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DIVISION OF MEDICAL SERVICES

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THERAPY/REHAB CENTER/OUTPATIENT HOSPITAL/HOME HEALTH
BULLETIN

Provider Bulletin News: Due to budget constraints, paper copies of bulletins will no longer be distributed by DMS. Bulletins are now available only at the DMS Website. http://www.dss.mo.gov/dms/pages/bulletins.htm Please note new website address.

Bulletins will remain on this site only until incorporated into the provider manuals as appropriate, then deleted.

Missouri Medicaid News: Missouri Medicaid providers may sign-up to receive automatic notifications of all bulletins and other official Missouri Medicaid communications via e-mail. Providers and other interested parties are urged to go to the DMS website to subscribe to the e-mail list.

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MC+ MANAGED CARE

The information contained in this bulletin applies to coverage by the MC+ fee-for-service and Medicaid fee-for-service programs. The MC+ fee-for-service and Medicaid fee-for-service programs also provide coverage for those services carved out of the MC+ Managed Care benefit for MC+ Managed Care enrollees. Questions regarding services included in the MC+ Managed Care benefit should be directed to the enrollee's MC+ Managed Care health plan. Please check the patient's eligibility status prior to delivering a service.

ENROLLMENT OPTIONS FOR IEP SERVICES

School districts now have two options to choose from in determining how IEP therapy services will be reimbursed by Medicaid. School districts must decide if they will enroll and be directly

reimbursed or not enroll and the individual provider performing the actual therapy service will be directly reimbursed by Medicaid for the therapy service.

Option A: Individual provider enrollment

Districts choosing not to enroll as a Medicaid provider for speech, occupational, and physical therapy services documented in an IEP may employ or contract with Medicaid enrolled therapy providers for the provision of services. If you have submitted a Medicaid enrollment application and do not want the application processed, contact Karri Thurman at <mailto:karrithurman@sbcglobal.net> and inform her of your decision.

If a district chooses not to enroll, the district may employ or contract with therapy providers. The therapist(s) must have their own provider number for each location of practice. As previously notified on June 30, 2003 (Therapy, Rehab Center, Augmentative Communication Team, Site, Home Health Bulletin: Vol. 25, No. 1), individual providers who had a "pay-to" of a school district have been inactivated as of August 14, 2003. However, Provider numbers for therapists designating a "pay-to" to an entity other than a school district, will remain active.

Therapists may apply for a Medicaid provider number, by completing the provider application at <http://peu.momed.com/momed/presentation/commongui/PeHome.jsp>.

If you have questions regarding enrollment, you may contact Provider Enrollment at <mailto:providerenrollment@mail.medicaid.state.mo.us>.

Option B: School district enrollment

School districts choosing to enroll as a Medicaid provider may bill Medicaid for speech, occupational, and physical therapy services documented in an IEP.

- 1) If you have not submitted a Medicaid enrollment application, you must contact Karri Thurman at the e-mail address above for the enrollment packet prior to March 31, 2004. Districts enrolling after March 31, 2004 must contact the Provider Enrollment Unit at <mailto:providerenrollment@mail.medicaid.state.mo.us>.
- 2) If you have submitted a Medicaid enrollment application, but have not received notification of your Medicaid provider number, you must contact Karri Thurman at the above e-mail address and request your district application be processed no later than March 31, 2004. Upon notification, the enrollment application for the school district will be processed. Applications will not be processed unless Ms. Thurman is notified.

School districts who choose to enroll as a Medicaid provider must require their therapist to complete and sign a Division of Medical Services questionnaire and agreement. School districts will be required to obtain, and maintain a copy of the therapist's current permanent license/certification and annual renewal of license/certification as stated in the therapy program manual. **This information must be maintained by the school district.**

THERAPY SERVICES INCLUDED IN AN IEP

The Division of Medical Services in cooperation with the Department of Elementary and Secondary Education has revised the billing procedures for physical, occupational, and speech therapy services provided as documented in a child's Individualized Education Plan (IEP). As of

April 1, 2004, the following provider types may bill IEP therapy services provided on or after August 15, 2003:

- School District
- Individual Therapist
- Rehabilitation Center
- Outpatient Hospital
- Home Health Agency.

All IEP services reimbursed by Missouri Medicaid, regardless of provider, will be reimbursed at the federal financial participation (FFP) rate. The FFP is calculated using the Medicaid allowed amount times the appropriate FFP percentage. The remaining Certified Public Expenditures (CPE) are the responsibility of the school district. The CPE must not be billed to the patient, but must be recovered from the school district originating the IEP therapy services. Services provided to students who are eligible for Medicaid under an eligibility category funded by state funds will not be reimbursed by Missouri Medicaid. The state only funded eligibility codes are: 02,08,09,52,59,64, and 65. The school district is responsible for service provided to students who have state only funded eligibility.

The procedure codes used for billing IEP services separated by provider type are as follows.

SCHOOL DISTRICT, INDEPENDENT THERAPIST, REHABILITATION CENTER, OUTPATIENT HOSPITAL IEP PROCEDURE CODES

92506	97004	97024	97036	97140	97535
92507	97012	97026	97039	97139	97542
92508	97014	97028	97110	97504	97545
97510	97016	97032	97112	97520	97546
97001	97018	97033	97113	97530	97750
97002	97020	97034	97116	97532	97799
97003	97022	97035	97124	97533	

HOME HEALTH AGENCY IEP PROCEDURE CODES

92506	97001	97003	G0151	G0152	G0153
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MODIFIERS

Physical, occupational, and speech therapy services documented in a child's IEP, must be billed with the appropriate modifier regardless of the provider billing for such services. IEP services provided by or for the school district originating the IEP must be billed with the TM modifier. IEP services provided by or for a school district outside the school district originating the IEP (i.e. private school) must be billed with the TR modifier.

HOT AND COLD PACKS

Hot or cold packs provided as a part of therapy or rehabilitation center services are not separately billable. Effective for dates of service April 1, 2004 and after, Missouri Medicaid will no longer reimburse for (CPT) Code 97010.

SCHOOL DISTRICT'S PARTICIPATING IN SDAC

School district's, who are currently participating in the School District Administrative Claiming (SDAC) program, are not required, but may elect to enroll with Missouri Medicaid for the provision of IEP therapy services (i.e. direct services).

School districts will receive a revised SDAC manual in the near future. The addition of the provider participation rate is discussed in the revised manual. The provider participation rate will be calculated using the following formula:

$$\frac{\text{Number of Medicaid enrolled providers a district refers students to}}{\text{Total number of providers a district refers students to}} \times 100 = \%$$

The inclusion of the provider participation rate into the SDAC invoicing process may affect the districts claimable amount. The following are some examples of how the provider participation rate may or may not affect the SDAC claimable amount.

1. If the district is not an enrolled provider for therapy services and refers students to 20 different providers (therapists, counselors, physicians, etc.) throughout the quarter and 10 of the providers are Medicaid enrolled, the claimed amount on the SDAC invoice would be multiplied by 50% (10 enrolled providers/20 total providers).
2. If the district is an enrolled provider for therapy services and refers students to 5 different school employed or contract therapists, and 20 different providers (other than speech, physical, or occupational therapists) throughout the quarter and 10 providers are Medicaid enrolled, the claimed amount of the SDAC invoice would be multiplied by 60% (5 school providers + 10 other providers enrolled/5 school providers + 20 total other providers).
3. If the district is not an enrolled provider for therapy services and refers students to 20 different providers throughout the quarter and all 20 are Medicaid enrolled providers, the claimed amount on the SDAC invoice would be multiplied by 100% (20 enrolled providers/20 total providers).

School Districts should closely review the changes to the SDAC program outlined in this bulletin and determine whether or not to enroll as a Medicaid Provider for the provision of IEP therapy services.

Provider Communications
(800) 392-0938
or
(573) 751-2896