

Billing for Nursing and Health Services

School-Based Health Care Services (SBHS) Program
2023

Training overview

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Note: A PDF of this training with active hyperlinks is available on the SBHS webpage:
www.hca.wa.gov/sbhs

SBHS Program Overview

What is the SBHS program?

The School-Based Health Care Services (SBHS) program is an optional Medicaid program which provides reimbursement to contracted school districts, educational service districts, charter and tribal schools for providing health-related services to students with individualized education programs (IEPs) or individualized family service plans (IFSPs).

SBHS overview

- The SBHS program is administered by the Health Care Authority (HCA)
- HCA is the single state agency responsible for administering the state's Medicaid (Apple Health) program as well as the public employee/school employee health benefits programs
- HCA's SBHS Program Manager, Shanna Muirhead, is the main contact for the SBHS program
- Receiving services through SBHS does not affect services a child receives outside of school

Eligible Providers

SBHS eligible nursing providers

The following individuals are eligible to participate in the SBHS program:

- ▶ Department of Health (DOH)-licensed registered nurse (RN)
- ▶ DOH-licensed advanced registered nurse practitioner (ARNP)
- ▶ DOH-licensed practical nurse (LPN)
- ▶ Non-licensed school staff (e.g., aide, paraeducator)

Note: LPNs and non-licensed school staff must be supervised by a DOH-licensed RN or ARNP per their scope of practice with DOH and/or OSPI.

Requirements for licensed nursing professionals

The following applies to RNs, ARNPs, and LPNs:

- ▶ RNs, ARNPs, and LPNs must hold active and unrestricted licensure with the WA State Department of Health (DOH) as a nursing professional
- ▶ Must have a National Provider Identifier (NPI)
 - ▶ Providers can apply for an NPI through the Federal government at the [NPPES website](#)
- ▶ RNs, ARNPs, and LPNs must be enrolled as a servicing provider under the school district's ProviderOne account
- ▶ LPNs must practice under the direction of a DOH-licensed RN or ARNP per their scope of practice

ProviderOne

- ▶ All licensed RNs, ARNPs, and LPNs participating in SBHS must be enrolled as a servicing provider under the school district's ProviderOne account
 - ▶ Non-licensed individuals practicing under the supervision of a DOH-licensed RN/ARNP do not need to be enrolled in ProviderOne
 - ▶ All services provided by non-licensed individuals are billed under the supervising RN's or ARNP's NPI in ProviderOne
- ▶ Nurses do not need log-in access to ProviderOne

ProviderOne is WA State's electronic Medicaid billing system.

Delegated nursing tasks

- ▶ ARNPs and RNs may delegate certain nursing tasks to LPNs or non-licensed school staff per their scope-of-practice
 - ▶ Delegated nursing tasks performed by LPNs are billed under the LPN's NPI
 - ▶ Delegated nursing tasks performed by non-licensed school staff are billed under the supervising RN's or ARNP's NPI
 - ▶ The supervising ARNP or RN must sign off on all treatment notes kept by LPNs and non-licensed school staff

Supervision requirements

- ▶ Services provided by LPNs and non-licensed school staff must be supervised by a DOH-licensed RN or ARNP per their scope of practice
 - ▶ DOH supervision requirements can be found in [Chapter 18.79 RCW](#) and [Chapter 246-840 WAC](#)
 - ▶ OSPI supervision requirements can be found on OSPI's [website](#) and at OSPI [Chapter 28A.210 RCW](#)
- ▶ In addition, Medicaid requires that the supervising provider review and sign off on all treatment notes maintained by LPNs and non-licensed school staff

Eligible Students

Which students can I bill for?

In order for the school district to receive reimbursement through the SBHS program, students must:

- ▶ Be ages birth through age 2 (IDEA-Part C) with eligible services included in an IFSP
- ▶ Be ages 3 through age 20 (IDEA-Part B) with eligible services included in an IEP
- ▶ Have active Title-XIX Medicaid at the time of service delivery
- ▶ Have a parent or guardian give consent to bill to the school district (per IDEA)

Note: Providers should work with the school district's SBHS coordinator to obtain a list of eligible students

Where can services be provided?

In addition to the school setting, the SBHS program pays for services that are provided in the following settings:

- ▶ Natural setting (e.g., home, daycare, childcare setting)
- ▶ Alternate setting in accordance with IDEA (e.g., school bus, field trip, hospital)
- ▶ Includes in-person services and services provided via telemedicine

Note: Nursing professionals can review the SBHS Billing Guide for a list of SBHS-eligible places of service (POS). Nursing professionals must ensure they document where services are provided to ensure the correct information is entered on the claim in ProviderOne.

Covered and Non-Covered Services

Covered services

- ▶ Evaluations and re-evaluations to determine if a student requires health related services per an IEP or IFSP
- ▶ Health related services included in the student's IEP or IFSP limited to:
 - ▶ Audiology services
 - ▶ Mental health services
 - ▶ **Nursing/health services**
 - ▶ Occupational therapy services
 - ▶ Physical therapy services
 - ▶ Speech-language therapy services

Examples of covered IEP/IFSP nursing services

- ▶ Blood glucose testing and analysis
- ▶ Bowel/diarrhea care
- ▶ Colostomy care
- ▶ Catheterization care
- ▶ Chest wall manipulation/postural drainage
- ▶ Diaper changes
- ▶ Dressing/wound care
- ▶ Feeding by hand
- ▶ IV care/feedings
- ▶ Medication administration
- ▶ Nebulizer treatment
- ▶ Pump feeding
- ▶ Seizure management
- ▶ Stoma care
- ▶ Testing oxygen saturation levels
- ▶ Tracheotomy care
- ▶ Tube feedings
- ▶ Vital signs monitoring

This list of nursing services is not exhaustive. Nurses may contact HCA's SBHS program manager with questions regarding covered and non-covered nursing services.

Referral for services

- ▶ In order to receive Medicaid reimbursement, nursing services must be **ordered or prescribed by a licensed physician or *other* licensed health care provider** within their scope of practice.

- ▶ **ARNPs** can evaluate, diagnose, and provide services without a script from a physician within their scope of practice per:
 - ▶ Department of Health (DOH) regulations at [Chapter 246-840-300 WAC](#)
 - ▶ ARNPs should review DOH regulations to ensure they refer and provide services per their scope of practice

Referral for services, cont.

- ▶ Per their scope of practice, RNs and LPNs are not allowed to prescribe services
 - ▶ Services are also not Medicaid reimbursable if prescribed or recommended by a non-licensed school professional (e.g., school nurse who doesn't hold DOH licensure)
- ▶ If the district does not have an ARNP or physician on staff who can prescribe IEP/IFSP nursing services, a note or referral from the student's primary care physician must be in the student's file
- ▶ The referral/note must justify the medical necessity of the nursing/health IEP/IFSP services

Private duty nursing

- ▶ The SBHS program provides reimbursement to contracted school districts for direct IEP/IFSP services provided by ARNPs, RNs, LPNs, and non-licensed school staff
- ▶ If a student has a private duty nurse (PDN), the school district may be able to receive Medicaid reimbursement for services provided by the PDN as long as:
 - ▶ Nursing/health services are listed in the student's IEP or IFSP
 - ▶ The PDN is enrolled as a servicing provider under the school district's ProviderOne account
 - ▶ The PDN only bills for direct services provided to the student (the SBHS program does not pay for all-day nursing care/continuous observation when direct health services are not provided)

Non-covered services

- ▶ Applied behavioral analysis (ABA) therapy
- ▶ Attending meetings
- ▶ Charting
- ▶ Equipment preparation when student is not present
- ▶ Evaluations that do not result in an IEP or IFSP
- ▶ Instructional assistant contact
- ▶ Observation
- ▶ Parent consultation
- ▶ Parent contact
- ▶ Planning
- ▶ Preparing and sending correspondence
- ▶ Professional consultation
- ▶ Report writing
- ▶ Review of records
- ▶ School district staff accompanying a child to and from the school bus when services aren't provided
- ▶ Teacher contact
- ▶ Test interpretation
- ▶ Travel and transportation when services are not provided

Billing for Services

SBHS billable nursing codes

- ▶ The SBHS program utilizes three (3) nursing procedure codes
- ▶ A list and description of the billable nursing codes can be found in the [SBHS Billing Guide](#) under the *Coverage Table: Nursing Services* Section
- ▶ Codes are developed and owned by the American Medical Association (AMA)

SBHS billable nursing codes, cont.

Procedure Code	Description
T1001	Nursing assessment/eval
T1002	ARNP/RN services up to 15 minutes
T1003	LPN services up to 15 minutes

Providers should review the [SBHS Billing Guide](#) for detailed instructions on how to bill for nursing services. Current rates associated with each code are located in the [SBHS Fee Schedule](#).

Billing for nursing evaluations

- ▶ ARNPs and RNs bill code **T1001** (nursing assessment/evaluation) when performing IEP/IFSP assessments/evaluations to determine if a student needs or continues to need nursing services as part of an IEP/IFSP
- ▶ The SBHS program only provides reimbursement for nursing evaluations/re-evaluations when the evaluation results in an IEP/IFSP that contains nursing/health services

Note: Only ARNPs and RNs can use code T1001. LPNs and non-licensed staff cannot use this code.

Billing for direct nursing services

- ▶ ARNPs and RNs bill code **T1002** (ARNP/RN services up to 15 minutes) when providing direct IEP/IFSP nursing services to a student
 - ▶ Services provided by non-licensed staff (e.g., para, aide) are billed using code T1002 under the supervising ARNP or RN's NPI in ProviderOne
- ▶ LPNs bill code **T1003** (LPN services up to 15 minutes) when providing direct delegated nursing services to a student
- ▶ If the nursing professional sees a student multiple times throughout the day, a separate treatment note is required for each encounter
 - ▶ Time-in/time-out is required for each encounter
 - ▶ A minimum of 8 minutes of service must be provided in order to bill for 1 unit

Billing for direct nursing services, cont.

- A minimum of 8 minutes of service must be provided in order to bill for one unit of codes T1002 and T1003
- Based on the amount of time the student is seen throughout the day will determine the total # of billable units:

Minutes	Units
0 min-7 mins	0 units
8 mins-22 mins	1 unit
23 mins-37 mins	2 units
38 mins-52 mins	3 units
53 mins-67 mins	4 units
68 mins-82 mins	5 units

Note: More information on how to bill for timed and un-timed codes can be found in the [SBHS billing guide](#).

Example 1

Sarah receives nursing services per her IEP. On Monday she visits the school RN four times as follows:

9:00-9:05 (5 minutes of code T1002)

10:31-10:42 (11 minutes of code T1002)

1:14-1:34 (20 minutes of code T1002)

2:00-2:04 (4 minutes of code T1002)

40 total timed minutes = 3 units

Minutes	Units
0 min-7 mins	0 units
8 mins-22 mins	1 unit
23 mins-37 mins	2 units
38 mins-52 mins	3 units
53 mins-67 mins	4 units
68 mins-82 mins	5 units

Appropriate billing for 40 minutes is 3 units. Although the nursing services provided between 9:00-9:05 and 2:00-2:04 equaled less than 8 minutes, the total billable minutes for Monday equals 40 minutes which is equivalent to 3 units.

Example 2

Joseph's IEP states he requires daily nursing services (medication administration):

Day	Time-in/ Time-out	Service Provided	Provider Type	# of Reimbursable Units	Comments
Monday	9:00-9:05	Medication administration	RN	5 minutes of service provided = 0 units	The nurse cannot bill for Monday's services as a minimum of 8 minutes is required to bill for code T1002.
Tuesday	9:00-9:05 and 1:00-1:10	Medication administration	Paraeducator (RN has delegated task per scope of practice)	15 minutes of service provided = 1 unit	The supervising nurse will bill for 1 unit of T1002.
Wednesday	9:00-9:15	Medication administration	LPN (RN has delegated task per scope of practice)	15 minutes = 1 unit	The LPN will bill for 1 unit of T1003.
Thursday	10:00-10:08	Medication administration	RN	8 minutes = 1 unit	The nurse will bill for one unit of T1002 because at least 8 minutes of services was provided.
Friday	9:00-9:15/ 1:00-1:15 for scraped knee	Medication administration/ scraped knee	RN	15 minutes = 1 unit	The nurse can only bill for the IEP service (medication admin) performed from 9:00-9:15.

Example 3

- ▶ Johnny's IEP states he requires nursing services 45 min, 4x/day
- ▶ To calculate billing units for nursing services, the nurse must keep track of time-in/time-out for services provided to Johnny for each school day and divide by 15 to convert to billable units of service per day.
 - ▶ If your district contracts with a third-party biller, this may be automatically calculated in the electronic treatment note system.
- ▶ In this example, the nurse would submit a claim for **12 units/day** (45 min = 3 units. 3 units times 4 x/day = 12 total units)

Example 4

- ▶ Maria's IEP states she requires 420 minutes of nursing services, every day
- ▶ The SBHS program does not pay for continuous observation of a child when direct health care services are not provided
- ▶ To calculate billing units for nursing services, the nurse must keep track of time-in/time-out for services provided to this student for each school day and divide by 15 to convert to billable units of service per day.

Diagnosis code

- ▶ The SBHS program utilizes one diagnosis code:
 - ▶ R69 (illness, unspecified)
- ▶ The diagnosis code must be entered on each claim in ProviderOne
- ▶ This is added to the claim by the district's third-party biller or the district's SBHS Medicaid coordinator

Time limits to submit claims

- ▶ Providers must submit the initial claim to HCA within **three hundred sixty-five calendar days** from the date the provider furnishes the service to the eligible student
- ▶ **Within twenty-four months** of the date the service, a provider may resubmit, modify, or adjust an initial claim that was assigned a transaction control number (TCN)

Note: Your district may have stricter timelines for treatment note submission to ensure claims are entered into ProviderOne in time.

Documentation Requirements

Documentation requirements

- ▶ Medicaid requires providers to keep treatment notes/service logs that justify billed claims
- ▶ Providers must document all services as specified in the [SBHS Billing Guide](#)
- ▶ Treatment notes must be maintained for six (6) years from the date of service
- ▶ Treatment notes may be kept in an electronic or handwritten format

Treatment notes

Treatment notes must contain the following information:

- ▶ Student's name
- ▶ Student's date of birth
- ▶ Students Medicaid (ProviderOne) ID
- ▶ Date of service and for each date of service:
 - ▶ Time-in/Time-out
 - ▶ Procedure code
 - ▶ Description of service provided
 - ▶ Child's progress to each service
 - ▶ Note whether individual or group therapy
- ▶ Provider's printed name, title, and handwritten or electronic signature

Treatment notes, cont.

District uses third-party biller

- ▶ ARNPs, RNs, LPNs, and non-licensed school staff document all services electronically
- ▶ Supervising ARNP or RN review and co-sign treatment notes kept by LPNs and non-licensed staff
- ▶ Third party biller uploads information from the treatment note into ProviderOne as a billable claim

District self-bills

- ▶ ARNPs, RNs, LPNs, and non-licensed school staff document services provided in either handwritten or electronic treatment notes
 - ▶ Best practice: All providers within the district use the same treatment note template
- ▶ Supervising ARNP or RN review and co-sign treatment notes kept by LPNs and non-licensed staff
- ▶ District's SBHS Medicaid Coordinator enters information from the treatment note into ProviderOne as a billable claim

Telemedicine

What is telemedicine?

Telemedicine is when a health care provider uses HIPAA-compliant, interactive, real-time audio and video telecommunications (including web-based applications) to deliver covered services that are within the provider's scope of practice to a student at a site other than the site where the provider is located.

Telemedicine

- ▶ The SBHS program pays for nursing evaluations (T1001) when provided through HIPAA-compliant audio/visual and audio-only telemedicine
- ▶ Direct nursing services (T1002 & T1003) are not reimbursable when provided through telemedicine

Note: HCA and HCA's SBHS Program Manager cannot provide guidance on whether the telemedicine platform your district uses is HIPAA-compliant. Providers are encouraged to consult with the district's SBHS Medicaid Coordinator to ensure the telemedicine platform used is HIPAA-compliant.

Telemedicine documentation requirements

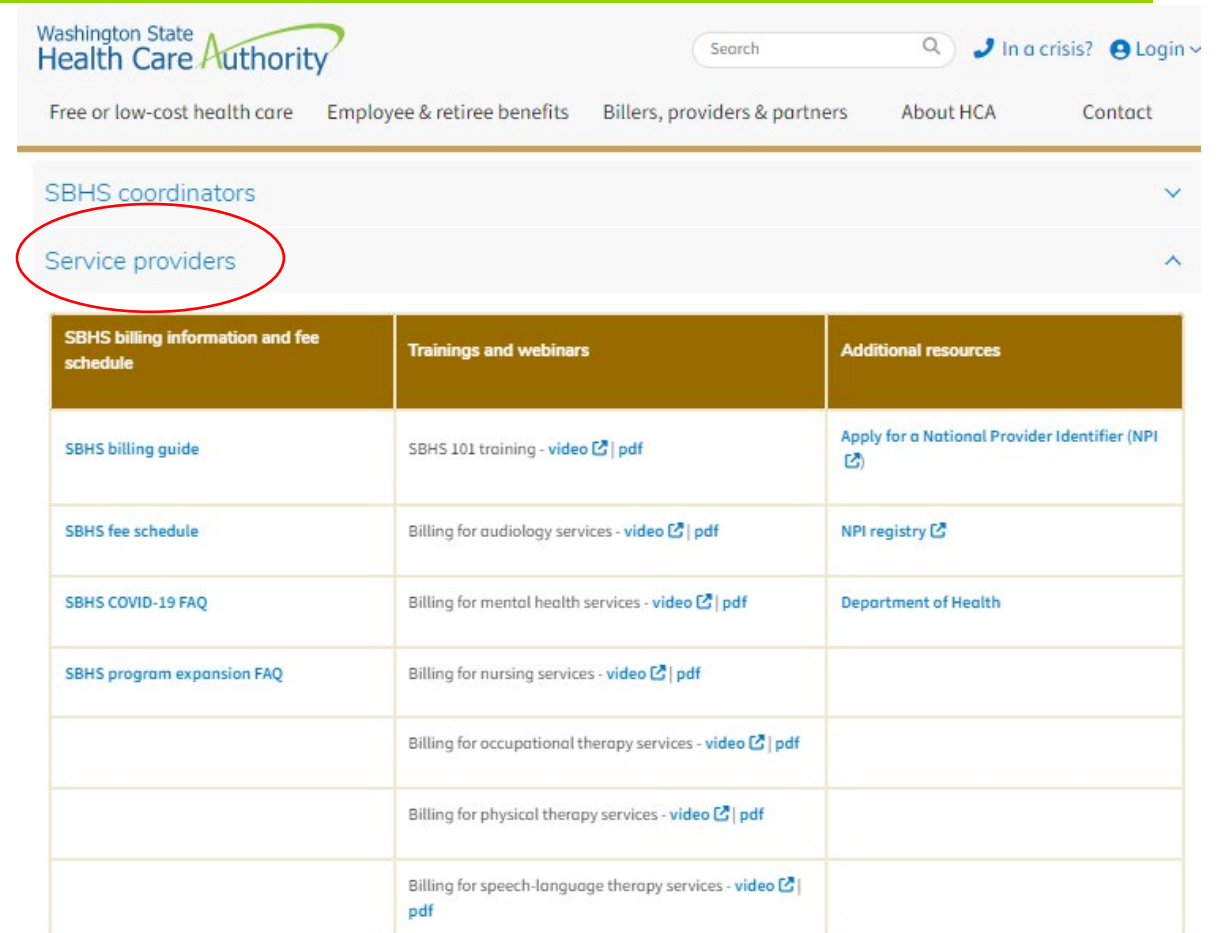
- ▶ In addition to the documentation requirements outlined in the [SBHS Billing Guide](#) and in Slides 34-37 of this training, when providing services through telemedicine, providers must also document:
 - ▶ The location of the student
 - ▶ The location of the provider
 - ▶ The type of platform used (i.e., HIPAA-compliant audio/visual platform or audio-only)

Resources

Resources for nursing professionals

- ▶ SBHS Billing Guide
- ▶ PDF and recording of this training
- ▶ Link to DOH website
- ▶ Link to NPI registry
- ▶ Past program notifications
- ▶ SBHS program contact information

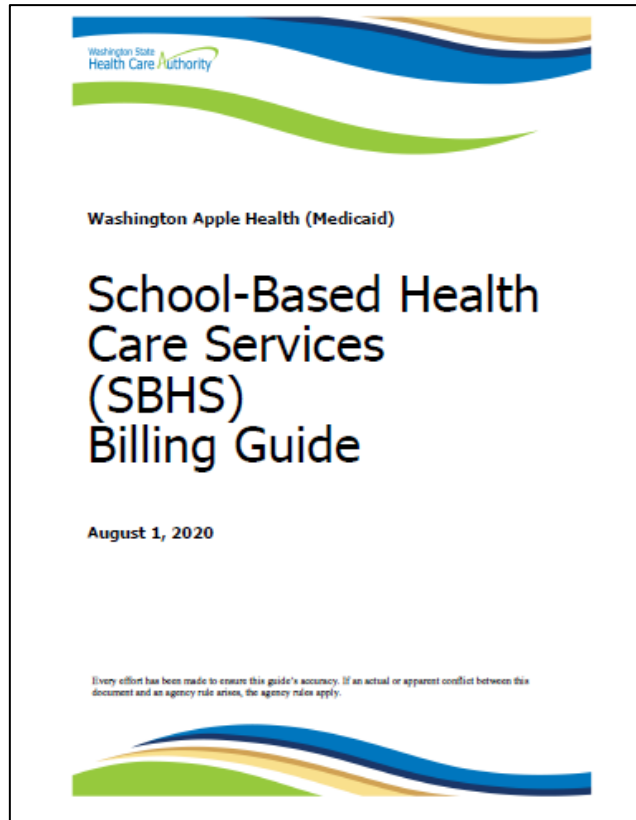
SBHS webpage:
www.hca.wa.gov/sbhs



The screenshot shows the Washington State Health Care Authority website. The top navigation bar includes the logo, a search bar, and links for 'In a crisis?' and 'Login'. Below the navigation bar, there are links for 'Free or low-cost health care', 'Employee & retiree benefits', 'Billers, providers & partners', 'About HCA', and 'Contact'. A dropdown menu is open under 'SBHS coordinators', with 'Service providers' highlighted and circled in red. Below the menu is a table with three columns: 'SBHS billing information and fee schedule', 'Trainings and webinars', and 'Additional resources'.

SBHS billing information and fee schedule	Trainings and webinars	Additional resources
SBHS billing guide	SBHS 101 training - video pdf	Apply for a National Provider Identifier (NPI)
SBHS fee schedule	Billing for audiology services - video pdf	NPI registry
SBHS COVID-19 FAQ	Billing for mental health services - video pdf	Department of Health
SBHS program expansion FAQ	Billing for nursing services - video pdf	
	Billing for occupational therapy services - video pdf	
	Billing for physical therapy services - video pdf	
	Billing for speech-language therapy services - video pdf	

SBHS Billing Guide

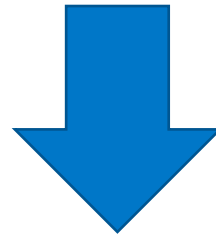


The SBHS Billing Guide is the program manual for SBHS. It contains:

- Program requirements
- Provider qualifications
- Billing requirements
- Billable codes
- Documentation requirements
- ...and more!

SBHS program notifications

- ▶ On the [SBHS webpage](#), providers can view past SBHS newsletters and notifications and can sign-up to receive SBHS notifications



SBHS quarterly newsletters and program notifications

SBHS sends updates via our email communications tool, GovDelivery.

[Sign up for email notifications](#)

Past notifications are available to view through our RSS feed.

[View past program notifications](#)

Please note: To view past program notifications on the Chrome browser, you will need to [install the RSS feed extension for Chrome](#). If viewing on the Microsoft Edge browser you will need to [install the RSS feed extension for Edge](#).

Additional resources

- ▶ Information included in today's training can be found in the [SBHS Billing Guide](#)
- ▶ Nursing professionals may also find the following resources helpful:
 - ▶ [National Association of School Nurses \(NASN\)](#)
 - ▶ Medicaid billing questions/scenarios
 - ▶ Discussions on school-based nursing
 - ▶ [School Nurse Organization of Washington \(SNOW\)](#)
 - ▶ Department of Health: [Nursing Care Quality Assurance Commission](#)
 - ▶ OSPI School Health Services [webpage](#)
 - ▶ [AMA CPT/HCPCS code information](#)

Questions?

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SBHS webpage: <https://www.hca.wa.gov/sbhs>

Disclaimer

This training is intended as guidance only for nursing professionals who participate in the School-Based Health Care Services (SBHS) program. The SBHS program provides reimbursement to contracted school districts for providing health related services that are included in a Medicaid eligible student's individualized education program (IEP) or individualized family service plan (IFSP). Information provided in this training does not supersede instructions and policy found in the SBHS Billing Guide, SBHS WAC, SBHS contract or other Federal and State Medicaid policies and procedures.