



# MEDICAID/COMPLIANCE CONNECTION



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## GUIDELINES/PACKET INFORMATION

### ✓ Packet Information

- PowerPoint
- Quality Assurance Committee Review Sheet
- Quality Assurance Committee Quick Guide
- Medicaid Minutes
- Compliance One-Pager, plus Supporting Document
- Sample Results Page



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# QUALITY ASSURANCE COMMITTEE (QAC)

QAC is the review process TBAISD uses as part of the Medicaid Compliance Plan.

Representatives from each discipline review Medicaid documentation

- ▶ Quality Assurance Committee is comprised of staff members from each of the following disciplines:

- Speech
- Occupational Therapy
- Physical Therapy
- School Social Work
- Nursing
- Orientation & Mobility
- Compliance Leader (Monitor)
- Medicaid Office Leaders

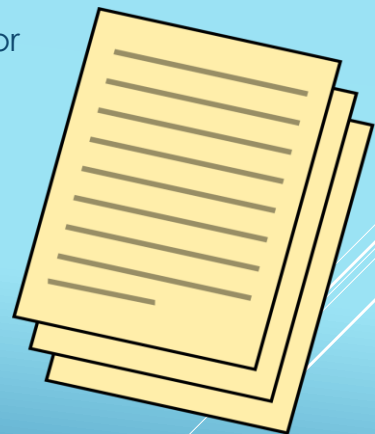


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## QAC SAMPLE DOCUMENTATION

A complete QAC sample includes the following for each student reviewed:

- ✓ Medicaid Documentation Review Sheet
- ✓ QAC Quick Guide
- ✓ Sample of Billing
  - Including Time and Frequency of Service
- ✓ Student Absence Record
- ✓ Access to IEP



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## COMPLIANCE LEADER (MONITOR)

The compliance leader is an important part of the Quality Assurance Committee meetings. Medicaid and compliance work hand-in-hand. TBAISD's compliance leader is involved in Continuous Improvement and Monitoring System (CIMS) and other quality initiatives. Reviewing QAC and compliance overlapping areas, helps to improve results for both Medicaid and compliance.

How many incorporate compliance with Medicaid quality improvement?



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## MEDICAID/COMPLIANCE CONNECTIONS

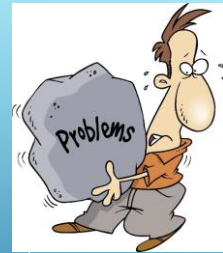
- ▶ QAC and Compliance
  - ▶ Duration/Frequency
  - ▶ Goal Writing
  - ▶ Service matching IEP Goals
  - ▶ Service reporting on dates of absences
- ▶ Advantages of Medicaid/Compliance Connection
  - ▶ Proactive Approach
  - ▶ Provides awareness of regulations
  - ▶ Process Improvement
  - ▶ Audit Ready
    - ▶ Medicaid
    - ▶ Compliance



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## IDENTIFYING PROBLEM AREAS

- ▶ How to determine if an area is Medicaid or Compliance?
  - ▶ Important to have a working relationship with compliance leader
  - ▶ Use QAC review process to identify problem areas
  - ▶ Use Quick Guide as guidance in QAC meetings



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## PROBLEM AREAS

- ▶ Discipline specific goals – both
  - Medicaid – therapy needs to match goals
  - Compliance – service needs to meet goals
- ▶ Under/Over services the student for the amount of time indicated on the IEP – both Medicaid and Compliance
- ▶ Entered the incorrect group size – Medicaid
- ▶ Does the service match the IEP goals – both Medicaid and Compliance
- ▶ Monthly summary does not tell progress on direct service IEP goals – Medicaid
- ▶ Monthly summary does not include medical/mental status and treatment plan changes – Medicaid
- ▶ Service provided on date of absence – both Medicaid and Compliance



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## REVIEW FOLLOW-UP

Following each QAC review, it is important to meet with the compliance leader and Medicaid leaders to review and analyze results and come up with a plan of action.

- Problem areas identified
- Results shared
- Plan for process improvement



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## RECTIFYING RESULTS

- ▶ Process Improvement...
  - ✓ Individual contacts
  - ✓ Group emails
  - ✓ Mini QAC review with itinerant staff
  - ✓ Address special education supervisors
  - ✓ Medicaid Minutes



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TBAISD LEADING LIFETIME LEARNING		QUALITY ASSURANCE COMMITTEE (QAC) MEDICAID DOCUMENTATION REVIEW ITINERANT SERVICES	
Review Dates: _____ through _____			
Student Name:	Reviewed By:		
Provider Name:	Date of QAC:		
<b>Have IEP requirements been met?</b>			
1. Is service being billed listed on the IEP services page?	Yes	No	
2. Is a duration and frequency for service listed on services page?	Yes	No	
3. Are there discipline specific goals listed for this student?	Yes	No	
<b>On the PCS documentation form, has this provider:</b>			
1. Entered appropriate selection for service type?	Yes	No	
2. Serviced student for the amount of time indicated on IEP?	Yes	No	
3. Serviced student for the frequency as indicated on IEP?	Yes	No	
4. Entered correct group size?	Yes	No	
5. Entered student's progress under status?	Yes	No	
6. Checked appropriate selections under Areas Covered/Assessed?	Yes	No	
7. Under Comments:			
a. Identified who/what was done during session and student's response?	Yes	No	
b. Does the service match IEP goals?	Yes	No	
8. Completed Monthly Summary each month there are therapy entries?	Yes	No	
a. Does monthly summary tell progress on direct service IEP goals?	Yes	No	
b. Does monthly summary include statement in reference to any changes in treatment plan, medical and mental status?	Yes	No	
9. Was service provided on a date student was absent?	Yes	No	
<b>Completed by Medicaid Office – Staff Certification, Payroll, Attendance Records</b>			
• One-Time Consent form on file	Yes	No	
• Provider has certification for billing Medicaid SBS	Yes	No	
• Is the employee supervised by a certified therapist?	Yes	No	
• Electronic signature form on file	Yes	No	
• Is there a current prescription/referral on file? (OT, PT, SLU, Nursing, O&M only)	Yes	No	
• Was the staff member absent on a reported service date?	Yes	No	
• Payroll reports indicate appropriate funding	Yes	No	
<b>Comments:</b>			

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Quality Assurance Committee Quick Guides		
Description	Answer/Example	Medicaid/Compliance
1. Is the service being billed listed on the IEP Services page?	Example of a related service in the IEP: Speech and Language Services R 340.1746 Start Date: 04/02/2016 End Date: 04/02/2017 30-40 minutes (0.8 session(s)) per month	Both
2. Is there a duration and frequency listed on the services page?	Example of a related service in the IEP: Speech and Language Services R 340.1746 Start Date: 04/02/2016 End Date: 04/02/2017 30-40 minutes (0.8 session(s)) per month	Both • Refer to compliance guidelines for details
3. Are there discipline specific goals for the student?	Example of a discipline specific goal: <b>Goals and Objectives</b> Goal 1 – Instructional Area: • EGGLE – Supported Independence – English Language Arts – Reading Elementary – Fluency Standard upon which goal will be based: • R.1.6.2.9.E.003a – Apply the following aspects of fluency: naming some letters, associating some letters and their sounds, recognizing a few words paired with pictures and/or objects both when encountered in context and isolation, and demonstrating understanding a limited number of concepts of print. Baseline Data: • Student is currently able to identify 20/21 consonant sounds, and 3/5 short vowel sounds based on the CDEB Phonics Survey. With general prompts, student was able to sound out 7/10 simple CVC words on the assessment. Of the 40 taught sight words, student identified 28. Measurable Annual Goal: • By 4/19/17, student will improve decoding skills of consonants and short vowel sounds, when given opportunity to read letters and words with 75% accuracy on teacher made assessments and curriculum based assessments.	Both • Medicaid—therapy entries need to match goals • Compliance—services needs to meet goals
1. Entered the appropriate selection for service type?	Choose from drop down menu Service Type: <input type="text" value="In-person"/>	Medicaid
2. Serviced student for the amount of time indicated on IEP?	Speech and Language Services R 340.1746 Start Date: 04/02/2016 End Date: 04/02/2017 30-40 minutes (0.8 session(s)) per month	Medicaid • Speech must indicate time either by entering Start/End times or amount of time in comments section for therapy and non-billable logs • All other disciplines must enter Start/End times Compliance • Time serviced must be indicated, including entries for non-billable logs
3. Serviced student for the frequency as indicated on IEP?	Speech and Language Services R 340.1746 Start Date: 04/02/2016 End Date: 04/02/2017 30-40 minutes (0.8 session(s)) per month	Both

Page 1 of 2

QAC Quick Guide  
6/15/2017

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4. Entered correct group size?	<p><b>GROUPS OF MORE THAN 8 ARE NON-BILLABLE</b></p> <ul style="list-style-type: none"> <li>Adults and service providers not included</li> <li>Group therapy or treatment must be provided in groups of two to eight. Services provided as part of a regular classroom activity are not reimbursable. When regularly scheduled attention is provided to one student who is part of the class currently in session, the service is not reimbursable.</li> </ul> <p><b>Therapy in the Classroom</b></p> <ul style="list-style-type: none"> <li>Is a billable service if there is separation from an on-going classroom lesson</li> <li>Student(s) focus is on therapist, not classroom teacher</li> <li>Small group back of class (2 to 8 students), in hall, etc.</li> <li>Not a billable service if therapy is provided as part of a regular classroom activity</li> <li>Not a billable service if assisting student with lesson in session</li> </ul> <p>Students should be serviced the best way that meets their needs; however, the service may not be billable.</p>	Medicaid
5. Entered student's progress under status?	<p>Session Progress <input type="checkbox"/> (Required)</p>	Medicaid • Required field when logging therapy
6. Checked appropriate selections under Areas Covered/Assessed?	<p>Areas Covered/Assessed (Required)</p>	Medicaid • Required field when logging therapy
7.a. Identified who/what was done during session and student's response?	<p>Who: Student What: Description of therapy given related to goal/objective Response: May not necessarily be a verbal response, but an action response</p>	Medicaid
7.b. Does the service match IEP goals?	<p>Services (therapy) should always match the current IEP</p>	Both
8. Completed Monthly Summary each month there are therapy sessions?	<p>Monthly summaries are required for each month there are therapy entries</p>	Medicaid
8.a. Does monthly summary tell progress on direct service IEP goals?	<p>Under comments, the monthly summary should summarize the progress of therapy for the month</p>	Medicaid
8.b. Does monthly summary include statement in reference to any changes in treatment plan, medical and mental status?	<p>•Monthly Summaries are <u>required</u> to release therapy services logged during the month</p> <p>•Should summarize the service comments and indicate the student's progress toward IEP goals for the month</p> <p>•Monthly Summaries have 3 components that must be completed:</p> <ol style="list-style-type: none"> <li>Evaluation of progress on IEP goals</li> <li>Changes in medical or mental status</li> <li>Changes in the treatment plan with reason for change</li> </ol> <p>✓ Can use the following statement to cover #2 and #3: "No known changes in medical, mental status or treatment plan"</p>	Medicaid
9. Was service provided on a date student was absent?	<p>Absence reporting varies; additional follow-up may be needed; detail in logging required for clarifying purposes</p>	Both


Page 2 of 2

QAC Quick Guide  
4/18/2017

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Speech, OT, O&M, PT, Nursing, SSW Itinerant Services	Audit Period 9-1-2015 thru 6-1-2016		
Total samples	281	% Correct	% Incorrect
Is the service being billed listed on the IEP services page?	0	100%	0%
Is there a duration and frequency listed on the services page?	1	100%	0%
Are there discipline specific goals for this student?	11	96%	4%
Entered the appropriate selection for service type?	14	95%	5%
Serviced the student for the amount of time indicated on the IEP?	74	74%	26%
Serviced the student for the frequency as indicated on the IEP?	32	89%	11%
Entered the correct group size?	10	96%	4%
Entered the student's progress under status?	10	96%	4%
Checked the appropriate selections under Areas Covered/Assessed?	5	98%	2%
Identified who/what was done during the session and the student's response?	32	89%	11%
Does the service match the goals in the IEP?	15	95%	5%
Completed a monthly summary?	30	89%	11%
Monthly summary tells progress on direct service IEP goals?	34	88%	12%
Monthly summary includes medical/mental status and treatment plan changes?	56	80%	20%
Was service provided on a date of absence?	13	95%	5%
Discrepancy between attendance and provider notes?	3	99%	1%
Copied and pasted entries	0	100%	0%
Missing Billing	6	98%	2%

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## Compliance one-pager

### Writing Ranges for Itinerant Related Services

December 2016

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**Background: IEP Section 7 – Writing Specific Amount of Time and Frequency under Related Services directly related to a goal(s).**

For each service identified, the IEP team will determine the specific amount of time a service will be provided. The team will also need to indicate the frequency of the delivery. For each service and, indicate the time and frequency in such a manner to ensure the district's commitment of resources are clear.

MDE Quick Reference Guide Section 7: Special Education Services and Programs  
Tips for Developing a Quality and Compliant Individualized Education Program (IEP)  
[http://www.michigan.gov/documents/mde/Section\\_7\\_Programs\\_Sec\\_321790\\_7.pdf](http://www.michigan.gov/documents/mde/Section_7_Programs_Sec_321790_7.pdf) Section 7.

Public agencies are not required to specify the amount of services to be provided in accordance with a student's IEP in terms of hours and minutes in order to satisfy the Part B regulation regarding content of an individualized education program at 34 CFR 300.346(a)(3); however, they are required to state the amount of services to be provided in a manner that is appropriate to the specific service and clear to all who are involved in the development and implementation of the IEP.

Letter to Copenhagen  
Office of Special Education Programs

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**TBAISD Guidance for Itinerants writing ranges for related service**

In an effort to provide clarity for parent understanding of district commitment, ranges for related service on an IEP should reflect the following guidance:

**Section 7**  
Special Education Services and Programs  
Related Service

Rule Number	Specific Amount of Time and Frequency	Location	Duration
<ul style="list-style-type: none"> <li>The amount of time you can range can be up to 50% more than your lowest number of minutes               <ul style="list-style-type: none"> <li>Ex: 10 – 15 mins (10 + 50% of 10 = 15) Ex: 30 – 45 mins (30 + 50% of 30 = 45)</li> </ul> </li> <li>The session frequency can range by no more than 2               <ul style="list-style-type: none"> <li>Ex: 2-4x's    7-9x's    4-6x's</li> </ul> </li> <li>The sessions can range within a day, week or month only</li> <li>It is not necessary to write a range to cover short months such as September, December, or June</li> <li>If you need to use "year" in your frequency for direct service you will need to contact your Service Area Supervisor.</li> </ul>			

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Type of Service	Description of Service	Amount of Direct work with student	Frequency	Where/How Service is Described in IEP	Relation to Measureable Goals
<b>Related Service</b>  IEP Section 7  MDE Quick Reference Guide Section 7	Service is provided by working directly with the student and by consultation directly related to the goal. Attending an IEP meeting, conducting evaluation, participation at matrix/FBA, as well as other activities (meetings, etc.) directly related to the student.	Direct work with student is regular, may include consultation with others.	Provided on a weekly, bi-weekly, or monthly basis. Specific amount of time and frequency. TBAISD Compliance 1-pager on Ranges.	Listed under "related services" on the programs and services page of the IEP. Section 7, list time, frequency, duration, start and end date, and location.	The related service provider works/collaborates to develop, implement and monitor a measureable goal related to service being provided and to data in the PLAAFP.
<b>Supplementary Aids and Service</b>  IEP section 5  MDE Quick Reference Guide Section 5	Service is provided by working with teachers and/or others having regular contact with the students. Monitoring the effectiveness of supports for the student.	Direct work with the student is based on need, may be occasionally to not at all.	Typically occurs less than monthly. May have periods of higher contact based on student's needs. Provided on weekly, biweekly, monthly, or annual basis. Clear and detailed description (time and frequency or condition).	Listed under supplemental aids and services, IEP section 5. Must list time/frequency and/or condition. (Examples, "when tests are given", "when independent reading is required", "during all math calculation activities", etc.)	The consultative service provider supports student or those working with the student. Not directly connected to the attainment of the goal.

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## Medicaid Minutes

### Medical Services - Speech

Issue 4

**Medicaid** is a jointly funded Federal-State health insurance program for persons with low income and/or disabilities. **School Based Services (SBS)** allows reimbursement under the Medicaid program for services administered to students with special needs, under the Individuals with Disabilities Education Act (IDEA), and is administered through the Intermediate School District. Coverage applies to students up to the age of 21 years who are enrolled in programs that require an Individualized Education Program (IEP) or an Individualized Family Service Plan (IFSP).

Coverage is based on medically necessary, Medicaid-covered services already being provided in the school setting and enables these services provided to Medicaid-eligible beneficiaries to be billed to Medicaid. This ensures federal participation in the funding of these Medicaid-covered services. Medical services include services given by speech, physical, and occupational therapists, along with school social workers and nurses, and vision and mobility specialists.

Record keeping documentation must be maintained which shows that services provided to or on behalf of the student comply with Michigan Department of Community Health (MDCH) rules. These rules state that, at a minimum, the following information should be documented and maintained for seven (7) years:

- IEP/IFSP documents with goals and services identified, and any addendum to the plan
- Relevant evaluations and assessments given to determine the need for services
- Encounter log notations including the date of service, type of service (e.g. group therapy, evaluation), level of service intervention, and name of person providing service
- Actual begin and end time of service for services that have time-specific procedure codes
- Daily progress note describing direct service rendered and the student's response to the service or treatment
- Brief monthly summary/progress note summarizing the services provided during the month, using daily notes, as well as the student's progress toward the goals defined in the IEP/IFSP. Also, include changes in medical or mental status and changes in treatment with rationale for change.
- A physician's prescription for physical therapy and occupational therapy, and a physician's referral for speech, language and hearing (required annually)

#### Speech Services

In this issue, we will touch on speech logging. Here are a couple of examples of logging speech therapy using **Procedure Code 92507/92508 – Therapy**.

##### Service Detail:

5/18/14 Student worked on correct articulation of the /t/ and /d/ sounds in the final position with 60% accuracy, /t/ /d/ /ch/ in isolation after model 50% accuracy and overall intelligibility in connected speech.

5/25/14 Student worked on correct articulation of the /t/ and /d/ sounds in the final position with 70% accuracy, /t/ /d/ /ch/ in isolation after model 60% accuracy and overall intelligibility in connected speech.

##### Monthly Summary:

Student demonstrated increased articulation skills and intelligibility over the month, averaged 65% on correct articulation of the /t/ and /d/ sounds in the final position, and 55% accuracy on /t/ /d/ /ch/ in isolation after model. Continue goal per IEP. There are no known changes in medical or mental status or changes in treatment plan.

All service provider logs, from the preceding month, are due by the 10<sup>th</sup> of the following month, so as to ensure a fluid billing process.

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## QUIZ - 1

- ▶ IEP states speech services for 20-30 minutes, 4 times per month
- ▶ Student was serviced 3 times per month for 120 minutes total

**Is this correct for Medicaid, Compliance, both, or neither?**



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## QUIZ - 2

- ▶ Name one of the four Medicaid/Compliance connections



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## QUIZ - 3



- ▶ What is one of the advantages of Medicaid and Compliance working together with QAC?

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## QUIZ - 4

- ▶ Name one of the problem areas common to both Medicaid and Compliance



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## QUESTIONS



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