

San Joaquin County Office of Education



# MedASIST

Automated SEIS Integrated Service Tracking

*LOCAL EDUCATION AGENCY*

*MEDI-CAL BILLING OPTION PROGRAM*

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# What kinds of services can be billed to Medi-Cal?

Department of Health Care Services LEA Provider Manual

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❖ Direct Service billing is face-to-face time with the student(s) providing a medically necessary service.

## Audiology

- IEP/IFSP audiological assessments (evaluations)
- Non-IEP/IFSP hearing assessments
- Audiology treatment and hearing checks

## Nursing and School Health Aide Services

- IEP/IFSP health assessments
- Non-IEP/IFSP health/nutrition assessments, health education/anticipatory guidance and vision assessments
- Nursing and school health aide treatment services

## Occupational and Physical Therapy

- IEP/IFSP occupational and physical therapy assessments
- Non IEP/IFSP developmental assessments
- Occupational and physical therapy treatment services \*must have a prescription from the students treating physician

## cont. What kinds of services can be billed to Medi-Cal?

[Department of Health Care Services LEA Provider Manual](#)

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### ❖ Parent consent is required to bill Medi-Cal.

*Additionally, LEAs are required to provide parents with annual written notification of their rights.*

[AB 114](#)

#### Psychology/Counseling Services

- IEP/IFSP psychological assessments and psychosocial status assessments
- Non –IEP/IFSP psychosocial status assessments and health education/anticipatory guidance
- Individual and group counseling treatments

#### Speech Therapy Services

- IEP/IFSP speech language assessments
- Non IEP/IFSP developmental and/or hearing assessments
- Individual and group treatment services including telehealth

#### Transportation Services

- Medical transportation trip & mileage

#### Vision

- Non-IEP/IFSP vision assessments

# IEP/IFSP Assessments

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❖ Reimbursement is for the assessment conducted, not for attending an IEP meeting.

## **The following activities are required in an Initial/Triennial assessment:**

- Review student records, such as cumulative files, health history, and/or medical records.
- Interview the student and/or parent/guardian.
- Observe the student in the classroom and other appropriate settings.
- Schedule and administer psychosocial tests, developmental tests, and/or physical health assessments. Score and interpret test results, as applicable.
- Write a report to summarize assessment results and recommendations for additional LEA services.

## **The following activities are required in an Annual/Amended assessment:**

- Review student records, such as cumulative files, health history, and/or medical records.
- Interview the student and/or parent/guardian.
- Observe the student in the classroom and other appropriate settings.
- Write a report to summarize assessment results and recommendations for additional LEA services.

*The written assessment report and related case notes should be maintained to document activities performed for each IEP/IFSP assessment.*

# Prescriptions, Referrals & Recommendations

[http://www.dhcs.ca.gov/provgovpart/Documents/ACLSS/LEA/Training/2016\\_UPDATED\\_LEA\\_BOP\\_Training.pdf](http://www.dhcs.ca.gov/provgovpart/Documents/ACLSS/LEA/Training/2016_UPDATED_LEA_BOP_Training.pdf)

❖ Units are billed  
in 15 minute  
increments

*Must be 7 or more  
continuous minutes and  
cannot add smaller time  
increments to make a unit*

## AUTHORIZATION FOR ASSESSMENT

All LEAs must document all assessments  
with either:

- A written prescription, referral or recommendation
- In substitution, a parent, teacher or registered credentialed school nurse can refer the student for an assessment
- The prescription, referral or recommendation must be documented in the student's file

## AUTHORIZATION FOR TREATMENT

The necessity of treatment services are usually  
identified in the IEP/IFSP and include:

- Service type(s)
- Frequency of services(s)
- Duration of service(s)
- Prescriptions/referrals can be documented by the IEP/IFSP if signed by the appropriate referring provider

REMEMBER... A parent, teacher or registered credentialed school nurse can request an evaluation, as well. If the parent is making the referral for assessment, the written request should be included in the student's file, and should include the parent's signature and date.

# Nursing and Trained Health Care Aides Documentation Requirements

[Nursing and Trained Health Care Treatment FAQs.pdf](#)

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❖ THCAs may only provide services and bill under the supervision of a Registered Credentialed School Nurse, Public Health Nurse or Licensed Physician

## Documentation including time in/time out must occur for each unit billed

- Documentation for Nursing/THCA services must:
  - Be objective:
    - What was done, seen, heard or felt
  - Be factual, accurate and specific based on:
    - IEP goals
    - Physicians orders
    - Nursing protocols
  - Identify the presence as well as an absence of characteristics
    - Every undesirable observation has at least one possible corresponding favorable observation
- All service documentation should include the following:
  - A brief description of the activity
  - An outcome statement (what happened)
  - An objective measure (or professional reflection) of the individual student's response to the activity and progress toward the IEP/IFSP goal

# Documentation Requirements & How to Stay Compliant

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❖ Documentation must fully disclose the type and extent of services and answer the questions -

## **What was done and why?**

- May reference the IEP/IFSP goals or protocols

## **How much?**

- Time, miles, feeding, medication

## **How is the student progressing or did they respond to intervention?**

- Context important

## **Was any intervention or additional action taken or planned?**

- Next steps

# Auditors Look For...

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## ❖ Documentation Requirements & How to stay audit compliant

### **Documents that can stand alone** (i.e., contain all of the elements listed below)

- Date of service
- Full name of student, birth date, Medi-Cal ID number
- Name of LEA billing the service and place of service
- Nature and extent of services clearly documented, i.e., assessment reports and treatment notes meet at least the minimum professional standards for the specific practitioner type and verify the medical necessity and quality of service
- For services paid based on time: document start time, stop time and total time spent with student
- Name, title and signature(s) of practitioner(s) rendering the service
- Signature of supervisor whenever supervision is required

### **Supporting documentation**

- Prescriptions and referrals
- Progress/therapy notes
- Treatment logs



# Looking Ahead

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## ❖ Pending SPA 15-021 Expansion of covered services and practitioners

### **State Plan Amendment (SPA) 15-021 includes:**

- Coverage of Medi-Cal eligible students under the age of 22, regardless of special education status

### **Proposed New Services:**

- Activities of daily living services
- Nutritional services
- Occupational therapy group services
- Orientation and mobility services
- Physical therapy group services
- Respiratory therapy services

### **Proposed New Qualified Practitioners:**

- Occupational Therapy Assistants
- Orientation and Mobility Specialists
- Physician Assistants
- Physical Therapy Assistants
- Registered Associate Clinical Social Workers
- Registered MFT Interns
- Speech Language Pathology Assistants

# Reimbursement Rates

Psychology/Counseling		
Assessment	Initial/Triennial	\$227.80
	Annual/Amended	\$75.93
Treatments: Individual	Up to 45 minutes	\$36.27
	Per additional unit	\$9.85
Treatments: Group	Up to 45 minutes	\$7.99
	Per additional unit	\$1.64
Speech		
Assessment	Initial/Triennial	\$108.24
	Annual/Amended	\$59.04
Treatments: Individual	Up to 45 minutes	\$32.80
	Per additional unit	\$9.84
Treatments: Group	Up to 45 minutes	\$12.03
	Per additional unit	\$3.28

Nursing		
Health Assessment	Initial/Triennial	\$66.35
	Annual/Amended	\$37.91
Nursing Treatments: (1 unit = 15 min)	RN	\$9.48
	LVN	\$4.78
	Health Care Aide	\$4.03
Occupational Therapy		
Assessment	Initial/Triennial	\$115.63
	Annual/Amended	\$80.30
Treatments: Individual	Up to 45 minutes	\$38.14
	Per additional unit	\$10.04

Physical Therapy		
Assessment	Initial/Triennial	\$124.65
	Annual/Amended	\$86.57
Treatments: Individual	Up to 45 minutes	\$34.62
	Per additional unit	\$10.82
Audiology		
Assessment	Initial/Triennial	\$87.57
	Annual/Amended	\$65.68
Treatments: Individual	Up to 45 minutes	\$40.14
	Per additional unit	\$10.94
Transportation		
Specialized transportation	Each round trip encounter	\$8.95
	Mileage	\$0.63

# Contact Us

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