

SCHOOL-BASED TRAINING KEYNOTES

Is there a specific document for the annual parent consent?

Refer to OK State Department of Education (OSDE), we follow their requirements.

Per policy OAC 317:30-5-1020 (c)(1) Documentation establishing sufficient notification to a member's parents and receipt of adequate, written consent from them, prior to accessing a member's or parent's public benefits or insurance for the first time, and annually thereafter, in accordance with 34 C.F.R. ' 300.154.

How do we sign each progress note? I document daily sessions through EdPlan's Easytrac. It does not show the child's DOB or my signature on the document. Do I need to print these daily session notes and handwrite it on these documents? Where do I document in my progress note the other students in a group therapy session if I am not billing on all students in the group?

For integrity and quality of adequate documentation, it is always best practice to update the record quickly after a session. This can be done via EdPlan's EasyTrac or you may upload your notes to EdPlan. It doesn't matter if the note is electronic or on paper as long as the documentation is signed, dated, and credentialed by the rendering practitioner. You may document the group attendance via EasyTrac or upload to EdPlan. For non-Medicaid group members please do not Include any HIPAA information. The student's Initials may be documented.

Per policy OAC 317-3-15.. records must contain adequate documentation of services rendered. Documentation must include the dated provider's signature and credentials. The provider's signature must be handwritten or electronically submitted if the provider and the Oklahoma Health Care Authority have agreed to conduct transactions by electronic means pursuant to the Uniform Electronic Act. Electronic records and electronic signatures must be in accordance with guidelines found at OAC 317:30-3-4.1...

O.A.C. 317:30-3-4.1(1)(E): The authentication of an electronic medical record (signature and date entry) is expected on the day the record is completed. If the electronic medical record is transcribed by someone other than the provider, the signature of the rendering provider and date entry is expected within three (3) business days from the day the record is completed. Before any claim is submitted to OHCA for payment



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of a provided service. The provider must authenticate the electronic medical records relating to that service.

Our district is new to Medicaid billing. We have always addressed services in the school as educationally relevant due to being a school-based service. Could we get more guidance on what services are deemed as medically necessary and how we determine if a service such as speech therapy is medically necessary. The documentation that gives a student a medical diagnosis needs to be attached to the IEP or just downloaded into Edplan?

Qualified school providers must ensure that adequate documentation is maintained within the OSDE online IEP system in order to substantiate all school-based services billed to SoonerCare are medically necessary and comply with applicable state and federal Medicaid law. IEP services billed to Medicaid must be medical in nature for the benefit of the member to succeed in an education setting. The medical diagnosis will be determined in the annual evaluation located in or attached to the IEP and substantiated in the IEP meeting by the involved providers and also documented in the progress notes of the session.

Medical necessity policy OAC 317: 30-1(f) services, provided within the scope of the Oklahoma Medicaid program, shall meet medical necessity criteria. Requests by qualified providers for services in and of itself shall not constitute medical necessity. Medical necessity is established through consideration of the following standards:

(1) Services must be medical in nature and must be consistent with accepted health care practice standards and guidelines for the prevention, diagnosis or treatment of symptoms of illness, disease or disability;

(2) Documentation submitted in order to request services or substantiate previously provided services must demonstrate through adequate objective medical records and other supporting records, evidence sufficient to justify the member's need for the service;

(3) Treatment of the member's condition, disease or injury must be based on reasonable and predictable health outcomes;

(4) Services must be necessary to alleviate a medical condition and must be required for reasons other than convenience for the member, family or medical provider;

(5) Services must be delivered in the most cost-effective manner and most appropriate setting; and





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(6) Services must be appropriate for the member's age and health status and developed for the member to achieve, maintain or promote functional capacity.

For students who receive Medicaid services privately, if the school bills Medicaid, will they still be able to receive their private therapy?

Absolutely, school-based services pursuant to an Individual Education Program (IEP) does not count against services being rendered as an outpatient service. We advise that school-based providers and outpatient providers coordinate with each other for the benefit of the member.

What is the best way for a school to get started? NPI number? Process to upload new/additional staff using Appendix A?

All schools and rendering providers must be OHCA contracted to request medically necessary IEP service reimbursement from Medicaid. Before contracting with OHCA, please be sure to have a national provider Identification (NPI), https://nppes.cms.hhs.gov. Then visit our OHCA provider enrollment page to begin a new contract or renewal. https://oklahoma.gov/ohca/providers/providerenrollment.html. If you have additional questions on the enrollment process, including updating the appendix A to the contact, please call 800-522-0114 option 5.

Disclaimer: This document serves as reference to questions asked during a training provided on November 10, 2021. This does not replace Oklahoma HealthCare Authority school-based policy found at OAC 317:30-5-1020-1027

https://oklahoma.gov/ohca/policies-and-rules/xpolicy/medical-providers-fee-forservice/individual-providers-and-specialties/qualified-schools-as-providers-of-healthrelated-services.html





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