



HEALTH DEPARTMENT

Children's Services Unit

PRE-SCHOOL "GUIDELINES"

The following billing procedures apply to Center Based and SEIT services provided to children ages 3-5 eligible under section 4410 of the New York State Education Law.

Rates: Essex County will pay the most recent NY SED approved rate for Center Based and SEIT services.

Enrollment Policy for Billing: The child must be physically present at or legally absent from the program, beginning on or after the approved CPSE start date, for three consecutive days in the same week and in the same month in order to begin billing. Legal absences are defined in section 175.6 of the Commissioner's Regulations and include personal illness, illness or death in the family, impassable roads or weather, religious observance, quarantine, required court appearance, or attendance at health clinics. The child will be considered to be enrolled, for billing purposes, until the child is discharged, or the last week that the child was physically present at or legally absent from program for three consecutive days in the same week and in the same month.

Notification and reason for absence must be given to the Director, Children with Disabilities Program in the event that a child is absent from the program for FIVE CONSECUTIVE DAYS. Such notification must be given on the business day following the fifth consecutive absence.

Written evidence of the reason for the absence must accompany any billing for the first or last week of program during which the child is not physically present at the program.

Session Notes (Medicaid Requirement): Service providers must maintain contemporaneous records. Session notes specifically document that the servicing provider delivered certain diagnostic and/or treatment services to a student on a particular date. Session notes must be completed by all qualified providers furnishing the services authorized in a student's IEP for *each Medicaid service delivered* and must include:

- Student's name
- Specific type of service provided
- Whether the service was provided individually or in a group
- The setting in which the service was rendered (school, clinic, other)
- Date and time the service was rendered (length of session)
- Brief description of the student's progress made by receiving the service during the session
- Name, title, signature and credentials of the servicing provider and signature/credentials of supervising clinician as appropriate

Medicaid providers must prepare and maintain contemporaneous records that demonstrate the provider's right to receive payment under the Medicaid program. "Contemporaneous" records means documentation of the services that have been provided as close to the conclusion of the session as practicable. In addition to preparing contemporaneous records, providers in the Medicaid program are required to keep records necessary to disclose the nature and extent of all services furnished and all information regarding claims for payment submitted by, or on behalf of, the provider for a period of six years from the date the care, services or supplies were furnished or paid, whichever is later.

Providers should use the "format" provided by Essex County any deviation from the original Essex County form may result in returned documentation for corrections.

Contact the Director of Children with Disabilities Services for approval if you are changing form.

CB CPT Code: You will enter the CPT Code at the end of the session note

Progress Notes (IDEA Requirement): Progress notes are completed, at a minimum quarterly, by the service provider and must include:

- The present level of performance of the student,
- The progress that the student is making toward meeting projected outcomes of goals, and/or objectives of health related services as specified on the IEP.

Progress notes are required, under IDEA and Part 200 of the Commissioner's Regulations, for each reporting period. An annual review that contains progress notes by appropriate providers, qualifies as one progress note.

Attendance and Therapy Reports:

- **Center Based Attendance and Therapy Report : Proper forms are completed.**
- **Essex County Original - SEIT Attendance and Therapy Report/Parent Signature Log .**

Billing:

1. Billing for the Children with Special Needs Program is submitted on a monthly basis. All vouchers must be submitted within thirty days. Vouchers submitted after three months will not be accepted for payment.
2. The completed billing packet consists of:
 - a. One County voucher completed in accordance with the attached instructions, for each voucher
 - b. One Attendance and Therapy Report per child per month listed on the voucher.
 - No copies are needed, submit only originals.
 - Days of attendance **MUST** be added on the Center Based Attendance and Therapy Report.
 - No white out is allowed. Providers must initial errors.
 - Do not submit separate attendance sheets for children in center based services who receive 1:1 aides.
 - c. CPSE Quarterly Progress Report for each child
 - d. **For all services (speech, occupational therapy, physical therapy, etc.) requiring a written order/referrals, a copy of the order for each child must be included with the child's first monthly billing packet.**
 - e. **All daily session notes for all sessions completed.**

Group Vs Individual sessions:

75. Q. If the IEP only states group therapy, but both individual and group services were provided, what can the school district, county or §4201 school bill for?

A. You may only bill for ordered services that are included on the IEP. If only group therapy is indicated on the IEP, then Medicaid reimbursement is only available for group therapy. An example would be when a group of four students is scheduled, but only one student shows up. Because a group is defined for reimbursement purposes as two or more, you may not bill this as group. Since this student's IEP only states group, you may not bill for the individual session either because it is not in the IEP.

SO.... the answer to the question is what ever the IEP states is what you will be paid for....you can tell by the above question the County will not be reimbursed at all if the group is not more than two children. Also it follows if the IEP states individual you can NOT do a group session without amending the IEP.

Signatures:

1. All signatures must be original; photocopies are not acceptable.
2. Parent/Caregiver signatures are needed for each session the child is seen outside the classroom setting.
3. Provider must write signature, credentials, and date on each form.