

Chapter 182-537 WAC

SCHOOL SERVICES

WAC

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WAC 182-537-0100 School-based health care services for children in special education—Purpose. The medicaid agency pays school districts for school-based health care services provided to children in special education consistent with Section 1905(c) of the Social Security Act. Covered services must:

- (1) Identify, treat, and manage the education-related disabilities (i.e., mental, emotional, and physical) of a child in special education;
- (2) Be prescribed or recommended by licensed physicians or other licensed health care providers within their scope of practice under state law;
- (3) Be medically necessary;
- (4) Be diagnostic, evaluative, habilitative, or rehabilitative in nature; and
- (5) Be included in the child's current individualized education program (IEP).

[Statutory Authority: RCW 41.05.021, WSR 13-05-017, § 182-537-0100, filed 2/7/13, effective 3/10/13. WSR 11-14-075, recodified as § 182-537-0100, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, and 42 C.F.R. 440.110. WSR 09-07-004, § 388-537-0100, filed 3/4/09, effective 4/4/09. Statutory Authority: RCW 74.08.090, WSR 01-02-076, § 388-537-0100, filed 12/29/00, effective 1/29/01. Statutory Authority: RCW 74.04.050 and 74.08.090. WSR 00-01-088, § 388-537-0100, filed 12/14/99, effective 1/14/00.]

WAC 182-537-0200 School-based health care services for children in special education—Definitions. The following definitions and those found in chapter 182-500 WAC apply to this chapter:

"Agency" - See WAC 182-500-0010.

"Amount, duration, and scope" - A written statement within the individualized education program (IEP) that addresses sufficiency of services to achieve a particular goal (a treatment plan for *how much* of a health care related service will be provided, *how long* a service will be provided, and *what* the service is).

"Assessment" - For purposes of this chapter an assessment is made-up of medically necessary tests given to an individual child by a licensed professional to evaluate whether a child is determined to be a child with a disability, and in need of special education and related services. Assessments are a part of the evaluation and re-evaluation processes and must accompany the IEP.

"Child with a disability" - For purposes of this chapter, a child with a disability is a child evaluated and determined to need special education and related services because of a disability in one or more of the following eligibility categories:

- Autism;
- Deaf/blindness;
- Developmental delay for children ages three through nine, with an adverse educational impact, the results of which require special education and related direct services;
- Hearing loss (including deafness);
- Intellectual disability;
- Multiple disabilities;
- Orthopedic impairment;
- Other health impairment;
- Serious emotional disturbance (emotional behavioral disturbance);
- Specific learning disability;
- Speech or language impairment;
- Traumatic brain injury; and
- Visual impairment (including blindness).

"Core provider agreement" - The basic contract the agency holds with providers serving medical assistance clients.

"Direct health care related services" - Services provided directly to a child either one-on-one or in a group setting. This does not include special education.

"Evaluation" - Procedures used to determine whether a child has a disability, and the nature and extent of the special education and related services are needed. (See WAC 392-172A-03005 through 392-172A-03080.)

"Face-to-face supervision" or **"direct supervision"** - Supervision that is conducted on-site, in-view, by an experienced licensed health care professional to assist the supervisee to develop the knowledge and skills to practice effectively, including administering the treatment plan.

"Fee-for-service" - See WAC 182-500-0035.

"Health care related services" - Developmental, corrective, and other supportive services required to assist an eligible child to benefit from special education. For the purposes of the school-based health care services program, related services include:

- Audiology;
- Counseling;
- Nursing;
- Occupational therapy;
- Physical therapy;

- Psychological assessments; and
- Speech-language therapy.

"Individualized education program (IEP)" - A written statement of an educational program for a child eligible for special education. (See WAC 392-172A-03090 through 392-172A-03135.)

"Medically necessary" - See WAC 182-500-0070.

"National provider identifier (NPI)" - See WAC 182-500-0075.

"Plan of care" or "treatment plan" - A written document that outlines the health care related needs of a child in special education. The plan is based on input from the health care professional and written approval from the parent or guardian.

"Provider" - See WAC 182-500-0085.

"Qualified health care provider" - See WAC 182-537-0350.

"Reevaluation" - Procedures used to determine whether a child continues to be in need of special education and related services. (See WAC 392-172A-03015.)

"Regular consultation" - Face-to-face contact between the supervisor and supervisee that occurs no less than once per month.

"Revised Code of Washington (RCW)" - Washington state law.

"School-based health care services program" or "SBS" - School-based health care services for children in special education that are diagnostic, evaluative, habilitative, rehabilitative in nature; are based on the child's medical needs; and are included in the child's individualized education plan (IEP). The agency pays school districts for school-based health care services delivered to medicaid-eligible children in special education under Section 1903(c) of the Social Security Act, and to individuals under the Individuals with Disabilities Education Act (IDEA) Part B.

"School-based health care services program specialist" or "SBHS specialist" - An individual identified in the interagency agreement school district reimbursement contract.

"Special education" - Specially designed instruction, at no cost to the parents, to meet the unique needs of a student eligible for special education, including instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings, and instruction in physical education. Refer to WAC 392-172A-01175.

"Washington Administrative Code (WAC)" - Codified rules of the state of Washington.

[Statutory Authority: RCW 41.05.021, 34 C.F.R. 300.154(d), and chapter 182-502 WAC. WSR 13-21-079, § 182-537-0200, filed 10/17/13, effective 11/17/13. Statutory Authority: RCW 41.05.021. WSR 13-05-017, § 182-537-0200, filed 2/7/13, effective 3/10/13. WSR 11-14-075, recodified as § 182-537-0200, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, and 42 C.F.R. 440.110. WSR 09-07-004, § 388-537-0200, filed 3/4/09, effective 4/4/09.]

WAC 182-537-0300 School-based health care services for children in special education—Client eligibility. Children in special education must be receiving Title XIX Medicaid under a categorically needy program (CNP) or medically needy program (MNP) to be eligible for school-based health care services. Eligible children enrolled in a

managed care organization (MCO) receive school-based health care services on a fee-for-service basis.

[WSR 11-14-075, recodified as § 182-537-0300, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, and 42 C.F.R. 440.110. WSR 09-07-004, § 388-537-0300, filed 3/4/09, effective 4/4/09.]

WAC 182-537-0350 School-based health care services for children in special education—Provider qualifications. The medicaid agency pays school districts to provide certain health care-related services (see WAC 182-537-0400). These services must be delivered by qualified health care providers who are enrolled with the medicaid agency and hold a current professional license:

(1) Audiology services must be delivered by a licensed audiologist.

(2) Counseling services must be delivered by:

(a) A licensed independent social worker (LiCSW);

(b) A licensed advanced social worker (LiACSW);

(c) A licensed mental health counselor (LMHC); or

(d) A licensed mental health counselor associate (LMHCA) under the supervision of a department of health-approved licensed supervisor.

(3) Nursing services must be delivered by:

(a) A licensed registered nurse (RN);

(b) A licensed practical nurse (LPN) who is supervised by an RN; or

(c) A noncredentialed school employee who is delegated certain limited health care tasks by an RN and is supervised according to professional practice standards (see RCW 18.79.260).

(4) Occupational therapy services must be delivered by:

(a) A licensed occupational therapist (OT); or

(b) A licensed occupational therapist assistant (OTA) who is supervised by a licensed occupational therapist.

(5) Physical therapy services must be delivered by:

(a) A licensed physical therapist (PT); or

(b) A licensed physical therapist assistant (PTA) who is supervised by a licensed physical therapist.

(6) Psychological services must be delivered by a licensed psychologist.

(7) Speech therapy services must be delivered by:

(a) A licensed speech-language pathologist (SLP); or

(b) A speech-language pathology assistant (SLPA) who:

(i) Has graduated from a speech-language pathology assistant program at a board-approved institution; and

(ii) Is directly supervised by a speech-language pathologist with a current certificate of clinical competence (CCC).

(8) For services provided under the supervision of a physical therapist, occupational therapist or speech-language pathologist, nurse, or counselor/social worker, the following requirements apply:

(a) The nature, frequency, and length of the supervision must be provided in accordance with professional practice standards, and be sufficient to ensure a child receives quality therapy services;

(b) The supervising therapist must see the child face-to-face at the beginning of services and at least once more during the school year;

(c) At a minimum, supervision must be face-to-face communication between the supervisor and the supervisee once per month. Supervisors are responsible for approving

and cosigning all treatment notes written by the supervisee before submitting claims for payment; and

(d) Documentation of supervisory activities must be recorded and available to the agency or its designee upon request.

(9) The school district must assure providers meet the professional licensing and certification requirements.

(10) Licensing exemptions found in the following regulations do not apply to federal medicaid reimbursement for the services indicated below:

- (a) Counseling as found in RCW 18.225.030;
- (b) Psychology as found in RCW 18.83.200;
- (c) Social work as found in RCW 18.320.010; and
- (d) Speech therapy as found in RCW 18.35.195.

[Statutory Authority: RCW 41.05.021, 34 C.F.R. 300.154(d), and chapter 182-502 WAC. WSR 13-21-079, § 182-537-0350, filed 10/17/13, effective 11/17/13. Statutory Authority: RCW 41.05.021. WSR 13-05-017, § 182-537-0350, filed 2/7/13, effective 3/10/13. WSR 11-14-075, recodified as § 182-537-0350, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, and 42 C.F.R. 440.110. WSR 09-07-004, § 388-537-0350, filed 3/4/09, effective 4/4/09.]

WAC 182-537-0400 School-based health care services for children in special education—Covered services. Covered services include:

(1) Evaluations when the child is determined to have a disability, and is in need of special education and health care related services;

(2) Direct health care services including:

- (a) Audiology;
- (b) Counseling;
- (c) Nursing;
- (d) Occupational therapy;
- (e) Physical therapy;
- (f) Psychological assessments; and
- (g) Speech-language therapy.

(3) Reevaluations, to determine whether a child continues to need special education and health care related services.

[Statutory Authority: RCW 41.05.021. WSR 13-05-017, § 182-537-0400, filed 2/7/13, effective 3/10/13. WSR 11-14-075, recodified as § 182-537-0400, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, and 42 C.F.R. 440.110. WSR 09-07-004, § 388-537-0400, filed 3/4/09, effective 4/4/09.]

WAC 182-537-0500 School-based health care services for children in special education—Noncovered services. Noncovered services include, but are not limited to the following:

- (1) Applied behavior analysis (ABA);
- (2) Attending meetings;
- (3) Charting;
- (4) Equipment preparation;
- (5) Instructional assistant contact;
- (6) Parent consultation;
- (7) Parent contact;
- (8) Planning;
- (9) Preparing and sending correspondence to parents or other professionals;
- (10) Professional consultation;
- (11) Report writing;
- (12) Review of records;

(13) School district staff accompanying a child in special education to and from school on the bus;

(14) Set-up;

(15) Teacher contact;

(16) Telehealth;

(17) Test interpretation;

(18) Travel and transporting; and

(19) Continuous observation of a child when direct school-based health care services are not actively provided. The agency pays for the act of watching carefully and attentively only if it involves actual interventions.

[Statutory Authority: RCW 41.05.021. WSR 13-05-017, § 182-537-0500, filed 2/7/13, effective 3/10/13. WSR 11-14-075, recodified as § 182-537-0500, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, and 42 C.F.R. 440.110. WSR 09-07-004, § 388-537-0500, filed 3/4/09, effective 4/4/09.]

WAC 182-537-0600 School-based health care services for children in special education—School district requirements for billing and payment. To receive payment from the medicaid agency for providing school-based health care services to eligible children, a school district must:

(1) Have a current, signed core provider agreement (CPA) with the agency. A copy of the CPA must be on-site within the school district.

(2) Have a current, signed, and executed interagency agreement with the agency. A copy of the agreement must be on-site within the school district for review as requested.

(3) Meet the applicable requirements in chapter 182-502 WAC.

(4) Comply with the agency's current, published ProviderOne billing and resource guide.

(5) Bill according to the agency's current, published school-based health care services for children in special education medicaid provider guide, the school-based health care services fee schedule, and the intergovernmental transfer (IGT) process. After school districts receive their invoice from the agency, they must provide their local match to the agency within one hundred twenty days.

(6) Meet the applicable requirements in chapter 182-537 WAC.

(7) Provide only health care related services identified through a current individualized education program (IEP).

(8) Use only licensed health care professionals, as described in WAC 182-537-0350 and the school-based care services for children in special education medicaid provider guide.

(9) Meet documentation requirements in WAC 182-537-0700.

[Statutory Authority: RCW 41.05.021, 34 C.F.R. 300.154(d), and chapter 182-502 WAC. WSR 13-21-079, § 182-537-0600, filed 10/17/13, effective 11/17/13. Statutory Authority: RCW 41.05.021. WSR 13-05-017, § 182-537-0600, filed 2/7/13, effective 3/10/13. WSR 11-14-075, recodified as § 182-537-0600, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, and 42 C.F.R. 440.110. WSR 09-07-004, § 388-537-0600, filed 3/4/09, effective 4/4/09.]

WAC 182-537-0700 School-based health care services for children in special education—School district documentation requirements. (1) For the purposes of this chapter, providers must document all health care related services as specified in the medicaid agency's current, published

school-based health care services for children in special education medicaid provider guide. Assistants, as defined in WAC 182-537-0350, who provide health care related services must have their supervisor cosign any documentation in accordance with the supervisory requirements for the provider type.

(2) Health care related documentation must include, at a minimum:

- (a) Professional assessment reports;
- (b) Evaluation and reevaluation reports;
- (c) Individualized education program (IEP); and
- (d) Treatment notes for each date of service the provider billed the agency.

Treatment notes must include the following information:

- (i) Activity and intervention involved;
- (ii) Child's name;
- (iii) Child's ProviderOne client ID;
- (iv) Date of birth;
- (v) Date of service, actual time-in and time-out, and the number of billed units for the service;
- (vi) Indication if the treatment note was for individual or group therapy; and
- (vii) Original signature of the licensed provider, title, and National provider identifier (NPI) number.

(3) As described in WAC 182-502-0020, all records must be legible and easily and readily available to the agency upon request.

[Statutory Authority: RCW 41.05.021, WSR 13-05-017, § 182-537-0700, filed 2/7/13, effective 3/10/13. WSR 11-14-075, recodified as § 182-537-0700, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, and 42 C.F.R. 440.110. WSR 09-07-004, § 388-537-0700, filed 3/4/09, effective 4/4/09.]

WAC 182-537-0800 School-based health care services for children in special education—Program monitoring/audits. (1) School districts must participate in all monitoring and auditing activities.

(2) School districts are responsible for the accuracy, compliance, truthfulness, and completeness of all claims submitted for medicaid reimbursement.

(3) The medicaid agency conducts monitoring activities annually according to chapter 182-502A WAC. The agency conducts a minimum of ten school-based medicaid program reviews annually. During this time frame, the agency:

- (a) Completes a minimum of five record reviews as a desk review;
- (b) Conducts a minimum of five record reviews on-site; and
- (c) Bases the monitoring and auditing activities on usage and payment data from the previous school year.

(4) The agency conducts audits and recovers any overpayments if a school district is found not in compliance with agency requirements according to RCW 74.09.200, 74.09.-220 and 74.09.290, which concern audits and investigations of providers.

(5) On or before October 31st of each year, school districts must submit to the school-based health care services program manager the following information:

- (a) A provider update Form 12-325, to include all new health care professionals; and

(b) Copies of all new health care professionals' licenses issued by the Washington state department of health (DOH), and verification of the National provider identifier (NPI) number.

[Statutory Authority: RCW 41.05.021, WSR 13-05-017, § 182-537-0800, filed 2/7/13, effective 3/10/13. WSR 11-14-075, recodified as § 182-537-0800, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.500, and 42 C.F.R. 440.110. WSR 09-07-004, § 388-537-0800, filed 3/4/09, effective 4/4/09.]