

NOTIFICATION DIRECT SERVICE CLAIMING – MEDICAID INSURANCE - INDIVIDUAL WITH DISABILITIES EDUCATION ACT (IDEA)

For a number of years Missouri has participated in a Federal program called, Medicaid School-Based Services. This program helps school districts by providing partial reimbursement for some medically-related services listed on a student's Individualized Educational Program (IEP). Under the Individual with Disabilities Education Act (IDEA), school districts are permitted to seek payment from public insurance programs such as Medicaid (MO HealthNet in Missouri) for some IEP related services provided at school.

In 2013 the requirements under the Individuals with Disabilities Education Act (IDEA) have changed and now school districts are required to provide parents with written notification before they access public insurance for the first time and then every year thereafter. This notification is to inform you of the requirements under IDEA, regarding written notification and consent to access public insurance, such as MO HealthNet.

Do I need to do anything?

You will be asked to provide a one-time written parental consent to release information from your child's educational records or information about the services your child receives through his or her IEP. This information is needed for the purpose of billing MO HealthNet and seeking partial reimbursement for some medically-related IEP services.

What type of information will be in the consent form?

The consent form must inform you of the personally identifiable information that may be disclosed (including your child's name, birth date, Medicaid number or other ID, disability, IEP and evaluations, type of service, times and dates of service and progress notes), the purpose of the disclosure (e.g., payment from MO HealthNet) and the agency that will be receiving the information.

What does it mean if I give my consent?

By consenting, you state that you understand and agree that MO HealthNet insurance will be billed to partially pay the cost of IEP related services and that the necessary information about your child and his or her IEP services may be shared with MO HealthNet Division, a contracted billing agent, and/or a physician to obtain necessary supporting documentation (e.g. physician scripts, referrals) in order for the billing to be done. There will be no cost to you for the services.

Am I required to enroll with MO HealthNet Division (MHD) for public insurance?

You are not required to sign up for or enroll in public insurance for your child to receive a free appropriate public education, including IEP services.

Will my consent affect my family's MO HealthNet benefits?

No. Reimbursed services provided by your school district do not limit or reduce lifetime coverage or benefits, change eligibility, affect benefits, count against visit or funding limits in MO HealthNet programs or increase costs to you.

What if I change my mind?

You have the right to withdraw consent to disclose your child's personally identifiable information to MO HealthNet Division for billing purposes at any time.

Will my consent or refusal to give consent affect my child's IEP services?

No. Your school district must provide all required IEP services to your child at no cost to you, whether you give consent or refuse to give consent for purposes of the school accessing your MO HealthNet benefits.

What if I have a question?

Please call your school district's Special Education Department with any questions or concerns. Our School District of Springfield, R-12, and ("District") receives funding from the Medicaid Direct Service Claiming (DSC) program for IEP covered services to eligible children through the Missouri's Medicaid agency – MO HealthNet. This is a state-approved program that allows our District to receive reimbursement from federal funds for providing some health-related covered services to eligible children in the District. Examples of covered services include speech therapy, assistance with daily living skills, physical therapy, and nursing services. We are required to notify you of our participation and the IDEA regulations stated below.

The District, working with the MO HealthNet, will need to determine if your child is eligible or should become eligible in the school-based Medicaid program. Your written consent indicates that you understand and agree that the District will submit your child's information to MO HealthNet and their authorized agencies to verify eligibility and submit claims for the DSC program. The District may use Medicaid benefits in which a child participates to provide or pay for services documented in the child's Individualized Education Program ("IEP"). Parents are not required to sign up for or enroll in Medicaid to receive IEP services or a free appropriate public education from the District, nor are they responsible for any out-of-pocket expenses for these IEP services. Also, the District's access to these benefits is not allowed if it would have a negative impact on your public insurance.

We will provide the required special education or related services to your child at no cost to you whether or not you grant your written consent. Your consent is voluntary and may be revoked at any time. The District's use of this reimbursement program does not in any way affect or impact other Medicaid benefits to which the child is entitled, including any otherwise eligible services out of the school.