

# TennCare school nursing guidelines

## Providing and billing covered services provided by the school nurse

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# Agenda



- Individualized education program
- Guidelines for obtaining reimbursement
- Timely filing

# The individualized education program



- **The individualized education program (IEP) is the document developed by the school for a school child who is eligible for special education.**
- This document is created by a multidisciplinary team that includes, but is not limited to, the parent, the child's primary care provider (PCP), special education professionals, the child's teacher(s), and other team members with knowledge of the services and school system.
- This planning is done at least annually or more frequently if needed.

# The IEP (cont.)



- **The IEP documents the plan to meet the child’s educational needs and supports to ensure the child’s needs are met.**
- This includes an evaluation of the child’s present educational performance, educational goals, supports, and strategies to ensure the plan goals are met.
- In addition to the educational components, the plan may include any medical or behavioral supports that are needed.
- Once the plan is completed and parental permission is obtained, the plan is put into action. Medically necessary medical or behavioral services may be covered services and eligible for reimbursement by the child’s Medicaid plan.

# Guidelines for obtaining Medicaid reimbursement

**This section describes the guidelines for obtaining TennCare Medicaid reimbursement for medically necessary covered school nursing services as required by the IEP and as allowable by TennCare through the individual health plan (IHP):**

1. The billable services below are performed by the school nurse and shall be ordered by the PCP or the child's treating provider. In addition to the supervision required for the performing school nurse, as described in section *4a (ii)* below, the school nursing program shall have a physician to clinically supervise the physician assistant or nurse practitioner in accordance with the *Tennessee Board of Nursing Rules and Regulations and T.C.A., Title 63*.
2. The school nurse will meet clinical and licensing requirements as required by the Tennessee Department of Health as well as the training required to perform these services in the school setting.
3. The school will maintain policies and procedures for the provision and documentation of the services listed in the table below.

# Guidelines for obtaining Medicaid reimbursement (cont.)

## 4. The following are the guidelines for billing:

- a) Use code 99211 with place of service (POS) 03 as the daily billable CPT<sup>®</sup> code, to include a global fee.
  - i. School nursing services eligible for reimbursement, as denoted by **Y** in the table below, are restricted to medically necessary covered services included in the IEP or IHP, as applicable.
  - ii. Medically necessary, covered services in the IEP or IHP that are ordered by the PCP or treating provider may be reimbursed. The IEP or IHP alone does not satisfy requirements for Medicaid reimbursement. Services are performed by the school nurse under the clinical supervision of an in-network physician, physician's assistant, or nurse practitioner licensed through the Tennessee Department of Health. Clinical supervision does not require the continuous and constant presence of the clinical supervisor; however, the clinical supervisor must always be available for consultation or shall arrange for a substitute provider to be available. Services are performed pursuant to the order of the student/child's PCP/treating provider.

# Guidelines for obtaining Medicaid reimbursement (cont.)

- iii. The supervising physician, physician's assistant, or nurse practitioner shall serve as the rendering provider on the claim, as the school nurse is not credentialed and cannot contract with the MCOs as a network provider.
- iv. Administrative services are not billable services.
- b) The billable items in the table below include the code to be used for the services.
- c) TennCare MCOs will contract with any school district(s) that seek(s) to contract with the MCOs, based on the MCOs' standard reimbursement rates, to receive reimbursement for medically necessary, covered services in the IEP or IHP that are ordered by the PCP or treating provider and provided in a school setting.
- d) The MCOs will monitor claims and will retrospectively audit claims for appropriate claims billing and the presence of a valid provider order to ensure school-based providers are submitting claims appropriately.
- e) The MCOs will document these guidelines in their MCO provider manual.

# Guidelines for obtaining Medicaid reimbursement (cont.)

Service	If billable, use corresponding CPT code 99211, POS 03  Note: This code is a global encounter code, billable once per day and includes all services requested  Billable (Y) / Non-billable (N)
Assessment and treatment of acute and chronic illnesses	Y
Blood glucose monitoring and testing	Y
Vital sign monitoring	N
Tracheostomy care and suctioning	Y
Colostomy care	Y
Catherization	Y
Administration of oral medicine – per tube	Y
O2 saturation monitoring (pulmonary and/or cardiac disease)	Y
G-Tube feeding	Y
Wound care	Y
Nebulizer treatment	Y
Postural drainage	N
Medication administration for medically fragile students as identified in IEP or IHP	Y
Development, implementation of IHP	N
Evaluation of nursing service in the IEP	N



# Timely filing for IEP and IHP services



- School districts must submit claims with POS 03 and any required documentation within 365 days of the date of service.
- Any claims submitted outside of the 365-day timeframe will be denied for timely filing.
- Corrected claims must be submitted within 60 days from the date of denial or 365 days from the date of service, whichever is later.

# Questions





<https://provider.amerigroup.com/TN>