by our Medicaid Agency that when parents place a child with a disability (IEP) in a private school, Medicaid payments for covered health related services is not possible. Is that true?

**Answer:** That depends upon whether the related services are provided by the private school, the public school, or the private school under a contract with the public school. Federal Regulations only permit LEAs, which are public and not private schools, to bill Medicaid for otherwise covered services. Therefore, if the student has an IEP that includes a related service that meets all of the requirements for billing Medicaid in your state, and those services are provided by qualified staff from a public school or by qualified staff from the private school as a contracted service with the public school, it may be possible for those services to be billed to Medicaid.

**Discussion Points:**

- In accessing payment from Medicaid, try to work smarter not harder! Know what the requirements are in your individual State Medicaid Program.
- Requirements for use of diagnosis on claim forms for School-Based services varies from state to state.
- Concern exists as to the most expedient way to meet Medicaid's need for documentation of medical verses educational services, based on each specific need of the student, as well as monitoring and reporting the student's progress. Consideration must also be given to vocational verses developmental needs and rehabilitation verses habilitation needs of the student.
- Documentation of a student's services and progress can be coordinated in order to meet both the educational and medical needs of the student much like the IEP can stand for a plan of care and approval for Medicaid billing.
- The EPSDT aspect of Medicaid Services for the school population along with access to appropriate care after age 21 needs to be considered when developing School-Based services within a Medicaid State Plan.

Please let Nora Poisella know your ideas for the next topical conference. The ER Committee hopes to facilitate a call in August.

*Also, please consider submitting a proposal to present at the September NAME conference.*