



State of California—Health and Human Services Agency
Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

DATE: August 11, 2020

PPL No. 20-039

TO: Local Educational Agency (LEA)

SUBJECT: NOTIFICATION OF NEW SERVICES AND NEW PRACTITIONERS IN
THE LOCAL EDUCATIONAL AGENCY MEDICAL BILLING OPTION
PROGRAM (LEA BOP)

This Policy and Procedure Letter (PPL) notifies LEAs that new services and new practitioners will be integrated into the LEA BOP. The policy in this PPL is retroactive to July 1, 2015, the effective date of the State Plan governing LEA services.

State Plan Amendment (SPA) 15-021 was approved by the Centers for Medicare and Medicaid Services (CMS) on April 27, 2020. This SPA expands access to federal Medicaid funds for LEAs, through the following three primary changes: (1) incorporating a Random Moment Time Survey (RMTS) into the cost settlement process, (2) adding new service practitioners and new services covered under the LEA BOP, and (3) expanding the population covered under the LEA BOP to include Medicaid beneficiaries outside of special education, including mandated screenings¹, those covered by an Individualized Health and Support Plan (IHSP) or “Care Plan”². This PPL covers the changes that will take place due to the integration of new LEA BOP covered services and practitioners.

Optional Retroactive Billing back to July 1, 2015

LEAs may choose to bill for the new services and new practitioners retroactive to July 1, 2015, but are not required to do so. LEAs that choose to bill retroactively must meet all SPA 15-021 requirements, including applicable authorization requirements and supervision requirements, and have documentation that treatment services were authorized via an IEP, IFSP, or IHSP. LEAs must have retained the required documentation for all services billed retroactive to July 1, 2015. For new services billed with dates of service on or after July 1, 2015, all billed practitioner costs and associated

¹ Mandated screenings based on *Early and Periodic Screening, Diagnostic and Treatment (EPSDT)*.

² A “Care Plan” is a medical management tool for providing medically necessary healthcare services to a student in a school setting. Other common names for a “Care Plan” are a nursing plan, IHSP, Plan of Care, Individualized School Healthcare Plan or 504 Plan.

reimbursement must be included in the relevant fiscal year Cost and Reimbursement Comparison Schedule (CRCS).

Attachment A - SPA 15-021 New Services and Attachment B - SPA 15-021 New Practitioners contain the new Current Procedural Terminology (CPT) codes, modifiers, and interim rates described in this PPL. Attachments to this PPL are provided to allow LEAs time to prepare their systems for Medi-Cal billing. **As of the publication date of this PPL, the claims processing system has not yet been modified to accept the new procedure codes and modifiers detailed on Attachment A and B. DHCS will provide confirmation when claims for new services and practitioners may be billed through the Department of Health Care Service's (DHCS) fiscal intermediary.**

Overview of New Services and New Practitioners

The expanded services under SPA 15-021 are as follows:

- New service categories:
 - Nutrition Services (assessments and treatment services)
 - Orientation and Mobility (assessments and treatment services)
 - Respiratory Care (assessments and treatment services)
- Expanded group services:
 - Group treatment services for both occupational therapy and physical therapy services.
- Expanded school health aide and nursing services:
 - Assistance with activities of daily living (ADL) is now an allowable service.

New qualified rendering practitioners under SPA 15-021 are:

- Associate Marriage and Family Therapist
- Occupational Therapy Assistant
- Orientation and Mobility Specialist
- Physical Therapist Assistant
- Physician Assistant
- Registered Associate Clinical Social Worker
- Registered Dietician
- Respiratory Care Practitioner
- Speech-Language Pathology Assistant

SPA 15-021 also expands services provided by previously LEA BOP approved practitioners. A list of these expanded services is located in Attachment B of this PPL.

Any LEA covered service that requires a physician's order (prescription, referral or recommendation) may come from the student's primary care physician or an LEA-employed or contracted physician. Effective for dates of service on or after **July 1, 2019**, LEAs may also obtain orders from a Nurse Practitioner (NP) or Physician Assistant (PA), in lieu of a physician's order. If a NP or PA writes the order for treatment services, they must do so in compliance with applicable State and federal laws, including the following:

- Authority has been delegated by the supervising physician to provide the covered benefit or service pursuant to their scope of practice.
- The supervising physician and PA/NP are both enrolled as Medi-Cal providers, pursuant to Article 1.3 (commencing with Section 14043) of Chapter 7, Part 3 of Division 9 of the California Welfare and Institutions Code.

The LEA Provider Manual Individual Service sections will be updated to reflect the Program policy that a prescribing health care provider does not need to personally evaluate the student to issue a referral or prescription. However, the prescribing health care provider must have a working relationship with the LEA and treating practitioner, and must review the student's records prior to referring or prescribing services.

Authorization for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services are based on the Bright Futures/American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care (Periodicity Schedule). In addition, health screenings required for all students by California Education Code or Health and Safety Code will be reimbursable at required intervals.

I. New Covered Services: Definitions and Requirements

Nutrition Services:

Nutrition services include nutrition assessment and nutrition education, consisting of assessments and non-classroom nutrition education delivered to the Medi-Cal enrolled student based on the outcome of the nutritional health assessment (diet, feeding, laboratory values, and growth).

Covered services include:

- Nutrition assessments (IEP/IFSP)
- Health/nutrition assessments (IHSP)
- Nutritional counseling treatments (individual service only)

Qualified practitioners and supervision requirements:

Qualified Practitioner *	Supervision Requirement
Licensed physician	No supervision required
Licensed physician assistant <i>with a written Practice Agreement from a licensed physician (16 CCR § 1399.540)</i>	Supervision required as indicated under Business and Professions Code § 3502.

Registered dietician	No supervision required
Registered credentialed school nurse Licensed registered nurse Certified public health nurse Certified nurse practitioner	No supervision required

**Rendering practitioner qualifications are included in Section III of this PPL.*

Authorization for services:

Assessments: Nutrition assessments require a written referral by a physician. In substitution of a written referral, a registered credentialed school nurse, teacher, or parent may refer the student for an assessment. The referral must be documented in the student's IEP, IFSP, or IHSP.

Treatments: Nutritional counseling treatment services require a written referral by a physician. The written referral, which must be maintained in the student's files, must be updated annually and is valid for one year from the date of the referral. The physician referral must be established and documented in the student's IEP, IFSP, or IHSP. If the student requires Medical Nutrition Therapy, as defined in *California Business and Professions Code Section 2586*, a written prescription by the referring physician must be on file.

Service limitations include:

- Nutritional counseling treatment services are limited to 24 units per student per day. (IEP/IFSP)
- Nutritional assessments are limited to four units per student per day. (IHSP)

Orientation and Mobility Services:

Orientation and mobility services are services provided to blind or visually impaired students by qualified personnel to enable those students to attain systematic orientation to and safe movement within their environments in school, home, and community; and include teaching students the following as appropriate:

1. Spatial and environmental concepts and use of information received by the senses (such as sound, temperature, and vibrations) to establish, maintain, or regain orientation and line of travel (for example, using sound at a traffic light to cross the street);
2. To use the long cane, as appropriate, to supplement visual travel skills or as a tool for safely negotiating the environment for students with no available travel vision;
3. To understand and use remaining vision and distance low vision aids, as appropriate; and
4. Other concepts, techniques, and tools as determined appropriate.

Covered services include:

1. Orientation and mobility assessments
2. Orientation and mobility treatments (individual service only)

Qualified Practitioners and Supervision requirements:

Orientation and mobility specialists provide orientation and mobility assessment and treatment services. There is no supervision required to provide these services. Orientation and mobility specialist qualifications are included in Section III of this PPL.

Authorization for services:

Assessments: Orientation and mobility assessments must be recommended by a physician or other licensed practitioner of the healing arts, within the scope of his or her practice under State law. In substitution of a written recommendation, a registered credentialed school nurse, teacher, or parent may refer the student for an assessment. The recommendation or parent/teacher/school nurse referral must be documented in the student's IEP, IFSP, or IHSP.

Treatments: Orientation and mobility treatment services require a written recommendation by a physician or other licensed practitioner of the healing arts, within the scope of his or her practice under State law. The written recommendation, which must be maintained in the student's files, must be updated annually and is valid for one year from the date of the recommendation. The recommendation must be established and documented in the student's IEP, IFSP, or IHSP.

Service limitations include:

- Orientation and mobility treatment services are limited to 24 units per student per day. (Authorized in an IEP/IFSP)
- Orientation and mobility assessments are limited to four units per student per day. (IHSP)

Respiratory Care Services:

Respiratory therapy practitioner services are medically necessary services rendered within the scope of practice of a respiratory care practitioner under the supervision of a physician. The services must be for the therapy, management, rehabilitation, diagnostic evaluation and care of patients with deficiencies and abnormalities, which affect the pulmonary system and associated aspects of cardiopulmonary and other systems functions. These services include, but are not limited to:

1. Direct and indirect pulmonary care services
2. Direct and indirect respiratory care procedures, including the administration of pharmacological, diagnostic and therapeutic agents necessary to implement treatment, disease prevention, pulmonary rehabilitation or diagnostic regimen prescribed by a physician and surgeon³
3. Observation and monitoring of signs and symptoms, general behavior and physiological responses to respiratory care treatment and diagnostic testing
4. Diagnostic and therapeutic services which may include:
 - a. Administration of medical gases (except general anesthetics), aerosols, humidification and environmental control systems
 - b. Pharmacologic agents related to respiratory care procedures
 - c. Mechanical or physiological ventilatory support
 - d. Bronchopulmonary hygiene
 - e. Cardiopulmonary resuscitation
 - f. Maintenance of natural airways
 - g. Insertion without cutting tissues and maintenance of artificial airways
 - h. Diagnostic and testing techniques required for implementation of respiratory care protocols

Covered services include:

1. Respiratory assessments (IEP/IFSP)
2. Respiratory assessments (IHSP)
3. Respiratory therapy treatments (individual service only)

Qualified practitioners and supervision requirements:

Licensed respiratory care practitioners may provide respiratory care services, and must work under the direction of a physician to provide those services. Respiratory care practitioner qualifications are included in Section III of this PPL.

³ *California Business and Professions code references physicians as a person holding a physician and surgeon's certificate issued by the Medical Board of California or by the Osteopathic Medical Board of California. For LEA BOP purposes, the title "physician and surgeon" and "physician" are synonymous and may be used interchangeably.*

Authorization for services:

Assessments: Respiratory assessments require a written prescription by a physician and surgeon. In substitution of a written prescription, a registered credentialed school nurse, teacher or parent may refer the student for an assessment. The physician prescription or parent/teacher/school nurse referral must be documented in the student's IEP, IFSP, or IHSP.

Treatments: Respiratory therapy treatment services require a written prescription by a physician and surgeon. The written prescription, which must be maintained in the student's files, must be updated annually and is valid for one year from the date of the prescription. The physician prescription may be established and documented in the student's IEP, IFSP, or IHSP.

Service limitations include:

- Respiratory treatment services are limited to 24 units per student per day. (authorized in an IEP/IFSP)
- Respiratory therapy assessments are limited to four units per student per day. (IHSP)

II. Expansion of LEA Service Categories

Group Treatment Services:

SPA 15-021 expands LEA service coverage to include physical and occupational therapy services provided in a group setting. Effective for dates of service on or after July 1, 2015, the following group services are a covered benefit:

- Occupational therapy (OT) treatment services in a group setting rendered by a qualified occupational therapist, or a qualified occupational therapy assistant who is providing services under the direction of a licensed occupational therapist.
- Physical therapy (PT) treatment services in a group setting rendered by a qualified physical therapist, or a qualified physical therapist assistant who is providing services under the direction of a licensed physical therapist.

For OT and PT treatment services, a group consists of two or more students. Although no maximum number of students in a group is mandated, practitioners are expected to follow professional practice standards when providing group OT and PT services. Supervision, prescription, and documentation requirements for these group services are the same as for individual occupational therapy and physical therapy services, detailed in the current LEA Provider Manual.

Assistance with Activities of Daily Living:

School health services include support furnished to a Medi-Cal enrolled student to assist in medically-necessary health-related functions and Activities of Daily Living (ADLs) related to the student's physical or mental health limitation due to a disability or health condition. Services and support include, but are not limited to:

- Hands on assistance with tasks such as eating, toileting, transferring, positioning, and mobility assistance;
- Cueing and directing the completion of an ADL task; and
- Observing, intervening, and redirecting the completion of an ADL task.

Instrumental Activities of Daily Living (IADLs), such as light housework, essential household chores, laundry, meal planning and preparation, grocery shopping, managing finances, and getting around and participating in the community, are not a covered benefit. Assistance with IADLs is not a reimbursable LEA BOP service.

ADL assistance services can be provided on a continuing basis or on episodic occasions. Services may be billed when seven or more continuous minutes of direct service are provided to a student. ADL assistance services that are provided continuously must be documented using 15-minute increments. ADL assistance services must be provided on a one-to-one basis and will not be allowed if the practitioner is engaged in other tasks. Only time spent face-to-face with the student is billable; indirect service time is not billable for ADL assistance services.

If there are times in the day when the student receives both ADL assistance and another covered service at the same time (e.g., ADL assistance services provided during an occupational therapy session), the ADL assistance minutes cannot also be billed.

Covered services include:

1. ADL assistance treatment services, pursuant to an IEP, IFSP, or IHSP (individual service only)

Qualified practitioners and supervision requirements:

ADL assistance services are provided by staff who have been trained and remain under the direction of skilled professional medical personnel. Services provided to the student by family members are not claimable for reimbursement in the LEA BOP. ADL assistance services may be provided by:

- Registered Credentialed School Nurses;
- Certified Public Health Nurses;
- Nurse Practitioners and Registered Nurses;

- Licensed Vocational Nurses, under appropriate supervision by a licensed Physician, Certified Public Health Nurse or Registered Credentialed School Nurse; or
- Trained Health Care Aides, under appropriate supervision by a licensed Physician, Certified Public Health Nurse or Registered Credentialed School Nurse.

The supervising practitioner's signature, title, and date of signature must be included on the nursing treatment log.

Authorization for services:

Treatments: ADL assistance treatment services require a written prescription by a physician. The written prescription, which must be maintained in the student's files, must be updated annually and is valid for one year from the date of the prescription. The physician prescription must be established and documented in the student's IEP, IFSP, or IHSP or maintained in the student's record.

Service limitations include:

- ADL assistance services authorized in an IEP, IFSP or IHSP are limited to 32 units per student per day.

III. New Qualified Rendering Practitioners

LEA assessments and treatment services must be performed by practitioners who meet the applicable qualification requirements and who render services within their scope of practice, as defined in State law.

SPA 15-021 includes a general change related to California Commission on Teacher Credentialing (CTC) requirements for qualified rendering practitioners of mental health services. All licensed mental health professionals⁴ must hold a valid pupil personnel services (PPS) credential issued by CTC, with the appropriate authorization for those services, or be appropriately supervised by a PPS-credentialed practitioner. The previous LEA BOP billing requirements were more restrictive and required all mental health practitioners to be licensed and hold a PPS credential.

Newly qualified rendering practitioners include:

- **Associate Marriage and Family Therapist:** Associate Marriage and Family Therapists must be registered with the California Board of Behavioral Sciences and requires supervision by a Licensed Marriage and Family Therapist, Licensed

⁴ *Mental health professionals include: Licensed Clinical Social Workers, Licensed Psychologists, Licensed Educational Psychologists, and Licensed Marriage and Family Therapists.*

Clinical Social Worker, Licensed Professional Clinical Counselor, Licensed Psychologist, or a Licensed Physician and Surgeon certified in psychiatry by the American Board of Psychiatry and Neurology. Associate Marriage and Family Therapists may also use the title Registered Associate Marriage and Family Therapist.

- **Occupational Therapy Assistant:** Occupational Therapy Assistants must be licensed to practice by the California Board of Occupational Therapy and requires supervision by a Licensed Occupational Therapist.
- **Orientation and Mobility Specialist:** Orientation and Mobility Specialists must be certified by the Academy for Certification of Vision Rehabilitation and Education Professionals (ACVREP) and possess a Clinical or Rehabilitative Services Credential in Orientation and Mobility.
- **Physical Therapist Assistant:** Physical Therapist Assistants must be licensed to practice by the California Physical Therapy Board and requires supervision by a Licensed Physical Therapist.
- **Physician Assistant:** Physician Assistants must be licensed by the California Physician Assistant Board, have a valid Practice Agreement, and work under the direction of a licensed physician and surgeon.
- **Registered Associate Clinical Social Worker:** Associate Clinical Social Workers must be registered with the California Board of Behavioral Sciences and requires supervision by a Licensed Clinical Social Worker, Licensed Marriage and Family Therapist, Licensed Professional Clinical Counselor, Licensed Clinical Psychologist, or Licensed Physician certified in Psychiatry by the American Board of Psychiatry and Neurology.
- **Registered Dietitian:** Dietitians must be registered through the Commission on Dietetic Registration.
- **Respiratory Care Practitioner:** Respiratory Care Practitioners must be licensed by the Respiratory Care Board of California.
- **Speech-Language Pathology Assistant:** Speech-Language Pathology Assistants must register with the Speech-Language Pathology and Audiology and Hearing Aid Dispenser Board and requires supervision by a Licensed Speech-Language Pathologist or a Credentialed Speech-Language Pathologist.

LEA BOP Provider Manual

Once published, the LEA BOP Provider Manual will include information on the new services and new practitioners. The revised Provider Manual will include all details for

participation requirements and must be the LEA's primary resource for LEA BOP-related policies.

If you have questions concerning this PPL, please contact DHCS by e-mail at LEA@dhcs.ca.gov.

Sincerely,

ORIGINAL SIGNED BY

Rick Record, Chief
Local Educational Agency Medi-Cal Billing Option Program

Enclosures:

Attachment A - SPA 15-021 New Services
Attachment B - SPA 15-021 New Practitioners