COVERED SERVICES

School-Based Medicaid Program Expansion

Effective for dates of service on or after March 20, 2019, Louisiana Medicaid has expanded the covered services provided by a Local Education Agency (LEA) in the School-Based Medicaid Program to include the following:

- Health services provided by an LEA and licensed practitioner employed by the LEA; and
- Early and Periodic Diagnostic Treatment (EPSDT) health services on the Medicaid approved Periodicity Table may be reimbursed when provided by a licensed practitioner within the scope of their practice. All other health services must be included in a completed authorizing document pursuant to 34 C.F.R. § 104.36, as follows:
 - Individualized Education Plan (IEP);
 - Section 504 Accommodation Plan;
 - Individualized Health Care Plan (IHCP); or
 - Included in otherwise medically necessary documentation, and include medical services that are provided to students pursuant to an Individual Health Care Plan (IHCP), and/or services that are otherwise medically necessary.

NOTE: Payment for services provided pursuant to an IEP will continue to be provided under the expanded program.

Services provided in a school setting will only be reimbursed for beneficiaries who have been determined eligible for Title XIX and the Individuals with Disabilities Education Act (IDEA), Part B services with a written service plan which contains medically necessary services ordered and rendered by a physician or other licensed qualified practitioner who provides these services as part of their respective area and within the scope of his or her licensure under Louisiana state law.

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Licensed, qualified practitioners shall also be responsible for supervising their respective assistants in the same manner. LEAs are required to keep a copy of Louisiana licenses showing full name and dates of licensure reflecting the period services were provided onsite.

Service Exclusions

- These services are not covered if they are performed soley for educational purposes (e.g. academic testing) or as the result of the assessment and evaluation it is determined the service is not reflected in a service plan or not determined to be medically necessary; and
- Medicaid does not reimburse for social or educational needs.

Covered Services Provided by Local Education Agencies (LEAs)

- Audiology Services;
- Occupational Therapy Services (OT);
- Physical Therapy Services (PT);
- Speech-Language Services;
- Nursing Services Medically necessary services that are directly related to an individualized health plan (IHP) and/or a physician's written order, when required. The following school-based nursing services are covered:
 - Implementation of physician's orders;
 - Chronic Medical Condition Management and Care Coordination;
 - Medication administration;
 - EPSDT Nursing Assessment/Evaluation Services (IHP Not Required); and
 - EPSDT Program Periodicity Schedule for Screenings (vision and hearing) (IHP Not Required).

- Behavioral Health Services: The professional requirements for Licensed Master Social Workers or Certified Master Social Workers and Certified School Psychologists include the following:
 - Licensed Master Social Workers or Certified Master Social Workerspracticing under the supervision of a Licensed Clinical Social Worker; and
 - Certified School Psychologists practicing under the supervision of a licensed Psychologist.

NOTE: This is not an inclusive list of Behavioral Health professionals.

- Special Transportation Services services include:
 - Travel to and from school and between schools or school buildings on a day when a covered service is to be rendered on school premises and special transportation is included as a separate service;
 - Travel to and from off-site premises the same day when the beneficiary is receiving a covered service that is on the child's IEP to be rendered off-site and special transportation is included in the IEP as a separate service; and
 - Use of a specially adapted vehicle (such as a specially adapted bus, van or other vehicle such as a wheelchair lift, special harness, safety vest or special car seat).
- Documentation for Transportation Services:
 - Trip logs must be completed for all students who ride LEA designated specialized/adapted vehicles each day; and
 - This information must be cross-referenced with attendance records and the documentation of receipt of a covered IDEA Health Service that is included in the student'sservice plan, on the same day as transportation.

New Covered Services Provided by LEAs

The following are new covered services provided by LEAs (effective as of March 20, 2019):

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- Optometry Services;
- Physician Services;
- Respiratory Therapy; and
- Applied Behavior Analyst (ABA)-based therapy:
 - Medicaid covered applied behavior analysis (ABA)-based therapy is the design, implementation, and evaluation of environmental modification using behavioral stimuli and consequences to produce socially significant improvement in human behavior, including the direct observation, measurement and functional analysis of the relations between environment and behavior;
 - ABA-based therapy services teach skills through the use of behavioral observation and reinforcement, or prompting, to teach each step of targeted behavior. ABA-based therapy services are based on reliable evidence and are not experimental; and
 - Medicaid covered ABA-based therapy must be medically necessary and delivered in accordance with the beneficiary's IEP, section 504 accomodation plan, or IHCP.

Professional Requirements:

- Services shall be provided by, or under the supervision of a:
 - Behavior analyst who is currently licensed by the Louisiana Behavior Analyst Board;
 - Licensed psychologist, or by a licensed medical psychologist, working within the schope of their license; and/or
 - Licensed behavior analysts.

NOTE: Licensed psychologists, and licensed medical psychologists shall be reimbursed for Medicaid covered therapy services that are medically necessary, prior authorized by the Medicaid Program or its designee, and delivered in

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accordance with the beneficiary's treatment plan.

- Licensed behavior analysts shall meet the following criteria:
 - Be licensed by the Louisiana Behavior Analyst Board;
 - be covered by professional liability insurance in the amount designated by the State;
 - Have no sanctions or disciplinary actions on their Board Certified Behavior Analyst or Board Certified Behavior Analyst-Doctoral certification and/or state licensure;
 - Shall not have Medicare/Medicaid sanctions or be excluded from participation in federally-funded programs; and
 - Have a completed criminal background check according to the State's requirements.
- Certified assistant behavior analysts shall meet the following criteria:
 - Be certified by the Louisiana Behavior Analyst Board;
 - work under the supervision of a licensed psychologists, licensed medical psychologists, and licensed behavior analyst, with the supervisory relationship documented in writing;
 - Have no sanctions or disciplinary actions, if State-certified or Board-certified;
 - Not have Medicare/Medicaid sanctions or be excluded from participation in federally-funded programs; and
 - Have a completed criminal background check according to the State's requirements.
- Registered line technicians shall meet the following criteria:
 - Be registered by the Louisiana Behavior Analyst Board;

- Work under the supervision of a licensed psychologists, licensed medical psychologists, and licensed behavior analyst, with the supervisory relationship documented in writing;
- Have no sanctions or disciplinary actions, if State-certified or Board-certified;
- Not have Medicare/Medicaid sanctions or be excluded from participation in federally-funded programs; and
- Have a completed criminal background check according to the State's requirements.

Supervisory Requirements:

- Licensed behavior analysts shall provide supervision to certified assistant behavior analysts and registered line technicians;
- Supervision is included in the State's Scope of Practice Act for licensed behavior analysts and they shall assume professional responsibility for the services rendered by an unlicensed practitioner; and
- Licensed psychologists and licensed medical psychologists are authorized to provide supervision to non-licensed practitioners.

Services Provided by Local Education Agencies (LEAs) - Applied Behavior Analysis services rendered in school-based settings must be provided by, or under the supervision of a behavior analyst currently licensed by the Louisiana Behavior Analyst Board, a licensed psychologist or licensed medical psychologist.

NOTE: Payment for services must be billed by the licensed professional.

School-Based Medicaid Program–Personal Care Services

Overview

In the expansion of covered service provided by a Local Education Agency (LEA) in the Louisiana School-Based Medicaid Program (SBMP), Personal Care Services (PCS) will be covered when ordered by a licensed practitioner within the scope of their practice. PCS is defined as services

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necessary for a student with disabilities to participate in the daily activities of a school setting. To be eligible for PCS in school, the student must be dependent in, and need assistance, for one or more of the activities of daily living (ADL).

Dependent in an ADL means the student requires cuing and stand-by supervision or hands-on assistance from a personal care worker to begin and complete an activity of daily living. ADLs include the following:

- **Grooming:** Assistance with basic hair care, ensuring clothes are clean and properly fastened; and care of eyeglasses and hearing aids (confirming batteries work, positioning aids);
- **Eating:** Assistance with hand washing and applying orthotics required for eating, as well as transfers and feeding, excluding enteral tube feeding;
- **Transfers:** Assistance with transferring the student from one seating or reclining area to another;
- **Mobility:** Assistance with ambulation, including use of a wheelchair. Mobility does not include providing transportation for a student;
- **Positioning:** Assistance with positioning or turning a student for necessary care and comfort;
- **Toileting:** Assistance with bowel or bladder elimination and care, including transfers, mobility, positioning, feminine hygiene, use of toileting equipment or supplies, cleansing the perineal area, inspection of the skin and adjusting clothing, excluding catheterization; and
- **Behavioral Cuing**: Assistance and support for behavioral management, maintain and sustain on task behavior and assist in completion of tasks by offering behavioral prompts.

Other Health-Related Procedures and Tasks

Health-related procedures and tasks may be delegated by a **licensed qualified health care professional** to be performed by a PCS worker. Students must have a plan of care with interventions, tasks and health related procedures listed and authorized by a licensed provider within their scope of practice. Documentation of training and qualifications must be included in the employee file of the PCS worker. Documentation of qualifications and skill competency must

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be in the PCS personnel file.

Non-covered Services

PCS are not covered by the Louisaiana School-Based Medicaid Program (SbMP) under the following circumstances:

- ADL assistance provided to a student by a personal care worker who does not meet minimum qualifications for PCS role or worker and whose skills have not been documented and verified by a licensed, qualified practitioner;
- Services provided by substitutes who have not received the required training and supervision;
- Services provided by a parent, sibling, grandparent, stepparent, legal guardian or foster parent;
- Services provided to a student that are age appropriate and would reasonably require assistance for a student of that age;
- Academic assistance and support, for example:
 - Helping a student with school assignments, projects or activities.
- Extracurricular support provided to a student for participation in activities before and after school including sports, clubs, class projects, tutoring, music lessons, etc.

Service Plans

A PCS plan of care is a document that contains the description of the medically necessary services a student will need during the school day with specific instruction on how the services should be provided, including frequency and duration. All PCS that are covered by Medicaid must be listed in an approved plan of care and authorized by a licensed provider within their scope of practice.

The PCS plan of care must be completed within the first week of starting the personal care assistance services and must be reviewed semi-annually (rolling sixth months). All health care plans of care must be updated when there is a change in the student's condition or need for PCS. A copy of the most current PCS health care plan must be immediately available to the person who is providing the PCS services.

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Plan of care documents utilized in the state of Louisiana include but are not limited to the following:

- Individualized Education Plan (IEP);
- Section 504 Accommodation Plan;
- Individualized Health Care Plan (IHCP); and
- Other written plans for health services that are deemed medically necessary.

Required Components of the PCS Service Plan

Components of a PCS plan of care must include the following:

- Start and end date of the plan of care;
- Student's name, date of birth, demographic information including name of parent, guardian or responsible party, and emergency contact information;
- List of special instructions and /or procedures required to meet the student's specific needs, worker;
- A clear summary including the diagnosis and CPT code, condition, sign, or symptom that is creating the need for the service, and ICD 10 codes as applicable; and
- Number of days that services are required per week. Total time requested to complete each activity each week.

Service Limits

PCS is not subject to service limits. Services provided shall be based on the individual health requirements of the student and medical necessity for the covered services. The CPT code is T1019, modifier EP, unit of service 15 min. Please see EPDST Health and IDEA – Related Services fee schedule for details.

Record Keeping

The school must maintain required written or electronic documentation for 5 years from date of service. Required documentation includes the following:

- Student Name, and date of birth;
- Authorizing/ prescribing provider name, credentials, and NPI number;
- Plan of care start date, reassessment date and time;
- List of services required/authorized, and time required to complete services;
- Documentation of services provided including signature of provider;
- Records must be complete, accurately documented, timely, and organized; and
- LEAs must make PCS direct care worker records available to LDH and/or its designee upon request. The provider (LEA) shall be responsible for incurring the cost of copying records for LDH or its designee.

PCS Worker Qualifications

To be eligible to provide PCS, the person must meet all of the following requirements:

- Be a resident of the state of Louisiana;
- Be at least 18 years of age;
- Have a GED or high school equivalent;
- Hold current Pediatric cardiopulmonary resuscitation (CPR) and First Aid certification;
- Be someone other than a parent, grandparent, stepparent, paid legal guardian or foster parent;
- Completed the required skills and procedure training and supervision provided by a licensed healthcare professional within their scope of practice under Louisiana

state law;

- Demonstrate the ability to effectively communicate with the student, supervising and ordering licensed, qualified practitioner, school healthcare personnel, and parents of the minor students;
- Be able to appropriately respond to the student's needs and immediately report significant changes in the student's condition to the supervising licensed practitioner;
- Be able to maintain required documentation daily including, but not limited to, PCS activity checklists or logs, student's response to procedures and activities when appropriate, and communication with the licensed practitioner and emergency contacts; and
- Be employed by the school district to provide PCS or be under contract with school district or agency that has a PCS service agreement with the district.

PCS Worker Supervision

A licensed, qualified practitioner must supervise anyone providing personal care assistance using direct training, observation, and return demonstrations. These qualifications should be based on the service provided, the license, scope of practice, professional responsibilities, and professional experience. For example, ADLs such as positioning, transfers or toileting may be taught and supervised by a physical therapist or professional nurse. This ADL example of positioning, etc., would not be taught or supervised by a speech pathologist, audiologist, school psychologist, social worker or special education teacher because it is not within the scope of practice of those professionals. LEAs are required to keep a copy of the Louisiana licenses showing full name and dates of licensure reflecting the period services were provided onsite.

Supervision of the services requires the following:

- Confirming that the personal care worker meets the qualifications to provide the services;
- Appropriately assigning tasks to the personal care worker;
- Providing training and ensuring competency of the personal care worker in meeting the individual needs of the student before services are provided;

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- Verifying that the PCS service plan, is completed and signed by authorizing provider within the first week after the start of services and updated as needed;
- Reviewing the personal care worker's documentation of services provided; and
- Documenting training, communications, initial and periodic evaluations of the PCS services worker provided.

PCS Worker Training and Responsibilties

To provide PCS services, the personal care worker must complete the following training activities:

- Current pediatric CPR and pediatric First Aid certification;
- Complete an annual skills checklist, signed off by licensed, qualified practitioner practicing within their scope of practice;
- Complete training and an orientation checklist given by the licensed, qualified practitioner on the specific needs of the individual student as identified in the written PCS service plan;
- Be aware of the other support services provided for this student;
- Be knowledgeable about the PCS service plan and emergency procedures before performing services;
- Display competency in providing the required service according to the student's service plan;
- Follows school / district policies for communication to report changes in the student's condition or behaviors to the appropriate person; and
- Understand the documentation requirements for the services provided.

Individuals who provide coverage in the PCS worker's absence must meet all staffing requirements for the PCS worker; and including training.

Continuing Education

Annually thereafter, the provider shall ensure each PCS worker either contracted or employed, satisfactorily demonstrates the required skills and proficiencies to ensure continuing competence.

NOTE: Initial orientation and ongoing supervision shall not be considered for meeting this requirement.

PCS Worker Evaluations

Initial Evaluation

The licensed, qualified practitioner must complete an initial evaluation of the personal care worker through direct observation of the personal care worker's skills within the first 14 days of starting to provide regularly scheduled services to the student. After the initial evaluation, subsequent student assignments do not require direct observation of each PCS worker providing services unless determined by the licensed, qualified practitioner based on the needs of the student and the personal care worker's ability to meet those needs.

At the initial supervisory visit, the licensed, qualified practitioner must evaluate services provided by PCS worker for the following:

- Adequacy of the tasks and activities in the PCS service plan to meet the needs of the student;
- The PCS worker's understanding of the student's needs, including the following:
 - Knowledge of the care plan;
 - When to notify the licensed practitioner of concerns or changes in the condition or behavior of the student; and
 - When emergency actions and contacts are required.
- The PCS worker's demonstrated ability to competently carry out the tasks and activities, as trained; and
- Changes in the needs of the student requiring revision of the PCS care plan or additional training of the person providing PCS services.

Telemedicine/Telehealth

Telemedicine/telehealth is not a covered service, but is a service delivery method. Louisiana Medicaid encourages the use of this delivery method, when appropriate, for any and all healthcare services (i.e., not just those related to COVID-19 symptoms). Louisiana Medicaid allows for the telemedicine/telehealth mode of delivery for many common healthcare services.

- Permissible Telecommunications Systems:
 - All services eligible for telemedicine/telehealth may be delivered via an interactive audio/video telecommunications system;
 - A secure, HIPAA-compliant platform is preferred, if available. However, for the duration of the COVID-19 event, if a HIPAA-compliant system is not immediately available at the time it is needed, providers may use everyday communications technologies such as cellular phones with widely available audio/video communication platforms;
 - Providers should follow guidance from the Office for Civil Rights at the Department of Health and Human Services for software deemed appropriate for use during this event;
 - For the duration of the COVID-19 event, in cases where an interactive audio/video system is not immediately available at the time it is needed, an interactive audio-only system (e.g., telephone) without the requirement of video may be employed, unless noted otherwise;
 - For use of an audio-only system, the same standard of care must be met, and the need and rationale for employing an audio-only system must be documented in the clinical record; and
 - Please note, some telemedicine/telehealth services described below require delivery through an audio/video system due to the clinical nature of these services. Where applicable, this requirement is noted explicitly.

Telemedicine/Telehealth Site Criteria

• **Originating Site:** The originating site refers to where the patient is located. There is currently no formal limitation on the originating site and this can include, but is not limited

to, the patient's home; and

• **Distant Site:** The distant site refers to where the provider is located. The preferred location of a distant site provider is in a healthcare facility. However, if there is disruption to a healthcare facility or a risk to the personal health and safety of a provider, there is no formal limitation as to where the distant site provider can be located, as long as the same standard of care can be met.

Other Requirements

As always, providers must maintain the usual medical documentation to support reimbursement of the visit. In addition, providers must adhere to all telemedicine/telehealth-related requirements of their respective professional licensing boards.

Reimbursement

Reimbursement for services delivered through telemedicine/telehealth is at the same level as reimbursement for in-person services.

Providers must indicate place of service 02 and must append modifier -95.