#### CERTIFICATION OF ENROLLMENT

#### SUBSTITUTE SENATE BILL 5727

Chapter 149, Laws of 1993

53rd Legislature 1993 Regular Session

# SPECIAL EDUCATION PROGRAMS--BILLING OF INSURERS FOR MEDICAL SERVICES PROVIDED AUTHORIZED

EFFECTIVE DATE: 4/30/93 - Except Section 11 which becomes effective on 9/1/93

Passed by the Senate April 14, 1993 YEAS 48 NAYS 0

### JOEL PRITCHARD

#### President of the Senate

Passed by the House April 18, 1993 YEAS 84 NAYS 10

#### CERTIFICATE

I, Marty Brown, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **SUBSTITUTE SENATE BILL 5727** as passed by the Senate and the House of Representatives on the dates hereon set forth.

#### BRIAN EBERSOLE

## Speaker of the House of Representatives

Approved April 30, 1993

MARTY BROWN

Secretary

FILED

April 30, 1993 - 10:23 a.m.

MIKE LOWRY

Governor of the State of Washington

Secretary of State State of Washington

#### SUBSTITUTE SENATE BILL 5727

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Passed Legislature - 1993 Regular Session

State of Washington 53rd Legislature 1993 Regular Session

By Senate Committee on Ways & Means (originally sponsored by Senator Rinehart; by request of Office of Financial Management)

Read first time 03/22/93.

- AN ACT Relating to health services provided by school districts;
- 2 amending RCW 28A.150.390 and 74.09.520; adding a new section to chapter
- 3 28A.155 RCW; adding new sections to chapter 74.09 RCW; creating new
- 4 sections; repealing RCW 74.09.524; providing an effective date; and
- 5 declaring an emergency.
- 6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 7 NEW SECTION. Sec. 1. The legislature finds that there is
- 8 increasing demand for medical services provided through the state's
- 9 special education programs and that many of these services qualify for
- 10 federal financial participation under Title XIX of the federal social
- 11 security act. The legislature further finds that these services may be
- 12 covered under private insurance policies. The legislature intends to
- 13 establish a state-wide system of billing medicaid and private insurers
- 14 for eligible medical services provided through special education
- 15 programs, in order that federal funding of medical services in special
- 16 education programs will be maximized and that additional revenue be
- 17 made available for education programs. It is the further intent of the
- 18 legislature that the program be administered by a public or private
- 19 agency in such a fashion as to ensure that the additional

- 1 administrative workloads for the districts and the health practitioners
- 2 in the schools are kept to a minimum.
- 3 <u>NEW SECTION.</u> **Sec. 2.** For the purposes of sections 1 through 8 of
- 4 this act, the terms "medical assistance" and "medicaid" mean medical
- 5 care provided under Title XIX of the federal social security act.
- 6 <u>NEW SECTION.</u> **Sec. 3.** The superintendent of public instruction
- 7 shall take necessary steps to establish a competitive bidding process
- 8 for a contract to act as the state's billing agent for medical services
- 9 provided through its special education programs. The process must be
- 10 open to private firms and public entities.
- 11 <u>NEW SECTION.</u> **Sec. 4.** (1) Chapter ..., Laws of 1993 (this act)
- 12 does not apply to contracts between individual school districts and
- 13 private firms entered in to for the purpose of billing either medicaid
- 14 or private insurers, or both, for health services and agreed to before
- 15 the effective date of this act, except as provided in section 8(2) of
- 16 this act.
- 17 (2) A school district may elect to act as its own billing agent as
- 18 of the start of any school year. For a school district being served by
- 19 the state-wide billing agent, the district shall notify the billing
- 20 agent in writing, no less than thirty days before the start of the
- 21 school year, of its intent to terminate the agency relationship. A
- 22 district that acts as its own billing agent may retain ar
- 23 administrative fee proportional to that of the state-wide billing
- 24 agent.
- 25 <u>NEW SECTION.</u> **Sec. 5.** (1) The agency awarded the contract under
- 26 section 3 of this act shall:
- 27 (a) Enroll all school districts in this state, except those with
- 28 preexisting contracts under section 4 of this act, as medicaid
- 29 providers by the beginning of the 1993-94 school year;
- 30 (b) Develop a state-wide system of billing the department and
- 31 private insurers for medical services provided in special education
- 32 programs;
- 33 (c) Train health care practitioners employed by or contracting with
- 34 school districts in medicaid and insurer billing;

- 1 (d) Verify the medicaid eligibility of students enrolled in special 2 education programs in each educational service district;
- 3 (e) Provide ongoing technical assistance to practitioners and 4 districts; and
- 5 (f) Process and forward all medicaid claims to the department and 6 all other claims to private insurers.
- 7 (2) For each student, individual school districts may, 8 consultation with the billing agent, deliver to the student's parent or 9 guardian a letter, prepared by the billing agent, requesting the 10 consent of the parent or guardian to bill the student's health insurance carrier for services provided through the special education 11 If a district chooses to do this, the letter must be 12 accompanied by a consent form, on which the parent may identify the 13 student's health insurance carrier so that the billing agent may bill 14 15 the carrier for medical services provided to the student. The letter must clearly state the following: 16
- 17 (a) That the billing program is designed in part to raise 18 additional funds to improve education services;
- 19 (b) That under no circumstances will the parent or guardian be 20 personally charged for any portion of the bill not paid by the insurer, 21 including copayments, deductibles, or uncovered services;
- (c) That the amount of the billing will apply to the policy's annual deductible even though the parent will not be billed for the amount of the deductible;
- 25 (d) That the amount of the billing, will, however, apply towards 26 annual or lifetime benefit caps if these are included in the policy;
- (e) That it is possible that their premiums would be increased as a result of their consent;
- (f) That if any of the possible negative consequences of consent were to affect them, they are free to withdraw their consent at any time; and
- 32 (g) That their consent is entirely voluntary and that the services 33 the student receives through the school will not be affected by their 34 willingness or refusal to consent to the billing of their private 35 insurer.
- NEW SECTION. Sec. 6. The medical assistance administration in the department of social and health services shall establish categories of

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- 1 medical services and a reimbursement system based on the costs of 2 providing medical services provided in special education programs.
- NEW SECTION. Sec. 7. (1) Each educational service district in the state shall participate in the program of billing for medical services under section 5 of this act and shall provide the billing agent with a list, at the start of each academic quarter, of all students enrolled in special education programs within the area served by the educational service district, for purposes of verifying the medicaid eligibility of the students.
- (2) A person employed by or contracting with a school district who provides services within the categories established by the medical assistance administration under section 6 of this act shall provide the billing agent with information necessary to promptly complete monthly billings for each medicaid-eligible student he or she serves.
- 15 (3) The superintendent of public instruction shall submit to the legislature at the beginning of each legislative session a report 16 indicating the district-by-district participation and the medicaid and 17 18 private insurance payment receipts during the preceding fiscal year. The report must further indicate for each district the total number of 19 special education students, and the medicaid eligibility rate, as 20 21 determined by the medical assistance administration. 22 superintendent may require a letter of explanation from any district 23 receipts under the program, in the judgment the 24 superintendent, indicate nonparticipation or underparticipation.
- NEW SECTION. Sec. 8. A new section is added to chapter 28A.155 26 RCW to read as follows:
- 27 (1) Of the projected federal and private insurance revenue 28 collected under section 5 of this act, the following incentive 29 payments, calculated after deduction of the agent's fees, shall remain with the school districts: Twenty percent of the federal portion of 30 31 medicaid payments; and twenty percent of payments made by private 32 insurers. The billing agent shall periodically provide the office of 33 the superintendent of public instruction and each educational service district with a report showing for each individual school district the 34 35 total amount of federal funds, less the billing agent's fee, realized through medicaid billing and the total amount, less the billing agent's 36 37 realized through the billing of private insurers.

- superintendent shall use the report to reduce allocations to the districts by eighty percent of the total amount of medicaid and private insurance payments received by each district, calculated after deduction of the billing agent's fee.
- (2) A firm that is a party to a preexisting contract under section 4(1) of this act shall, at times designated by the superintendent of public instruction, provide the office of the superintendent of public instruction and the appropriate educational service district with a report indicating the total amount of federal money and private insurance money, less the contractor's fee, earned by each district through billing for health services. The superintendent shall reduce allocations to the districts by eighty percent of the total amount of medicaid and private insurance payments received by each district, calculated after deduction of the contractor's fee.

- (3) A school district that has elected to act as its own billing agent under section 4(2) of this act shall, at times designated by the superintendent of public instruction, provide the office of the superintendent of public instruction and the appropriate educational service district with a report indicating the total amount of federal money and private insurance money received by the district. The superintendent shall reduce allocations to the district by eighty percent of the total amount of medicaid and private insurance payments received by the district, calculated after deduction of administrative fees retained by the district.
- 25 (4) For the purposes of this section, "medicaid" means medical care 26 provided under Title XIX of the federal social security act.
- **Sec. 9.** RCW 28A.150.390 and 1990 c 33 s 116 are each amended to 28 read as follows:

The superintendent of public instruction shall submit to each regular session of the legislature during an odd-numbered year a programmed budget request for handicapped programs. Funding for programs operated by local school districts shall be on an excess cost basis from appropriations provided by the legislature for handicapped programs and shall take account of state funds accruing through RCW 28A.150.250, 28A.150.260, federal medical assistance and private funds accruing under section 5 of this act, and other state and local funds, excluding special excess levies. ((Funding for local district programs may include payments from state and federal funds for medical

- 1 assistance provided under RCW 74.09.500 through 74.09.910.)) However,
- 2 the superintendent of public instruction shall reimburse the department
- 3 of social and health services from state appropriations for handicapped
- 4 education programs for the state-funded portion of any medical
- 5 assistance payment made by the department for services provided under
- 6 an individualized education program established pursuant to RCW
- 7 28A.155.010 through 28A.155.100. The amount of such interagency
- 8 reimbursement shall be deducted by the superintendent of public
- 9 instruction in determining additional allocations to districts for
- 10 handicapped education programs under this section.
- 11 **Sec. 10.** RCW 74.09.520 and 1991 sp.s. c 8 s 9 are each amended to 12 read as follows:
- 13 (1) The term "medical assistance" may include the following care 14 and services: (a) Inpatient hospital services; (b) outpatient hospital 15 services; (c) other laboratory and x-ray services; (d) nursing facility 16 services; (e) physicians' services, which shall include prescribed medication and instruction on birth control devices; (f) medical care, 17 18 or any other type of remedial care as may be established by the 19 secretary; (g) home health care services; (h) private duty nursing services; (i) dental services; (j) physical and occupational therapy 20 and related services; (k) prescribed drugs, dentures, and prosthetic 21 22 devices; and eyeglasses prescribed by a physician skilled in diseases 23 of the eye or by an optometrist, whichever the individual may select; 24 (1) personal care services, as provided in this section; (m) hospice 25 services; (n) other diagnostic, screening, preventive, rehabilitative services; and (o) like services when furnished to a 26 ((handicapped)) child by a school district ((as part of an 27 individualized education program established pursuant to RCW 28 29 28A.155.010 through 28A.155.100)) in a manner consistent with the 30 requirements of this chapter. For the purposes of this section, the department may not cut off any prescription medications, oxygen 31 supplies, respiratory services, or other life-sustaining medical 32 33 services or supplies.
- "Medical assistance," notwithstanding any other provision of law, shall not include routine foot care, or dental services delivered by any health care provider, that are not mandated by Title XIX of the social security act unless there is a specific appropriation for these services. ((Services included in an individualized education program

- for a handicapped child under RCW 28A.155.010 through 28A.155.100 shall not qualify as medical assistance prior to the implementation of the funding process developed under RCW 74.09.524.))
- 4 (2) The department shall amend the state plan for medical assistance under Title XIX of the federal social security act to include personal care services, as defined in 42 C.F.R. 440.170(f), in the categorically needy program.
- 8 (3) The department shall adopt, amend, or rescind such 9 administrative rules as are necessary to ensure that Title XIX personal 10 care services are provided to eligible persons in conformance with 11 federal regulations.
- 12 (a) These administrative rules shall include financial eligibility 13 indexed according to the requirements of the social security act 14 providing for medicaid eligibility.
- 15 (b) The rules shall require clients be assessed as having a medical 16 condition requiring assistance with personal care tasks. Plans of care 17 must be approved by a physician and reviewed by a nurse every ninety 18 days.

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- (4) The department shall design and implement a means to assess the level of functional disability of persons eligible for personal care services under this section. The personal care services benefit shall be provided to the extent funding is available according to the assessed level of functional disability. Any reductions in services made necessary for funding reasons should be accomplished in a manner that assures that priority for maintaining services is given to persons with the greatest need as determined by the assessment of functional disability.
- 28 (5) The department shall report to the appropriate fiscal 29 committees of the legislature on the utilization and associated costs 30 of the personal care option under Title XIX of the federal social 31 security act, as defined in 42 C.F.R. 440.170(f), in the categorically 32 needy program. This report shall be submitted by January 1, 1990, and 33 submitted on a yearly basis thereafter.
- 34 (6) Effective July 1, 1989, the department shall offer hospice 35 services in accordance with available funds. The hospice benefit under 36 this section shall terminate on June 30, 1993, unless extended by the 37 legislature.

- 1 <u>NEW SECTION.</u> **Sec. 11.** RCW 74.09.524 and 1990 c 33 s 595 & 1989 c
- 2 400 s 4 are each repealed.
- 3 <u>NEW SECTION.</u> **Sec. 12.** If any part of this act is found to be in
- 4 conflict with federal requirements that are a prescribed condition to
- 5 the allocation of federal funds to the state, the conflicting part of
- 6 this act is inoperative solely to the extent of the conflict and with
- 7 respect to the agencies directly affected, and this finding does not
- 8 affect the operation of the remainder of this act in its application to
- 9 the agencies concerned. The rules under this act shall meet federal
- 10 requirements that are a necessary condition to the receipt of federal
- 11 funds by the state.
- 12 <u>NEW SECTION.</u> **Sec. 13.** If any provision of this act or its
- 13 application to any person or circumstance is held invalid, the
- 14 remainder of the act or the application of the provision to other
- 15 persons or circumstances is not affected.
- 16 <u>NEW SECTION.</u> **Sec. 14.** Sections 2 through 7 of this act are each
- 17 added to chapter 74.09 RCW.
- 18 <u>NEW SECTION.</u> **Sec. 15.** (1) Sections 1 through 10 and 12 through 14
- 19 of this act are necessary for the immediate preservation of the public
- 20 peace, health, or safety, or support of the state government and its
- 21 existing public institutions, and shall take effect immediately.
- 22 (2) Section 11 of this act takes effect September 1, 1993.

Passed the Senate April 14, 1993.

Passed the House April 18, 1993.

Approved by the Governor April 30, 1993.

Filed in Office of Secretary of State April 30, 1993.