School-Based Health Services Medicaid Policy Manual

# Nursing Services MODULE 2











### **Administrative Requirements**



#### **BACKGROUND**

- School-Based Health Services are regulated by the Centers of Medicaid and Medicare Services (CMS) and administered by the West Virginia Department of Health and Human Resources (WVDHHR) through the Bureau for Medical services (BMS).
- Local Education Agencies (LEAs) enroll with Medicaid to be a provider. In doing so, LEAs must conform to state and federal rules and confidentiality requirements.
- LEAs must cooperate fully with the Bureau for Children and Families (BCF) and the court systems.

## Administrative Requirements (continued)



- All Medicaid members (students with Medicaid cards) and/or their parents or guardians have the right to freedom of choice when choosing a provider for treatment.
- All Medicaid providers should coordinate care if a member has different Medicaid services at different sites.
- Appropriate releases of information should be and in compliance with the Health Insurance Portability and Accountability Act (HIPAA) and Family Educational Rights and Privacy Act (FERPA).

## Administrative Requirements (continued)



#### MEMBER ELIGIBILITY

School-Based Health Services include medically necessary covered health care services pursuant to an Individual Education Plan (IEP) provided by or through the West Virginia Department of Education (DOE) or a Local Education Agency (LEA).

### **Medical Necessity**



#### **SERVICES AND SUPPLIES THAT ARE:**

- Appropriate and necessary for the symptoms, diagnosis or treatment of an illness.
- Provided for the diagnosis or direct care of an illness.
- Within the standards of good practice.
- Not primarily for the convenience of the plan member or provider.
- The most appropriate level of care that can be safely provided.

### Medical Necessity (continued)



Must be demonstrated throughout the provision of services. For these types of services, the following five factors will be included as part of this determination:

- Diagnosis (as determined by a physician or licensed psychologist)
- Level of functioning
- Evidence of clinical stability
- Available support system
- Service is the appropriate level of care

### Rounding Units of Service



- Services covered by Medicaid are, by definition, either based on the time spent providing the service or episodic. Units of service based on an episode or event cannot be rounded.
- Many services are described as being "planned," "structured," or "scheduled." If a service is planned, structured, or scheduled, this would assure that the service is billed in whole units; therefore, rounding is not appropriate.

The following services are eligible for rounding:

Services with 15 minute units.

In filing claims for Medicaid reimbursement for a service eligible for rounding, the amount of time documented in minutes must be totaled and divided by the number of minutes in a unit. The result of the division must be rounded to the nearest whole number in order to arrive at the number of billable units. After arriving at the number of billable units, the last date of service provision must be billed as the date of service. The billing period cannot overlap calendar months. Only whole units of service may be billed.

# Rounding Units of Service (continued)



Jan. 1	Jan. 2	Jan. 3	Correct Billing
5 min. – Nursing	5 min. – Nursing	5 min. – Nursing	Bill 15 minutes Nursing for January 3.
Jan. 1	Correct Billing		
15 min. – Nursing	Bill 15 minutes for Nursing for January 1		
Jan. 29	Jan. 30	Feb. 1	Correct Billing
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5 min. – Nursing	5 min. – Nursing	5 min. – Nursing	Cannot bill due to a new calendar month beginning
Jan. 1	Jan. 2	Jan. 3	Correct Billing
5 min. – Nursing	10 min. – Nursing	10 min. – Nursing	Bill 15 minutes for Nursing on January 3  Cannot round up to 30 minutes for Nursing
Jan.1	Jan. 2	Jan. 3	Correct Billing
5 min. – Nursing	Absent from school or no Medicaid Services provided	10 min. – Nursing	Bill 15 minutes for Nursing on January 3

### **Nursing Services**



#### **NURSING SERVICES**

- School-based nursing services are face-to-face skilled nursing services that enable Medicaid members to receive medical monitoring, interventions, and nursing services in their educational setting.
- The Health Care Plan = the Service Plan for Medicaid billing purposes no additional service plan is required for nursing services.



#### **DOCUMENTATION**

The WV Bureau for Medical Services recognizes that some providers use an electronic system to create and store documentation while other providers choose to use a hard copy based system. When services require documentation, the Bureau will accept both types of documentation. Electronic signatures are accepted when an electronic time stamp is included. Each service code in the BMS Provider Manual, Chapter 538 describes the required documentation. All requirements must be met no matter the modality of system choice. See BMS Provider Manual, Chapter 538, Appendix A for the Nursing form.



#### **Anaphylactic reactions-assessment/evaluation**

Procedure Code: T1001 SE

Service Unit: Event

Telehealth: Unavailable

Service Limits: Two per calendar year

**Staff credentials:** Must be performed by a registered nurse under the employment of a Local Education Agency (LEA), or a nurse under the supervision of a certified school nurse.

**Definition:** An assessment or evaluation used to develop a written emergency plan for students with a documented history of anaphylactic reaction or potential for anaphylaxis in conjunction with student, parent/guardian and principal; plan should include step-by-step instructions to follow and emergency phone numbers.

- Date of service
- Location of service
- Nurse's signature with credentials
- Medicaid member's Health Care Plan
- Appropriate recommendations consistent with the findings of the assessment/evaluation



#### **Anaphylactic Reaction –Individual**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials**: Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition**: In cases of known allergies, designated, trained personnel will give appropriate amount of medication ordered by the licensed prescriber.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Manual Resuscitator**

Procedure Code: 92950 Service Unit: Event

Telehealth: Unavailable

Service Limits: 10 per calendar year

**Staff Credentials**: Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition**: The use of a manual resuscitator in the school setting and during cocurricular events. Includes hyperventilation, oxygenation, ventilator failure with physician order.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Postural Drainage and Percussion**

Procedure Code: 1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Performing percussion and/or postural drainage in the school setting and during co-curricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Catheterization**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** The performance of cleaning and sterilization of intermittent catheterization in the school setting and during co-curricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate Recommendations consistent with the findings of the individual service



#### **Mechanical Ventilator**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Mechanical ventilation of the student in the school setting and during cocurricular events. Hands on management included.

- Date of service
- Location of Service
- Nurse's signature with credentials
- Documentation of Individual Service
- Appropriate Recommendations consistent with the findings of the individual service



#### **Seizure Management**

Procedure Code: T1001 SE

Service Unit: Event

Telehealth: Unavailable

Service Limits: Two per calendar year

**Staff Credentials**: Must be performed by a Registered Nurse under the employment of the West Virginia Department of Education.

**Definition**: Seizure management in the school setting and during co-curricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service
- Emergency health care plan



#### **Subcutaneous Insulin Infusion-by Pump**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials**: Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse

**Definition**: Administration of insulin by pump in the school setting and during cocurricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Measurement of Blood Sugar**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse

**Definition**: Measurement of student's blood glucose levels in the school setting and during co-curricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Emergency Medication Administration**

Procedure Code: T1000

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials**: Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Administration of emergency medication in the school setting and during cocurricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Oral Suctioning**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Oral suctioning and nasopharyngeal in the school setting and during cocurricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### Subcutaneous insulin infusion by injection

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition**: Administration of insulin by injection in the school setting and during cocurricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Enteral Feeding**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Administration of medication via a gastric tube in the school setting and during co-curricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Ostomy Care**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten- 15 minute units per instructional day

**Staff Credentials**: Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Management of emptying or changing an ostomy system in the school setting and during co-curricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Tracheostomy Care**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Emergency care and cleaning of a tracheostomy tube and stoma in the school setting and during co-curricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Oxygen Administration**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials**: Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition**: Administration and safe use of oxygen in the school setting and during cocurricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Inhalation Therapy**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials**: Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Administration of inhalation therapy by machine in the school setting and during co-curricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### **Peak Flow Meter**

Procedure Code: T1000 SE

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Use of a peak flow meter in the school setting and during co-curricular events.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service



#### Long term medication

Procedure Code: T1000 se

Service Unit: 15 minute unit

Telehealth: Unavailable

Service Limits: Ten-15 minute units per instructional day

**Staff Credentials:** Must be performed by a Registered Nurse under the employment of a LEA or a nurse under the supervision of a certified school nurse.

**Definition:** Long term medication administration.

- Date of service
- Location of service
- Nurse's signature with credentials
- Documentation of individual service
- Appropriate recommendations consistent with the findings of the individual service

### **Covered School-Based Services**



#### **DOCUMENTATION**

- Original Documentation must be maintained at the Local Education Agency (LEA) Board of Education central office. This includes billing forms, progress notes and evaluations. The LEA may keep an electronic version of such documentation.
- Providers may keep copies of the documentation for their use.
- Do not keep Medicaid member records in your car or home.
- For further information regarding documentation requirements, refer to the Administration Services Training Module 1.

#### School-Based Health Services Contacts



#### **MEDICAID PARTNERS:**

**West Virginia Department of Education** 

**Office of Federal Programs:** 

Contact: Terry Riley 304-558-1956

Tjriley@k12.wv.us

#### **Bureau of Medical Services (BMS):**

http://www.dhhr.wv.gov/bms/Programs/Pages/default.aspx

**Home and Community Based Services Unit** 

**School Based Health Services** 

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