

Stepwise Procedure Submit Medicaid Claims for School-based Services

1. Ensure service providers who will be participating in your Medicaid fee-for-service program are funded with state or local funds.
2. Determine if LEA has sufficient Medicaid eligible students (use Free/Reduced Lunch as rough estimate) to warrant further effort
3. Read and understand Medicaid policy for LEA based services
 - Go to <http://www.dhhs.state.nc.us/dma/bh/8h.pdf>
 - Click on View as HTML
 - Read carefully and keep a copy for quick reference
4. Obtain an NPI - <https://npes.cms.hhs.gov/NPPES/Welcome.do> (3 page application)
 - LEA Entity type is “Individual” not ‘Health Care Organization’; Schools are non-facility providers
 - Taxonomy 235z00000x
5. Obtain an NCID - ncid.nc.gov and click on Register!
6. Register with NCTracks - <https://www.nctracks.nc.gov/content/public/providers/getting-started.html>
7. Log in to NCTracks with your NCID - <https://www.nctracks.nc.gov/content/public/>
 - Click on Providers Tab
 - Click on the Lock on the right to go Provider Portal Login
 - Log in with your NCID
8. Identify students receiving therapy who are Medicaid eligible in your school (this is reported on therapist caseload rosters which should be updated monthly):
 - Check eligibility on every therapy student every month; takes about 2 min per student to check and document students who are eligible or ~20 students each undisturbed hour
 - Go to Medicaid website: <https://www.nctracks.nc.gov/content/public/providers.html>
 - Click on lock
 - User ID (=NCID) Password= (you determine)
 - Click eligibility tab (top of Provider Portal)
 - Click inquiry (verify recipient)
 - Click dropdown for NPI # for LEA (NPI/Atypical ID field automatically populates with your LEA NPI)
 - i. Search student by Medicaid number or by first/last name (as spelled on Medicaid card) and DOB
 - ii. Enter the month for which you are interested in verifying eligibility (e.g. 9/1/15 to 9/30/15)
 1. Provider Eligibility Response page (either document tracking # or print page to document eligibility verification)
 2. If student was eligible, all fields/Recipient information will populate
 3. If student was not eligible for requested time frame, error message **Recipient is not on file** will show at top and no student information will be displayed/no fields will populate
 4. Check every month as eligibility can change month to month
 - iii. Physician information is displayed (coverage details)– record this information to obtain the physician order; date of physician order must precede any submitted claims
 - iv. SCROLL DOWN –Verify student coverage; Student may be Medicaid Eligible but LEA should not submit claims if:
 1. Student has another insurance source
 2. Student has NC Health Choice as Health Plan (not Medicaid)
 - Verify Recipient page – NPI/Atypical ID field automatically populates with your LEA NPI

9. Once eligibility is verified, parent consent is obtained
 - Discuss with therapists how to best obtain FERPA (e.g. by mail, at IEP meeting, separate correspondence, etc.)
 - Original signed copy of one-time consent must be kept on file in LEA
 - Provide parent(s) a copy
 - Annually provide parent(s) FERPA notice and document this provision
10. Once signed parent consent is obtained, MD order is obtained
 - Discuss need for order to physician (see iii above), provide a MD order template; provide physician what they require for order (e.g. full IEP, IEP first page with student information, IEP goals, IEP service delivery page)
 - Provide IEP as requested for MD review
 - Get signature on LEA MD order template (may be faxed)
 - Maintain MD order on file in LEA and obtain annually
11. Submit claims
 - Therapists submit treatment data to Medicaid Administrator (MA) for month prior by 10th of month
 - Master spreadsheets which may be helpful:
 - i. Track FERPA and Physician order (Eligibility checklist)
 - ii. Track visit count (Claim log) – log here before submitting new claims
 - iii. Track student info (Student data log)
 - iv. Track keyed claims (Claims submission log) to check against NC Tracks Remittance statement
 - Therapist data submitted on agreeable form (developed by therapist and MA) should include:
 - i. Student name
 - ii. DOB
 - iii. Medicaid #
 - iv. ICD 9 code
 - v. IEP frequency and dates
 - vi. Month of report
 - vii. Relevant CPT codes x date of service grid with minutes for each CPT if appropriate
 - viii. Signature/date line
 - On NC Tracks Provider Portal
 - i. Click on CLAIMS tab and select CREATE PROFESSIONAL CLAIM
 - ii. Complete Base information/ Ensure NPI and taxonomy populates correctly (click on drop down) LEA Taxonomy Code = 251300000X
 - iii. Enter student Medicaid ID# and Date range/month to be billed
 - iv. Click on VERIFY (bottom right)—if in error, click cancel and begin again (usually dates keyed incorrectly)
 - v. Enter student address
 - vi. Enter Claim information;
 1. Search/enter patient info
 2. Create account # for student (you create)
 3. Claim Frequency Type Code: 2-Interim First Claim (FC)
 4. Assignment of Benefit: YES
 5. Accept Code Assignment (A=Assigned)
 6. Place of service: 03-SCHOOL
 7. Provider signature on file (auto-populates= YES)
 8. Release of Information – YES=Signed
 9. Other fields auto-populate; click NEXT

10. Provider Information – click PERSON; then auto-populates all fields; Click NEXT
11. Add All Other Payers—click NO; click NEXT
12. Services –
 - a. Enter ICD 9 code—ADD
 - b. Enter CPT code--ADD
 - c. Pointers = enter used service lines above
 - d. Enter=
 - service date,
 - procedure,
 - pointer (to indicate ICD9 and CPT codes-1,2),
 - amount (input the cost to provide service or Medicaid allowable rate; 1% above allowable),
 - quantity (# of units or # of minutes),
 - quantity type (un-units or mj-minutes)
 - e. Modifiers, if two services on same date-enter 59
 - f. Save service line
 - g. Add additional service dates and data for claim
 - h. Double-check dates and codes
 - i. Click NEXT
 - j. Auto-populated- NO
 - k. RECORD claim status # (at the top) on therapy data sheet
 - l. Submit- will indicate errors (correct and re-submit)
- vii. Claim can be saved as draft before submitting
- viii. Claim status will show what has been entered/paid
- ix. Verify paid amount. If zero-problem with claim; click copy and check each field-correct and delete any services that were okay and re-submit; can save as draft if missing information (look in claims draft search-by last name)
- x. Use claim status to search for submitted claims and track status

- Payment is direct deposit; if in by Thursday at 5pm, will receive RA Tuesday and will pay into account following Wednesday
- MAC and COST REPORT are the actual money makers—if you're submitting monthly claims

Best Practices:

- Perform regular self-assessment to ensure documentation complies with Medicaid policy (<http://ec.ncpublicschools.gov/finance-grants/medicaid-in-education/resources> click on Self-Assessment under Medicaid Tools)
- Modify documentation to comply with Medicaid requirements
- Provide and document annual notice for FERPA to parent (see sample form, site above); we suggest with annual IEP review/update or over the summer (sent home with student in May so physician order can be processed during the summer break) this allows agreement for date range of all forms and saves postage
- Ensure LEA retains and can produce one copy (or original) of the following for each student, **for 5 years from the date of service:**
 - The student's full name and Medicaid identification number
 - A copy of current IEP for each year
 - A copy of the physician's order for service (as medically necessary); date of order must precede date of billed service

- A copy of current license for each service provider
 - A note for each billed service, must include:
 - Record of intervention and outcome/response/progress
 - If speech session-note if group or individual session
 - Date of service
 - Duration of service, time in minutes
 - Signature of service provider with credentials
 - Each progress note for scheduled reporting periods
 - Copy of tests performed, written evaluations
- Each month on the 5th go to Medicaid website <http://www.dhhs.state.nc.us/dma/>
- Click on Provider Links
 - Click on Bulletins (immediately under Information for Medicaid Providers)
 - Click on accept for disclaimer
 - Check Special Bulletins
 - Click on General Bulletins
 - Click on Month
 - Look for any bulletins for all providers or LEAs
 - Read them and modify procedures/practices as appropriate
- The LEA is responsible for remaining updated!

NOTE

If you are concerned about being required to pay back Medicaid funds, hold a portion in reserve.