

SENATE

STATE OF MINNESOTA

EIGHTY-EIGHTH LEGISLATURE

S.F. No. 969

(SENATE AUTHORS: HOFFMAN, Bonoff, Nelson, Pratt and Franzen)

DATE	D-PG	OFFICIAL STATUS
03/04/2013	471	Introduction and first reading Referred to Health, Human Services and Housing

1.1

A bill for an act

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relating to education; authorizing medical assistance reimbursement for school

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social work and school psychological services included in a child's individualized

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education program; amending Minnesota Statutes 2012, section 256B.0625,

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subdivision 26.

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BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

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Section 1. Minnesota Statutes 2012, section 256B.0625, subdivision 26, is amended to

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read:

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Subd. 26. **Special education services.** (a) Medical assistance covers medical

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services identified in a recipient's individualized education program and covered under the

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medical assistance state plan. Covered services include occupational therapy, physical

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therapy, speech-language therapy, clinical psychological services, nursing services,

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school psychological services, school social work services, personal care assistants

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serving as management aides, assistive technology devices, transportation services,

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health assessments, and other services covered under the medical assistance state plan.

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Mental health services eligible for medical assistance reimbursement must be provided or

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coordinated through a children's mental health collaborative where a collaborative exists if

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the child is included in the collaborative operational target population. The provision or

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coordination of services does not require that the individualized education program be

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developed by the collaborative.

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The services may be provided by a Minnesota school district that is enrolled as a

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medical assistance provider or its subcontractor, and only if the services meet all the

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requirements otherwise applicable if the service had been provided by a provider other

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than a school district, in the following areas: medical necessity, physician's orders,

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documentation, personnel qualifications, and prior authorization requirements. In order

2.1 to receive reimbursement for the individual education program health-related mental
2.2 health services, school districts may use the evaluation or assessment used for emotional
2.3 or behavioral disorder, as defined in Minnesota Rules, part 3525.1329, in lieu of the
2.4 diagnostic assessment required as part of the children's therapeutic services and supports.
2.5 School districts may use the individualized education program, behavior intervention plan,
2.6 and student progress reviews in lieu of the individual treatment plan, crisis plan, and
2.7 90-day review required by children's therapeutic services and supports. The nonfederal
2.8 share of costs for services provided under this subdivision is the responsibility of the local
2.9 school district as provided in section 125A.74. Services listed in a child's individualized
2.10 education program are eligible for medical assistance reimbursement only if those services
2.11 meet criteria for federal financial participation under the Medicaid program.

2.12 (b) Approval of health-related services for inclusion in the individualized education
2.13 program does not require prior authorization for purposes of reimbursement under this
2.14 chapter. The commissioner may require physician review and approval of the plan not
2.15 more than once annually or upon any modification of the individualized education
2.16 program that reflects a change in health-related services.

2.17 (c) Services of a speech-language pathologist provided under this section are covered
2.18 notwithstanding Minnesota Rules, part 9505.0390, subpart 1, item L, if the person:

2.19 (1) holds a masters degree in speech-language pathology;

2.20 (2) is licensed by the Minnesota Board of Teaching as an educational
2.21 speech-language pathologist; and

2.22 (3) either has a certificate of clinical competence from the American Speech and
2.23 Hearing Association, has completed the equivalent educational requirements and work
2.24 experience necessary for the certificate or has completed the academic program and is
2.25 acquiring supervised work experience to qualify for the certificate.

2.26 (d) Medical assistance coverage for medically necessary services provided under
2.27 other subdivisions in this section may not be denied solely on the basis that the same or
2.28 similar services are covered under this subdivision.

2.29 (e) The commissioner shall develop and implement package rates, bundled rates, or
2.30 per diem rates for special education services under which separately covered services are
2.31 grouped together and billed as a unit in order to reduce administrative complexity.

2.32 (f) The commissioner shall develop a cost-based payment structure for payment of
2.33 these services. Only costs reported through the designated Minnesota Department of
2.34 Education data systems in distinct service categories qualify for inclusion in the cost-based
2.35 payment structure. The commissioner shall reimburse claims submitted based on an
2.36 interim rate, and shall settle at a final rate once the department has determined it. The

commissioner shall notify the school district of the final rate. The school district has 60 days to appeal the final rate. To appeal the final rate, the school district shall file a written appeal request to the commissioner within 60 days of the date the final rate determination was mailed. The appeal request shall specify (1) the disputed items and (2) the name and address of the person to contact regarding the appeal.

(g) Effective July 1, 2000, medical assistance services provided under an individualized education program or an individual family service plan by local school districts shall not count against medical assistance authorization thresholds for that child.

(h) Nursing services as defined in section 148.171, subdivision 15, and provided as an individualized education program health-related service, are eligible for medical assistance payment if they are otherwise a covered service under the medical assistance program. Medical assistance covers the administration of prescription medications by a licensed nurse who is employed by or under contract with a school district when the administration of medications is identified in the child's individualized education program. The simple administration of medications alone is not covered under medical assistance when administered by a provider other than a school district or when it is not identified in the child's individualized education program.

(i) School social work services, as defined in the practice of social work in section 148E.010, subdivision 15, and provided as an individualized education program health-related service, are eligible for medical assistance payment. School social work services include those services provided to assist the student or family members in understanding the nature of the disability, the special needs of the student, and the student's development. The services, as identified and described in the individualized education program include, but are not limited to: evaluations; social work services provided to children and youth with social, psychological, or behavioral problems; and unscheduled activities for the purpose of resolving an immediate crisis situation. School social work services are provided to youth and children with conditions that may impair or limit behavioral, cognitive, emotional, mental, or social functioning. School social work service, as an individualized education program health-related service, shall be billed as a separate service and not require children's therapeutic services and supports certification. School social work services shall be provided by a social worker that possesses both a social work license from the Board of Social Work and a school social work license from the Board of Teaching.

(j) School psychological services, as defined in Minnesota Rules, part 8710.6200, and provided as an individualized education program health-related service, are eligible for medical assistance payment. School psychological services include those services

4.1 provided to assist the student or family members in understanding the nature of the
4.2 disability, the special needs of the student, and the student's development. The services,
4.3 as identified and described in the individualized education program include, but are
4.4 not limited to: evaluations; psychological services provided to children and youth
4.5 with social, psychological, or behavioral problems; and unscheduled activities for the
4.6 purpose of resolving an immediate crisis situation. School psychological services are
4.7 provided to youth and children with conditions that may impair or limit behavioral,
4.8 cognitive, emotional, mental, or social functioning. School psychological service, as an
4.9 individualized education program health-related service, shall be billed as a separate
4.10 service and not require children's therapeutic services and supports certification. School
4.11 psychological services shall be provided by a school psychologist that possesses a school
4.12 psychological license from the Board of Teaching.