

Alaska Medical Assistance Provider Billing Manuals



Section I: School-Based Services, Policies and Procedures

Under Review

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About This Manual

The Department of Health and Social Services (DHSS) is the state agency designated to administer the Alaska Medical Assistance Program, which includes:

- Medicaid
- Denali KidCare (DKC)
- Chronic and Acute Medical Assistance (CAMA)

Unless otherwise specified, references to the Alaska Medical Assistance Program or Alaska Medical Assistance mean Medicaid, Denali KidCare and CAMA. References to Alaska Medicaid, or Medicaid, mean only Alaska Medicaid and Denali KidCare.

This manual, *Section I: School-Based Services, Policies and Procedures* is to be used by enrolled school districts in conjunction with

- [Section II: Professional Claims Management](#)
- [Section III: General Program Information](#)

Updates to this manual will be necessary from time to time as federal and state medical assistance regulations are adopted. As updates are made, each affected segment of the manual will be annotated with the date of the change. Providers will be informed of these updates by remittance advice messages and announcements through Alaska Medicaid Health Enterprise at, <http://medicaidalaska.com>. Previously published manuals are available upon request.

Thank you for your participation in the Alaska Medical Assistance Program and for the services you provide.

Updated 03/21/14

Provider Enrollment

The following enrollment information is specific to school-based services. For general enrollment instructions and guidelines, refer to [Section III: General Program Information](#).

Provider Participation Requirements and Responsibilities

Provider Participation Requirements for School-Based Services

In addition to the general conditions for participation identified in [Section III: General Program Information](#), enrolling school districts must complete, sign and submit a [School-Based Services Addendum](#) available as part of the enrollment process at <https://medicaidalaska.com/portals/wps/portal/ProviderEnrollment> and <https://medicaidalaska.com/portals/wps/portal/DocumentsandForms>.

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Recipient Eligibility

All references to recipient mean an individual who is eligible for and receiving assistance under an Alaska Medical Assistance Program.

Eligibility Codes

The Department will pay an enrolled school district for covered services provided to a recipient under 21 years of age who is eligible for Alaska Medical Assistance under one of the following eligibility codes:

Eligibility Codes: School-Based Services	
Code	Category
10	Public Health Service (IHS, AANHS and TRICARE)
11	Pregnant Woman (Alaska Healthy Baby Program)
20	No Other Eligibility Codes Apply
24	300 percent Institutionalized
30	Adults with Physical and Developmental Disabilities (APDD), Waiver Only
31	APDD, Waiver Medical
34	APDD, Waiver Adult Public Assistance (APA)/Qualified Medicare Beneficiary (QMB)
50	Under 21
51	Juvenile Court Ordered Custody of Health & Social Services
52	Transitional Medical Assistance
54	Disabled/Supplemental Security Income (SSI) Child
69	APA/QMB - Dual Eligibility
70	Intellectual and Developmental Disabilities (IDD), Waiver Only
71	IDD, Waiver Medical
74	IDD, Waiver APA/QMB
80	Children with Complex Medical Conditions (CCMC), Waiver Only
81	CCMC, Waiver Medical

Updated 11/17/14

Service Authorization

Certain services, procedures and medications covered by Alaska Medical Assistance require service authorization (SA). Refer to [Medicaid-Covered Services](#) in this section for service authorization requirements for specific services and [Section II: Professional Claims Management](#) of this manual for information about requesting and obtaining SA.

Updated 02/13

School-Based Services

Alaska Medical Assistance reimburses enrolled providers for medically necessary services for eligible recipients when delivered, ordered or prescribed by a provider within the scope of the provider's license or certification.

Services rendered based on a prescription, order or referral are reimbursable only if the prescribing, ordering or referring provider is enrolled as an Alaska Medical Assistance provider.

Updated 06/12

Travel for Medical Care

Alaska Medicaid covers out-of-area and local transportation and out-of-area accommodation services when travel is required to receive non-emergent, medically necessary services.

For additional information about non-emergency transportation, including how to request service authorization, refer to [Section III: General Program Information](#).

Updated 04/13

Individualized Education Plan/Individual Family Support Plan Requirements

Alaska Medical Assistance requires the following for coverage of school-based services:

- An evaluation, screening, or assessment must be completed and must indicate the need for school-based services
- An Individualized Education Plan (IEP) or Individual Family Support Plan (IFSP) must be developed based on the outcome of the evaluation, screening, or assessment
 - Children ages three through five must have an **IFSP** that is current and completed in accordance with [4 AAC 52](#)
 - Children over age five must have an **IEP** that is current and completed in accordance with [4 AAC 52](#)
- The IEP/IFSP must identify
 - The services for which the school district is seeking payment
 - Each health condition to be addressed
 - Treatment goals
 - Type, amount, frequency, and duration of each service to be offered

Updated 03/21/14

Plan Evaluation, Screening or Assessment

Alaska Medicaid will reimburse a school district for the cost of an evaluation, screening or assessment of a recipient's need for a school-based service only if the outcome indicates the need for services included in the Individualized Education Plan (IEP) or Individual Family Support Plan (IFSP).

Following completion of the initial evaluation, screening or assessment the school district must develop an IEP/IFSP for each recipient who needs individualized attention.

Updated 03/21/14

Plan Requirements

In addition to the requirements identified in [4 AAC 52](#), the plan must specify:

- The services for which the school is seeking reimbursement
- Each condition to be addressed
- Anticipated treatment goals and objectives
- Type, amount, frequency and duration of each service offered and rendered

Updated 03/21/14

Plan Changes

Changes made to an IEP/IFSP must comply with the requirements of [4 AAC 52.140 - 152](#) and must be documented in the recipient's clinical record. Plan changes that add, remove, or alter services must be documented by or under the direction of one of the following licensed* health care providers who is acting within the scope of his/her license and who is familiar with the recipient's plan, health condition and treatment history:

- Physician
- Advanced nurse practitioner
- Physician assistant
- Physical therapist
- Occupational therapist
- Speech-language pathologist
- Audiologist
- Psychologist or psychological associate
- Behavioral health professionals or behavioral health associate

* Psychologists, psychological associates, behavioral health professionals or behavioral health associates may substitute adequate training or experience.

Updated 03/21/14

Plan Reevaluation

Alaska Medicaid covers one plan reevaluation per year. Any additional plan reevaluations require written medical justification.

Updated 03/21/14

Record Requirements

A school district must maintain clinical and financial records in accordance with [4 AAC 52](#) and must allow the department access to these records in order to determine eligibility for services.

Updated 03/21/14

Clinical Records

In addition to record keeping requirements identified elsewhere in this section, and within [Section III: General Program Information](#), enrolled school districts must ensure that the recipient's clinical record includes:

- A complete service record including
 - Specific services and treatment provided
 - Extent of each service provided
 - Dates of service
 - Name of each professional who provided services
- Documentation of the relationship of services provided to the recipient to the recipient's achievement of IEP/IFSP goals and objectives
- The recipient's Alaska Medical Assistance Recipient ID number and at least one additional unique identifier, such as the child's name or student ID number, present on each page of documentation

Much of the required documentation may already appear in the recipient's Individualized Education Plan (IEP) or Individual Family Support Plan (IFSP); school districts are not required to maintain multiple documentation sources. To meet Alaska Medicaid requirements, school districts must include the clinical information outlined in the recipients IEP/IFSP as described in [Plan Requirements](#) in this section.

Updated 03/26/14

Financial Records

The district must also keep financial records of each recipient for whom services have been billed. The financial records must identify:

- The date of service and charge for each service provided
- Each payment source pursued
- The date and amount of all debit and credit billing actions for each date of service provided
- The amounts billed and paid

Updated 03/21/14

Medicaid-Covered Services

Alaska Medicaid covers certain school-based audiology, behavioral health, nursing, occupational therapy, physical therapy, and speech-language therapy services.

For a list of all covered school-based services refer to the [School-Based Services Fee Schedule](http://manuals.medicaidalaska.com/medicaidalaska/providers/FeeSchedule.asp) available at <http://manuals.medicaidalaska.com/medicaidalaska/providers/FeeSchedule.asp>.

Updated 03/21/14

School-Based Audiology Services

Alaska Medicaid covers school-based audiology screening, evaluation, and treatment services when provided by an individual who has an active audiologist license under [AS 08.11](#). Audiologists providing school-based services may, but are not required to enroll individually with Alaska Medical Assistance.

For a complete list of covered school-based audiology services, refer to the [School-Based Services Fee Schedule](#).

Updated 03/21/14

School-Based Behavioral Health Services

Alaska Medicaid covers certain school-based behavioral health services when provided by the following individuals who are acting within their scope of training and experience.

The following are individuals authorized to provide behavioral health services, and the services for which the school system may be reimbursed:

Behavioral Health Professional*

An individual who has a master's degree in psychology, social work, counseling, or a related field with specialization or experience in working with children experiencing behavioral, physical, and emotional disabilities.

A behavioral health professional may provide covered:

- Emotional support assistance to help a child process emotions during periods of elevated stress
- Behavior management education that teaches behavior management, modification and redirection techniques to elicit positive behaviors with families, groups and individuals
- Crisis response services that include short-term interventions to prevent harm, build coping skills, develop mechanisms for positive self-care and stabilize a child or family in acute distress
- Behavior modification assistance using counseling techniques to assist in modifying behavior to individuals and groups
- Functional behavioral assessments to assess a child's behavior
- Psychoeducational services designed to help a child develop or improve specific self-care skills and engage in age-appropriate social behavior

Behavioral Health Associate*

An individual who has less than a master's degree in psychology, social work, counseling, or a related field with specialization or experience in working with children experiencing behavioral, physical, and emotional disabilities.

A behavioral health associate may provide covered:

- Emotional support assistance to help a child process emotions during periods of elevated stress
- Behavior management education that teaches behavior management, modification and redirection techniques to elicit positive behaviors with families, groups and individuals

Psychologist or Psychological Associate*

An individual who is licensed under [AS 08.86](#) or who possesses a special services certificate (Type C) under [4 AAC 12](#) endorsed in school psychology who is employed by the school district.

A psychologist or psychological associate may provide covered:

- Testing and interpreting a child's psychological, cognitive and emotional functioning
- Interpreting behavioral assessment results

For a complete list of covered school-based behavioral health services, refer to the [School-Based Services Fee Schedule](#).

* Does not include an individual employed as a teacher

Updated 03/21/14

School-Based Nursing Services

Alaska Medicaid covers specified school-based medication administration, direct observation, and medication training and support services when provided by a nurse who has an active license under [AS 08.68](#).

For a complete list of covered school-based nursing services, refer to the [School-Based Services Fee Schedule](#).

Updated 03/21/14

School-Based Occupational Therapy

Alaska Medicaid covers specified school-based occupational therapy services when provided by or under the direction of an individual who is licensed under [AS 08.84](#) as an occupational therapist.

Occupational therapists and occupational therapy assistants providing school-based services may, but are not required to enroll individually with Alaska Medical Assistance.

For a complete list of covered school-based occupational therapy services, refer to the [School-Based Services Fee Schedule](#).

Updated 03/21/14

School-Based Physical Therapy

Alaska Medicaid covers specified school-based physical therapy services when provided by or under the direction of an individual who is licensed under [AS 08.84](#) as a physical therapist.

Physical therapists and physical therapy assistants providing school-based services are not required to enroll individually with Alaska Medical Assistance.

For a complete list of covered school-based physical therapy services, refer to the [School-Based Services Fee Schedule](#).

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School-Based Speech-Language Pathology

Alaska Medicaid covers specified school-based speech-language pathology services when provided by or under the direction of an individual who

- is licensed under [AS 08.11](#) as a speech-language pathologist or
- meets the requirements of [42 C.F.R. 440.110\(c\)](#) as a speech-language pathologist.

Speech-language pathologists and speech-language pathology assistants providing school-based services may, but are not required to enroll individually with Alaska Medical Assistance.

For a complete list of covered school-based speech-language pathology services, refer to the [School-Based Services Fee Schedule](#).

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Non-covered Services

The services listed below are non-covered for school-based services providers. This list is representative of non-covered services and procedures and is not intended to be all-inclusive. For additional non-covered services, refer to [Section III: General Program Information](#).

- Services not identified in the child's IEP/IFSP

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Claim Submission

Claims for services provided by a school district must be submitted using the school district's Alaska Medical Assistance Provider ID, and not that of the individual who performed the services.

Refer to [Section II: Professional Claims Management](#) for claim submission instructions and to <http://medicaidalaska.com> for claim examples.

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Billing Method

The school district must comply with one of the following billing methods as established at enrollment:

- The school district will remit quarterly to the Division of Health Care Services an amount equal to the estimated non-federal portion of the projected reimbursement for the district's school-based services claims for the upcoming quarter. The Division will coordinate with districts that select this method to determine the appropriate payment amount, which will be based in part on the most recent eight (8) quarters of Medicaid reimbursement for the district's school-based services.
- The school district will total the claims that it intends to submit, subtract the anticipated Federal Medical Assistance Percentage (FMAP), and remit the non-federal portion to the Division of Health Care Services.

A claim cannot be paid prior to submission of the non-federal portion.

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Pricing Methodology

Resource-Based Relative Value Scale

Alaska Medical Assistance reimburses school-based services using the resource-based relative value scale (RBRVS) methodology. School-based services are reimbursed at 85 percent of the established rate for physicians.

Refer to [Section II: Professional Claims Management](#) for additional pricing information.

Updated 03/21/14

Fee Schedule

The fee schedules list procedure codes for school-based services, service authorization or medical justification requirements, and the maximum allowable reimbursement rate. Providers should use these codes when submitting a claim. To access the fee schedules, visit <http://manuals.medicaidalaska.com/medicaidalaska/providers/feeschedule.asp>.

Updated 03/21/14

Pricing for Services without Established Relative Value Units

Services for which the Centers for Medicare and Medicaid Services (CMS) has not established Relative Value Units (RVU) are reimbursed according to the [School-Based Services Fee Schedule](http://manuals.medicaidalaska.com/medicaidalaska/providers/School-Based%20Services%20Fee%20Schedule), available at <http://manuals.medicaidalaska.com/medicaidalaska/providers/FeeSchedule.asp>.

Refer to [Section II: Professional Claims Management](#) for additional pricing information.

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