

School Based Medicaid for Early Special Education

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Referral for Special Education

Infant Toddler
Program
Or
Child Find
Activities



Child Find, Identification & Referral

- Ongoing system of child find activities
 - Public awareness of special education programs and need to identify and serve students with disabilities starting at age 3.
 - Screening to identify students at risk of learning needs
- Coordination with Department of Health & Welfare
 - Transition from Infant Toddler Programs (ITP)
 - 2.6 notification from ITP is considered a “referral”
- Referral to Consider Special Education Evaluation
 - Gather input and concerns from multiple sources (parents, teachers, file review, observation, screening, etc.)
 - Procedural safeguards provided
 - Team decides whether to conduct assessments
 - Note: Written Notice is provided if decision not to evaluate.

Written Notice and Consent

Before administering assessments as part of the special education evaluation, written notice shall be provided to the parent and/or adult student and written consent shall be obtained from the parent and/or adult student.

MEDICAID

- **Evaluation and Diagnostic Services (16.03.09.853.02)**
 - Evaluations to determine eligibility or the need for health related services may be reimbursed even if the student is not found eligible for health related services.
 - Evaluation completed must:
 - Have a signed and dated recommendation or referral by a physician or practitioner of the healing arts (as defined in IDAPA)
 - Be completed by a qualified professional for the respected discipline
 - Be directed toward a diagnosis and
 - Include recommended interventions

Limitations

- Educational services only can not be billed to Medicaid.

Obtains Consent for
permission to Bill Medicaid

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graph TD; A[Obtains Consent for permission to Bill Medicaid] --> B[Obtain Physician Recommendation]; B --> C[Complete Assessments];
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Obtain Physician
Recommendation

Complete Assessments

Early Childhood Comprehensive Assessment

Include:

- Functional Assessments and
- Conventional Evaluations



DEVELOPMENTAL DISABILITY DETERMINATION STANDARDS AND TEST INSTRUMENTS

Cognitive

- **Bayley Scales of Infant Development**, for ages birth through forty-two (42) months;
- **Stanford Binet Intelligence Scales**, for ages two (2) years through adult;
- **Wechsler Preschool and Primary Scale of Intelligence**, for ages two (2) years, six (6) months to seven (7) years, three (3) months;
- **Wechsler Intelligence Scale for Children**, for ages six (6) through sixteen (16) years, eleven (11) months; or
- **Wechsler Adult Intelligence Scale**, for ages sixteen (16) years to adult.

Functional

- **Battelle Developmental Inventory, 2nd Edition (BDI-2)** for ages birth to ninety-five (95) months;
- **Scales of Independent Behavior (SIB-R)** for ages birth through adult; or
- **Mullen Scales of Early Learning (MSEL)** for ages birth to three (3) years.

Functional Assessment is...

- Contextually relevant information about the child's strengths and needs
- Individually focused
- Culturally sensitive

Bagnato, S.J., Neisworth, J.T., & Pretti-Frontczak, K. Linking Authentic Assessment and Early Childhood Intervention -Best Measures for Best Practices, Second Edition. Brookes Publishing, Baltimore, MD. 2010.

Functional Assessment is not...

- Domain based and discipline specific
- Deficit driven
- Intimidating

Functional Assessment is Authentic

- The more realistic or natural the task,
 - the more motivated the child
 - the more applicable it is to everyday events and situations
- Authentic tasks and circumstances reinforce
 - competency-based approach to the education of young children
 - assessment of all disciplines across complex skills and processes
 - generalization of learning across settings
- Authentic tasks require the assessor to **make no inferences about a child's capabilities**, because the behaviors sampled are directly observable

Collecting data during functional routines and activities...

- Set up specific activities to observe skills related to the outcomes
- Observe a child in multiple settings or activities, over time when possible
- Pay close attention to how the child demonstrates skills in relation to ECO outcomes 1, 2, 3
- Write down observations
- Use a child development checklist or anchor assessment for reference, as needed

Conventional Assessment

Usefulness of Conventional Assessment:

- To distinguish typical from atypical performance
- To provide one more source of information

*“Everything that can be measured counts,
but not everything that counts
can be measured.”*

Both Functional and Contextual Evaluations and Assessment May be Medicaid Billable Activities When:

- There is documentation of each activity completed that includes:
 - Tests that were given;
 - Observations that were done;
 - Interviews with parents/other providers; and
 - a signed and dated report.

This would be billed under procedure code H2000
(Developmental Evaluation)

ECO Anchor Assessments

- **Assessment, Evaluation and Programming System for Infants and Children – 2nd Edition (AEPS)**
- **Battelle Developmental Inventory II – 2nd Edition (BDI-2)**
- **Brigance Inventory of Early Development (IED) II**
- **Carolina Curriculum for Preschoolers with Special Needs**
- **Developmental Assessment of Young Children (DAYC)**
- **Hawaii Early learning Profile (HELP)**
- **High Scope (COR)**
- **OUNCE**
- **Teaching Strategies GOLD (Creative Curriculum)**
- **Work Sampling System® (WSS)**

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To Bill or Not to Bill

- Medicaid will reimburse for the completion of entrance and exit ECO Assessments only if using a Normed or Criterion-referenced evaluation or assessment.
- Medicaid will not reimburse for the completion of an entrance or exit ECO Assessment if using a curriculum based assessment.

Related Service Evaluations

- Speech and Language evaluation
- Occupational Therapy evaluation
- Physical Therapy evaluation
- Psychosocial Rehabilitation evaluations

Medicaid Required Assessments

Behavioral Intervention

Outcome 1

- Students that meet the qualification for Developmental Disabilities (Per IDAPA 16.03.10.501) refer to handout
- Must complete one of the 10 approved behavioral assessment meeting the established criteria – refer to handout

Personal Care Services

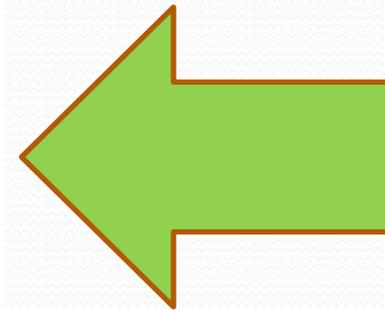
Outcome 3

- Students that have personal care service needs must have the following completed by a nurse:
 - A completed Department approved Nursing Assessment
 - Completion of the allocation tool, and
 - A completed Health Care Plan with specific instruction on addressing the student needs.

What Code to Bill

Qualified ECSE Teachers may complete/bill

ELIGIBILITY ASSESSMENT	PROCEDURE CODE
<ul style="list-style-type: none"> Scales of Independent Behavior Revised 	96150- Conducted by a qualified staff
<ul style="list-style-type: none"> Vineland-II Adaptive Behavior Scales 	96150- Conducted by a qualified staff
<ul style="list-style-type: none"> Adaptive Behavior Scale 	96150- Conducted by a qualified staff
<ul style="list-style-type: none"> Preschool & Kindergarten Behavior Scale 	96150- Conducted by a qualified staff
<ul style="list-style-type: none"> Behavior Assessment System for Children, Second Edition 	96101- Conducted by a Psychologist/Physician 96102 – Administered by a technician 96103 – Respondent taking the assessment on computer with professional interpretation
<ul style="list-style-type: none"> Emotional & Behavior Problem Scale 	96150- Conducted by a qualified staff
<ul style="list-style-type: none"> The Achenbach System of Empirically Based Assessment 	96101- Conducted by a Psychologist/Physician 96102 – Administered by a technician 96103 – Respondent taking the assessment on computer with professional interpretation
<ul style="list-style-type: none"> Connors; Comprehensive Behavior Rating Scales 	96101- Conducted by a Psychologist/Physician 96102 – Administered by a technician 96103 – Respondent taking the assessment on computer with professional interpretation
<ul style="list-style-type: none"> Connors Third Edition 	96101- Conducted by a Psychologist/Physician 96102 – Administered by a technician 96103 – Respondent taking the assessment on computer with professional interpretation
<ul style="list-style-type: none"> Devereux Early Childhood Assessment Clinical Form 	96150- Conducted by a qualified staff



Addressing Student's Behaviors

Functional Behavioral Assessment

- Describes the Problem Behavior and specifically describes who is involved before during and after the behavior.
- Documents Patterns in the Behavior, frequency, intensity, duration, environmental factors, and context in which the behavior occurs.
- History, medical, physical, substance abuse, and stressful events in the student's life.
- Effectiveness of past interventions.
- Theory about the function of the behavior.

Behavioral Intervention Plan

- Provides measurable goals.
- Provides a plan that is implemented consistently across environments and staff.
- Identifies how progress will be monitored, who is responsible for implementation, and how often interventions will occur.
- Justification of the number of minutes needed to implement the plan.

IDEA Requirements for an IEP

- 1. Early Childhood IEP** the Present levels of academic achievement and functional performance, including:
 - Completing all sections a-e of the IEP,
 - Preschool children, as appropriate, how the disability affects the child's participation in appropriate activities, and
 - Include a baseline performance for the annual goal (s) and how participation in pre-academic and non-academic activities and routines is adversely affected.

Present Levels of Performance (PLOP)

- Address areas of functional, developmental and academic need
 - How disability impacts progress and participation in general education
 - Objective and measurable
 - Directly related to other components of IEP
 - References general education standards (guideline's)
- Incorporates ECO criteria for all 3 outcomes
 - Parent input
 - Anchor assessment
 - AA, IF, F skills
 - ECO rating
 - Baseline data

Medicaid Personal Care Service Requirements for an IEP

- For students that meet the definition of Developmental Disabilities per IDEA 16.03.10.501 and have a need that is identified on the nursing assessment and the IEP team has prioritized this area for an IEP goal then a task analysis of the steps to teach the student this skill must be in the present level of performance.
- The Qualified Intellectual Disability Professional (QIDP/Special Education Teacher) can provide at the quarterly oversight (or more often as identified on the plan of care). This oversight must include on-sight observation of the student.

IDEA Requirements for an IEP

- 2. Measurable annual goals, including academic and functional goals:**
- Related to the child's needs that result from the disability to enable the child to be involved in and make progress in the general education curriculum, and
 - Meet each of the child's other educational needs that result from the child's disability
 - Where required, benchmarks or short-term objectives must be included

34 CFR § 300.320-324

Medicaid Requirements for an IEP

Measurable goals, when goals are required for the service

- The district will need to assure that the goals are measurable per the criteria outlined in the special education manual.
- Goals that are measurable will assist with compliance with the service detail report and with the 120 day review requirements for Medicaid.

High-Quality, Functional IEP Goals

- Describe how the child will demonstrate what s/he knows
- Are written in plain language and are jargon free
- Describe the child's involvement in age-appropriate activities to address 'academic and functional' areas
- Emphasize the positive
- Describe conditions in which the child will demonstrate progress
- Are measurable and observable

Annual Goals

- Related to needs and baseline described in PLOP
- Designed to meet needs resulting from disability and to be involved and make progress in general education
- Goals include:
 - Condition
 - Behavior (performance/skill)
 - Performance (evaluation)criteria
 - Evaluation procedure
 - Evaluation schedule
- Includes statement about progress reports

IDEA Requirements for an IEP



3. A description of how progress will be measured and when progress reports will be provided.

Progress reports need to include a narrative that describes the student's progress toward the annual goal.

34 CFR § 300.320-324

Medicaid Requirements for an IEP



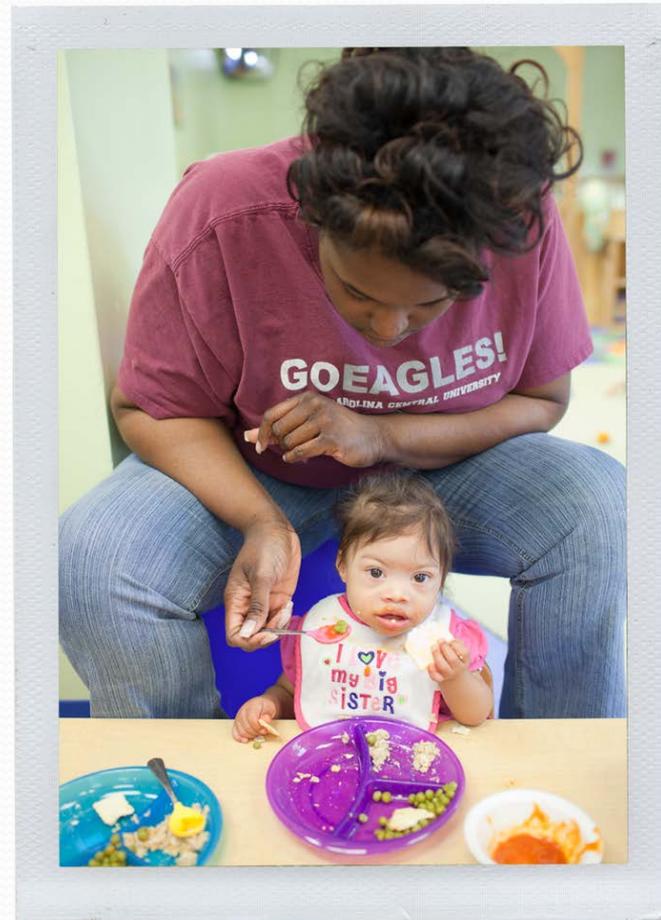
- 120 Day Review
 - A Documented review of progress toward each service plan goal completed at least every 120 days.
 - The District's progress reports are in compliance with this rule if they are completed with a "review of progress".

IDEA Requirements for an IEP

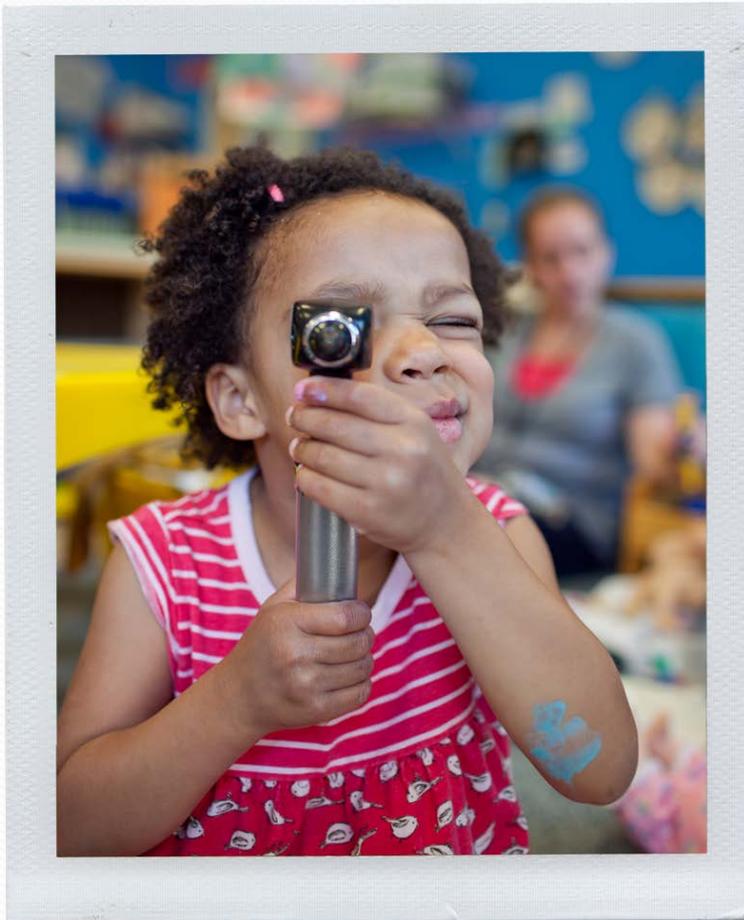
4. A statement of:

- special education and related services
- supplementary aids and services
- Accommodations, adaptations and supports for school personnel

34 CFR § 300.320-324



IDEA Requirements for an IEP



5. The projected start date, anticipated frequency, location, and duration of those services and accommodations/adaptations

34 CFR § 300.320-324

Medicaid Requirements for an IEP



- The IEP must include the type, frequency, and duration of the service provided.
- The title of the provider (s), including the direct care staff delivering services under the supervision of the professional.

Special Education and Related Services

- Special education includes specially designed instruction to meet unique needs
- Related services refers to supportive services required to assist student benefit from special education.
- Includes a description of service, location, duration, frequency, start and end dates
- Services show direct relationship to other components of IEP

+ 1. IEP SERVICES

Service	Position Responsible	Location	Freq.	M Code	Total Service per Week		Start Date	Anticipated Duration
					Hrs	Min		
Speech Therapy	SLP Professional	06	2			60		
Personal Care Services	RN	01	5		25			
Behavior Intervention	BI Professional	01	5		15			

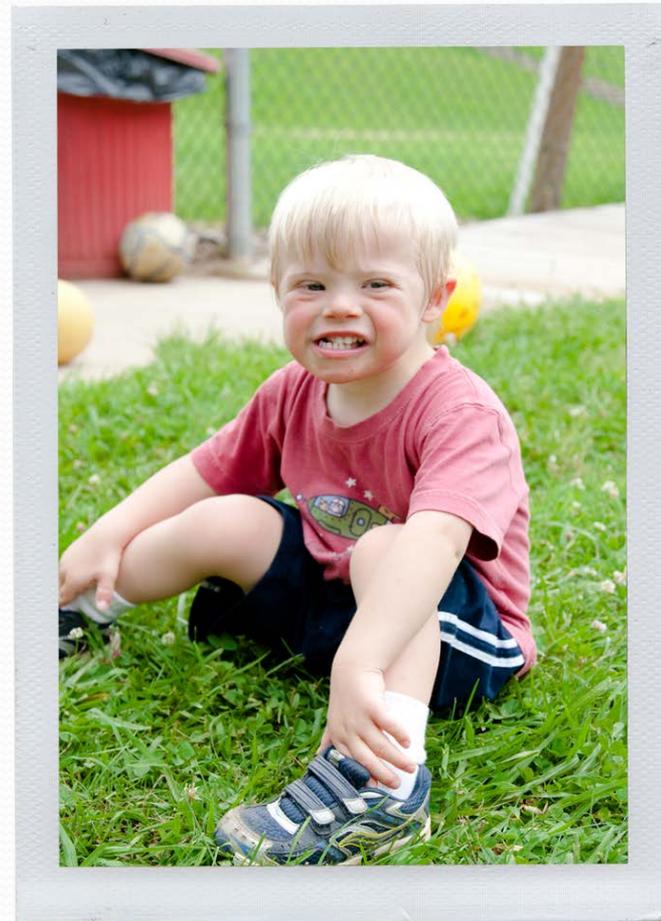
<p>Location Codes: 01 Gen Ed Classroom 02 Sp Ed Classroom 03 Home 04 Hospital 05 Community 06 Therapy Room</p>	<p>Frequency Codes: 01 Daily 02 Weekly 03 Bi-Weekly 04 Monthly 05 <input type="text"/> Times Per <input type="text"/> 06 <input type="text"/> Times Per <input type="text"/></p>	<p>Medicaid (M) Codes: IN = Individual HQ = Group HO = Professional HM = Parapro TD = Reg Nurse LP = LPN</p>
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Statement of Service Delivery: Speech and Language Therapy will be provided by professional and/or a paraprofessional under the supervision of the professional in an individual/group setting based on the needs of the student. Nursing services will be provided as needed as identified on the health care plan. Behavior intervention will be provided by a professional and/or a paraprofessional under the supervision of the professional in an individual/group setting based on the needs of the student. Behavioral consultation can be provided as needed as determined by the IEP team based on the needs of the student.

IDEA Requirements for an IEP

6. An explanation of the extent, if any, to which the child will not participate with nondisabled children in the regular early childhood curriculum/activities or classroom

34 CFR § 300.320-324



IDEA Requirements for an IEP

- 7. Individually appropriate accommodations necessary to measure the academic achievement and functional performance of the child on State and district-wide assessments**

34 CFR § 300.320-324

Behavioral Consultation

- Doctoral or Master's Degree in Psychology, Education or Applied Behavioral Analysis or
- Doctoral or Master's Degree in a Related Discipline = 1500 hours of relevant coursework or training, or both, in principles of child development, learning theory, positive behavior support techniques, dual diagnosis, or behavior analysis (may be included as part of degree program) AND
 - Exceptional Child Certificate
 - Early Childhood/Early Childhood Special Education Blended Certificate
 - Special Education Consulting Teacher
 - Pupil Personnel Certificate
 - Occupational Therapist (registered to practice in Idaho)
 - Therapeutic Consultation Professional

Developmental Disabilities Criteria MEDICAID ELIGIBILITY AT AGE 5



DIAGNOSING AUTISM



Contact Information

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