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Department of Health Care Services
LEA Medi-Cal Billing Option Program
Frequently Asked Questions (FAQs)



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Assessment Policy and Billing

****PLEASE REVIEW THE LEA MEDI-CAL BILLING OPTION PROVIDER MANUAL FOR COMPLETE LEA PROGRAM AND POLICY INFORMATION****

- Q1. When an IEP/IFSP health assessment takes more than one day to complete, should we bill for a new assessment each day or for one assessment over the course of two days?**
- A. For IEP/IFSP encounter-based assessments (physical therapy, occupational therapy, speech-language, audiological, health, and psychological), you will bill only one unit of service regardless of the amount of time it takes to complete the assessment. When billing for an assessment that takes multiple days to complete, there are two ways to bill 1) Use the date in which the assessment was completed, or 2) use the “from-through” billing method to record the dates over which the assessment was conducted. Additional information is located in the [loc ed bil](#) section (page 15) in the LEA Provider Manual.
- Q2. Can we bill for an assessment under both the LEA Billing Option Program and MAA Program billing?**
- A. No. This would be considered double dipping. When billing for assessments under the LEA Medi-Cal Billing Option Program, reimburse includes for report writing and travel time.
- Q3. If an IEP student receives an initial speech assessment in English and a second speech assessment in Spanish, can both assessments be billed as initial assessments under the LEA Program? What if two practitioners perform the initial assessment?**
- A. No. Initial and triennial IEP/IFSP assessments are limited to one every third fiscal year per provider per assessment type. However, an amended assessment may be billed thirty days after the initial assessment. If more than one initial/triennial speech assessment is billed under your LEA’s National Provider Identifier (NPI) before the third fiscal year, the second claim will be denied.
- Q4. Can an IEP/IFSP assessment be billed to the LEA Medi-Cal Billing Option Program even if the student does not qualify for IDEA services?**
- A. Yes, an IEP/IFSP initial assessment is provided to determine the student's eligibility, and if the student is determined ineligible for services under IDEA and no IEP/IFSP is developed, the IEP/IFSP initial assessment may still be billed to the LEA Medi-Cal Billing Option Program. If any additional assessments and treatment services are rendered after that determination, the services must be billed as non-IEP/IFSP

services and meet the Free Care and Other Health Coverage requirements. These requirements are found in [loc ed bil](#) section in the LEA Provider Manual.

Q5. Which assessments can utilize the rounding policy?

- A. None. You cannot round up time spent to conduct any assessment services. Assessments may only be billed for completed service time.

Q6. What constitutes a non-IEP/IFSP health education/anticipatory guidance assessment? Is health education/anticipatory guidance reimbursable under the LEA Program if the service was provided by telephone?

- A. No. Health education/anticipatory guidance is preventative medical counseling and/or risk factor reduction provided to an individual/parent based on an evaluation of the individual's needs, and provided as a direct face-to-face service.

Q7. Can a Licensed SLP bill for assessing a student's Assistive Technology needs?

- A. Currently, speech language assessment services are related to measurement, testing, screening, and evaluating related to the development and disorders of speech, voice, language, or swallowing. An SLP may bill for an assessment that includes evaluation for Assistive Technology as part of the broader evaluation of a speech language disorder. However, an assessment solely conducted to determine a student's Assistive Technology needs is not currently a covered LEA Program service.

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