

PROVIDER BULLETIN

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OCCUPATIONAL, PHYSICAL AND SPEECH THERAPY **SCHOOL BASED SERVICES**

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EXPANDED SCHOOL BASED SERVICES

Effective with dates of service on or after August 1, 2010, the MO HealthNet Division (MHD) will expand the services included in the school based services program for public schools. This program expansion will allow for the school district to receive the federal match portion of the funds allocated for certain medical services. Only the services identified in the Individualized Education Plan (IEP) and up to the amount and duration identified in the IEP will be considered reimbursable. For information on the services in the expansion, refer to the School Based Services Bulletin, Volume 33, Number 7 dated August 24, 2010.

COVERED SERVICES

Physical and occupational therapy services include evaluation, treatment, and evaluation/fitting of appropriate equipment such as wheelchairs. Physical and occupational therapy services must be prescribed by a MO HealthNet-enrolled primary care provider. The prescription must include the primary care provider's MO HealthNet provider number.

Speech/language therapy includes evaluations and therapy treatment services. Speech/language therapy services require a referral by a MO HealthNet-enrolled primary care provider. A referral must be provided in written format and signed by the provider. The referral must include the primary care provider's National Provider Identifier (NPI). Letters or prescriptions signed by the primary care provider are examples of acceptable written referral for speech/language services.

The therapy procedure codes identified in Attachment A are covered under the MO HealthNet Therapy program for school districts when identified in a child's IEP.

ELIGIBILITY

The child receiving school based therapy services must be eligible for MO HealthNet coverage for each date a service is rendered for reimbursement to be made. The child must be under the age of 21 years. All services rendered to a child must be billed under the child's individual MO HealthNet identification number.

MO HEALTHNET MANAGED CARE ENROLLEES

Children enrolled in a MO HealthNet managed care health plan receive school based services that are identified in an IEP on a fee-for-service basis outside of the MO HealthNet managed care benefit package.

PLAN OF CARE

Services are considered school based when they are included in an IEP as defined by the Individuals with Disabilities Education Act, Part B (34 CFR 300 and 301). In addition to the IEP, a plan of care must be developed and signed by the MO HealthNet enrolled therapy provider for a child receiving school based therapy services. Services must be provided as indicated in the IEP and plan of care. A child's plan of care must be evaluated at regular intervals.

The plan of care must specify:

- the diagnosis;
- the desired outcome;
- the nature of the treatment;
- the frequency of treatment (number of minutes per day/per week/per month); and
- the duration (weeks or months) of services.

The child or his/her family may not be charged for development of the plan of care. MO HealthNet does not reimburse the school district or therapy providers to participate in IEP meetings or when developing a plan of care for a child.

A provider-signed plan of care must be maintained at the facility where services are performed and must be made available for audit purposes at anytime. The MO HealthNet Division does not dictate a standardized plan of care.

SCHOOL BASED THERAPY PROVIDER PARTICIPATION REQUIREMENTS

To participate in the MO HealthNet school based therapy services program, the billing provider of the services must be a recognized public school district in the State of Missouri. These services are billed by and reimbursement is made only to the school district. The arrangements made by the school district with the actual therapy providers are between the school district and the provider. An individual MO HealthNet enrolled occupational, physical or speech therapy provider cannot bill directly for MO HealthNet school based therapy services.

The occupational, physical and speech therapy services are limited to those performing providers who meet the licensing requirements of the therapy program as defined below:

- Physical Therapist—a person currently licensed by the State of Missouri as a physical therapist.
- Occupational Therapist—a person currently licensed by the State of Missouri as an occupational therapist.
- Speech Pathologist—a person currently licensed by the State of Missouri as a speech pathologist.
- Speech/language therapist providing services as an employee of a public school—a person certified by the state Department of Elementary and Secondary Education.

REIMBURSEMENT

Reimbursement for school based therapy services is made on a fee-for-service basis. The MO HealthNet maximum allowable fee for a unit of service has been determined by the MO HealthNet Division to be a reasonable fee, consistent with efficiency, economy, and quality of care. MO HealthNet payment for covered services is the lower of the provider's actual billed charge or the MO HealthNet maximum allowable amount. Services provided as documented in an IEP are reimbursed at the Federal Financial Participation Rate (FFP). The remainder of the allowed amount is the responsibility of the school district originating the IEP. The MO HealthNet maximum allowable fee for each code can be found on the Internet at <http://www.dss.mo.gov/mhd/providers/pages/cptagree.htm>.

All services included in the school based therapy services program must be billed by the school district. The school district will be considered the billing provider. The occupational, physical, or speech therapy provider delivering the school based therapy service is considered the performing provider and must be enrolled with MO HealthNet. The school district must bill the actual cost of providing the service.

The school district and the therapy provider must maintain a copy of the official public school generated IEP and the plan of care in the child's record to document the service as an IEP service.

When billing therapy services that are identified in an official IEP, providers are required to bill the current 5-digit procedure codes listed on Attachment A with a **TM** modifier.

PROVIDER ENROLLMENT

Each school district interested in billing MO HealthNet for school based services must enroll as a MO HealthNet provider. Each individual occupational, physical, or speech therapist that provides therapy services for a school district **MUST** also individually enroll with MO HealthNet. For all enrollment information, go to <http://peu.momed.com/momed/presentation/commongui/PeHome.jsp>.

For those school districts currently enrolled for therapy services who wish to expand to include other school based services, you must contact Provider Enrollment to request each service be added to your file. This request can be e-mailed to providerenrollment@dss.mo.gov or mailed to the MO HealthNet Division, Attn: Provider Enrollment, PO Box 6500, Jefferson City, MO 65102, or faxed to 573-526-2054.

School districts currently enrolled for therapy services who do not wish to bill for the expanded services will require no further action. Any services billed for dates of service prior to August 1, 2010 will be required to be billed under an atypical NPI which has been assigned to your school district. The superintendent of the school district will be receiving a letter from MO HealthNet which specifies which provider identifier to use for billing services before and after August 1, 2010.

If the school district is not actively enrolled with MO HealthNet to provide school based therapy services, a provider application must be completed on-line at the MHD website, www.dss.mo.gov/mhd, for any or all of the expanded services. Enrollment applications are not available on paper. Use the following instructions to complete the application:

- On the MHD website under Providers, select 'Provider Enrollment Application'. Follow the instructions carefully.
- After reading the first page, select 'Continue' at the bottom of the page. Select 'NEW Provider Enrollment Application' from the next page.
- All enrollment applications are available on-line. Choose the "School Based/School District Services" from the list and select 'Next'.
- Complete the application and follow the instructions for submitting.

Any individual therapy provider who does not wish to be published as available to all MO HealthNet participants can request to be excluded from the provider list by indicating their preference in the cover letter submitted with their enrollment application.

Information provided on the enrollment application must agree with the information on file with the Department of Elementary and Secondary Education. All applications are processed by date of receipt. The validation of the participation agreement depends upon the Division's acceptance of an application for enrollment.

NOTIFICATION OF PROVIDER CHANGES

The Provider Enrollment Unit must be notified in writing of any changes in provider records. The notification must include the National Provider Identifier (NPI) and the requested changes.

A provider must promptly notify the Provider Enrollment Unit when the following occurs:

- Change of provider address or "pay to" address, if different. Indication of change of address on a claim form is not sufficient.
- Change of school district name or telephone number.

ADEQUATE DOCUMENTATION

All services provided must be adequately documented in the medical record. The Code of State Regulations, 13 CSR 70-3.030, Section (2) (A) defines "adequate documentation" and "adequate medical records" at <http://www.sos.mo.gov/adrules/csr/current/13csr/13c70-3.pdf>.

MO HealthNet providers must retain for five (5) years from the date of service, fiscal and medical records that coincide with and fully document services billed to MO HealthNet, and must furnish or make the records available for inspection or audit by the Department of Social Services or its representative upon request. Failure to furnish, reveal and retain adequate documentation for services billed to the MO HealthNet Division may result in recovery of the payments for those services not adequately documented and may result in sanctions to the provider's participation in the MO HealthNet Program. This policy continues to apply in the event of the provider's discontinuance as an actively participating MO HealthNet provider through change of ownership or any other circumstance.

PARTICIPANT NON-LIABILITY

MO HealthNet covered services rendered to an eligible participant are not billable to the participant if MO HealthNet would have paid had the provider followed the proper policies and procedures for obtaining payment through the MO HealthNet Program as set forth in 13 CSR 70-4.030. For services documented in an Individualized Education Plan (IEP), the state share is the responsibility of the school district originating the IEP and cannot be billed to the participant.

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at <http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One for the red or white card.

**Provider Communications Hotline
573-751-2896**

Attachment A

SCHOOL BASED THERAPY PROCEDURE CODES

The following procedure code/modifier combinations are allowable codes for the school based therapy services program and must be utilized within the therapy provider's scope of practice and licensure limits.

<u>SPEECH PATHOLOGIST</u>	
Procedure Code	Description
92506TM	EVALUATION OF SPEECH LANGUAGE VOICE COMMUNICATION AUDITORY PROCESSING &/OR AURAL
92507TM	TREATMENT OF SPEECH LANGUAGE VOICE COMMUNICATION &/OR AUDITORY PROCESSING DISORDER (INCLUDING AURAL REHAB)
S9152TM	SPEECH THERAPY RE-EVALUATION
92508TM	TREATMENT OF SPEECH LANGUAGE VOICE COMMUNICATION &/OR AUDITORY PROCESSING DISORDER, GROUP

<u>PHYSICAL THERAPY/OCCUPATIONAL THERAPY</u>	
Procedure Code	Description
97001TM	PHYSICAL THERAPY EVALUATION
97002TM	PHYSICAL THERAPY RE- EVALUATION
97003TM	OCCUPATIONAL THERAPY EVALUATION
97004TM	OCCUPATIONAL THERAPY RE- EVALUATION
97012TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; TRACTION MECHANICAL
97014TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ELECTRICAL STIMULATION (UNATTENDED)
97016TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; PARAFFIN BATH
97018TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; PARAFFIN BATH
97020TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; MICROWAVE
97022TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; WHIRLPOOL
97024TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; DIATHERMY
97026TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; INFRARED
97028TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS; ULTRAVIOLET
97032TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS (ONE-ON-ONE); ELECTRICAL STIMULATION (MANUAL)
97033TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS (ONE-ON-ONE); IONTOPHORESIS, EACH 15 MINUTES
97034TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS (ONE-ON-ONE); CONTRAST BATHS, EACH 15 MINUTES

97035TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS (ONE-ON-ONE); ULTRASOUND, EACH 15 MINUTES
97036TM	APPLICATION OF A MODALITY TO ONE OR MORE AREAS (ONE-ON-ONE); HUBBARD TANK, EACH 15 MINUTES
97110TM	THERAPEUTIC PROCEDURE, 1/MORE AREAS, EACH 15 MINUTES
97112TM	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; NEUROMUSCULAR REEDUCATION OF MOVEMENT
97113TM	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; AQUATIC THERAPY WITH THERAPEUTIC EXERCISE
97116TM	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; GAIT TRAINING (INCLUDES STAIR CLIMBING)
97124TM	THERAPEUTIC PROCEDURE, ONE OR MORE AREAS, EACH 15 MINUTES; MASSAGE, INCLUDING EFFLEURAGE, PETRIS
97140TM	MANUAL THERAPY TECHNIQUES (EG, MOBILIZATION/MANIPULATION, MANUAL LYMPHATIC DRAINAGE, MANUAL TRACT)
97504TM	ORTHOTICS FITTING AND TRAINING, UPPER AND/OR LOWER EXTREMITIES, EACH 15 MINUTES
97520TM	PROSTHETIC TRAINING, UPPER &/OR LOWER EXTREMITIES, EACH 15 MINUTES
97530TM	THERAPEUTIC ACTIVITIES, DIRECT (ONE-ON-ONE) PATIENT CONTACT BY PROVIDER (USE DYNAMIC ACTIVITIES)
97532TM	DEVELOPMENT OF COGNITIVE SKILLS TO IMPROVE ATTENTION, MEMORY, PROBLEM SOLVING, (INCL. COMP.TRAIN, IEP)
97533TM	SENSORY INTEGRATIVE TECHNIQUES TO ENHANCE SENSORY PROCESSING AND PROMOTE ADAPTIVE RESPONSES, IEP
97535TM	SELF CARE MANAGEMENT TRAINING
97542TM	WHEELCHAIR MANAGEMENT/PROPULSION TRAINING, EACH 15 MINUTES
97545TM	WORK HARDENING/CONDITIONING; INITIAL 2 HOURS
97546TM	WORK HARDENING/CONDITIONING; EACH ADDITIONAL HOUR LIST SEPARATELY IN ADDITION TO PRIMARY PROC
97750TM	PHYSICAL PERFORMANCE TEST/MEASUREMENT (EG MUSCULOSKELETAL, FUNCTIONAL CAPACITY),W...,IEP