

MA Billing Checklist For Case Managers

Please read these instructions carefully and complete the checklist for each student for whom we will be submitting claims for Medical Assistance (MA) Reimbursement.

VERIFY CASELOAD:

- ☐ Review the list of students provided and confirm they are on your caseload and/or if you are the primary teacher. If not, email the correct information to Marilyn.

REVIEW CURRENT IEP:

- ☐ Verify that the correct choice is indicated on the Services page
If 1:1, indicate YES on this option.
 - Child-specific Paraprofessional Support (Yes / No)
If NOT child-specific, be sure the other option is checked!
 - Non-child-specific adult support is described in accommodations
- ☐ Verify the student's IEP includes the required language. If 1:1, it can be on the services page. If not, put it on the Modifications page. *It is essential that you use the dropdowns provided in SpEd Forms as the language meets the guidelines required by DHS.*
 - See **Appendix A** for copies of the dropdown language
 - ☐ Behavior Management
 - ☐ PCA/PARA Services
 - ☐ Nursing Services (for Medications dispensed daily)
 - ☐ Health-Related Tasks & Procedures (for students with significant health concerns - language provided by LSN)

NOTE – Non-child specific adult support: If this is not identified correctly on the current IEP, you do not need to modify it now **IF the PCA language is included in Modifications**. It should, however, be updated on the next IEP!

NOTE – INTAKE IEPs: The above language should be written into the intake IEP during the Intake Meeting. If it was not, please do a PWN adding the language.

- If the SWM IEP will be presented within the 30-day guideline, a PWN is not necessary.

REVIEW or CREATE A CARE PLAN and/or BIP:

Paras must be trained on, and have these documents available for reference as long as they provide care for the student. These documents are the para's guide to how they are to assist or respond to the student's needs. **SEE PCA SUPERVISION FORM.**

- **RETURNING STUDENTS:**

- ☐ Review the **ADL Care Plan** on Google Drive and note any changes that are appropriate due to the student's growth and/or program change
 - If you were the case manager last year, do a Google Drive search of "Marilyn Hellweg Care Plan" (insert student name)
 - If you need access to care plans, inform Marilyn
 - If there is no care plan, complete this [Google Form](#) to create a rough draft
- ☐ **Allow VIEW Access** to the *Current* BIP in Google Docs for Marilyn Hellweg
 - If the BIP was not written by SWM, it should be transitioned to the SWM format ASAP for incoming students to ensure all DHS requirements are met. If it will be more than 30 days before the BIP is rewritten into the SWM BIP Format, forward the BIP to me and I'll create a temporary care plan to cover our bases.

PCA SUPERVISION FORM

DO NOT complete if the BIP and/or Care Plan are not finalized since they are the documents to be reviewed at the Initial Training!

- ☐ Qualified Professional (Case Manager, Nurse, &/or Behavior Specialist) reviews **Appendix B** to assure an understanding of the responsibilities
- ☐ Advise Marilyn Hellweg ASAP if QP is NOT the case manager assigned to the student
- ☐ Valid "Qualified Professional" completes Initial Evaluation and Training within 14 days of the start of services
 - Include all paras that may provide service to student
 - New paras added throughout the year must be evaluated and trained within 14 days of their start date
- ☐ QP documents 1st Review 90 calendar days after initial evaluation (generally near winter break)
- ☐ QP documents 2nd review 90 calendar days after 1st Review (generally near spring break)

NOTES:

- "QP" is a licensed staff that is qualified to supervise and provide instruction for the cares provided (**See Appendix B**)
 - The nurse should be considered for complex health-related cares
 - Teacher valid if with appropriate licensure for cares/interventions required
- ⇒ Tier 1 & 2 teachers likely do not meet DHS's criteria for "qualified" professionals

- Behavior Analyst, School Psychologist, Social Worker, or a Tier 3 or 4 teacher with appropriate licensure must document training and supervise those paras in rooms with Tier 1 & 2 teachers
- All paras that provide support to the student must understand the student's unique needs and the expectations for care.
 - Best practice: Train all program paras and float paras on all students
- The care plan and/or BIP must identify and describe the specific cares/interventions the student requires
 - These documents must be *thoroughly* reviewed with the paras
 - Paras must have access to BIP and Care Plan throughout the year to reference and clarify student needs

TIME STUDY:

In November 2021, DHS confirmed that due to the unique nature of our Setting IV programs, most of our students qualify for reimbursement for PCAs. A valid time study will be completed as soon as possible for all identified students. Marilyn will provide a list of students in your program that require a time study to be completed.

To qualify for billing, PCA language outlining the care/interventions provided must be identified. See **“Review Current IEP”** section above.

Between kick-off week and mid-September, training for all paras and teachers involved will be scheduled that will clarify how we document this with shared paras as well as child-specific paras. The time study is a 10-day “snapshot” of what care for the student looks like and is valid for 2 years unless a significant change is made in the level of care required, or the student switches programs.

MONTHLY PCA LOGS:

NEW! Qualified Professional should be listed as supervisor in demographic information and is responsible to sign the monthly logs.

At the beginning of month:

- ☐ Login to Shared Drive and print (one-sided) the customized monthly logs for your program
 - All program logs are in one file and will need to be distributed
- ☐ Review demographic data and strike through and correct any errors
- ☐ Paras complete the form DAILY to ensure accuracy and initial and sign the form

At end of month:

- ☐ Verify student attendance is indicated correctly
- ☐ Verify para absences are indicated
- ☐ Indicate a % or # of min that a student's care was provided by licensed staff or a non-billable (untrained) sub or other para as appropriate
- ☐ If you are *not* the QP, initial in the lower right corner to indicate you have verified the information before giving it to the QP for signature
- ☐ Finalized documents will be uploaded to the Shared Google Drive "Completed Logs" folder by the first Friday of the following month

APPENDIX A
REQUIRED IEP LANGUAGE FOR PCA SUPPORT
(Copied from Dropdowns provided in SpEd Forms)

Everything in RED should be customized to describe/meet the student's needs

BEHAVIOR MANAGEMENT: (Use for students who are supervised/redirected only for behaviors)

Due to CHLD's behavioral concerns of aggression (describe specific concerns here such as hitting, kicking, pushing staff/peers, destroying school property), refusal, and vulnerability a Personal Care Attendant (PCA) or other adult will be available throughout the school day as determined by the current time study or daily log completed by the PCA. CHLD needs ongoing monitoring and supervision so CHLD can continue to benefit from their education. The consistent structure, response, and consequences outlined in the [Behavior Intervention Plan OR Positive Behavior Support Plan] will help them manage behaviors while in the classroom. PCA/adult will monitor to ensure that CHLD is held accountable for their behavior and using acceptable behaviors while in the classroom. PCA/adult will use behavioral strategies and calming/coping routines developed by the IEP team and outlined in the Behavior Intervention Plan when CHLD is frustrated and/or escalated. PCA services will be supervised by a qualified professional.

PCA/PARA SERVICES: (Use for students who receive only ADL Support)

CHLD requires personal care services as documented in the ADL Care Plan and provided according to the most recent time study. These services will be provided by staff certified and trained to provide the services and will be supervised by a qualified health professional and/or special education teacher.

Activities of Daily Living provided: [ONLY LIST THOSE THAT ARE INCLUDED ON THE CARE PLAN!] Eating, toileting, dressing, grooming, transfers, mobility, positioning, behavior

If student has a BIP & an ADL Care Plan both statements must be included in the IEP.

NURSING SERVICES: (LSN should be involved in selection and specifics)

If the student receives medication at school, include this statement.

**If it is not accurate for the student as written,
please verify changes with Marilyn before finalizing IEP.**

Nursing is a necessary related service for medication administration and management. The nurse will consult, communicate and plan with staff, parents, and health care providers as necessary to address medication management issues and concerns. Medication will be administered during the school day. Medication administration will be given by the Licensed School Nurse when possible, and by a trained staff member (PCA or Teacher) in the LSN's absence. Direct services such as medication administration will take up to (xx) minutes daily and medication management will take up to 10 minutes once a month. These services will continue for the duration of the IEP unless discontinued by the prescribing physician.

If the student has complex medical needs, the LSN will write the specifics. It is important that they be identified in the IEP.

APPENDIX B

QUALIFIED PROFESSIONAL PCA TRAINING & SUPERVISION

(Copied from the MHCP Provider Manual)

DHS definition of “Qualified Professional” Qualifications:

The qualifications for a person providing supervision of a paraprofessional who is providing PCA services are based on the service provided, the license, certification, scope of practice, professional responsibilities, and professional experience of the supervisor.

For example, ADLs such as positioning, transfers, or toileting may be taught and supervised by a physical therapist, professional nurse, or some special education teachers. These ADLs may *not* be taught or supervised by a speech pathologist, audiologist, school psychologist, social worker, or certain special education teachers because it is not within the scope of practice of those professionals.

Responding to level 1 behaviors is in the scope of practice of school personnel such as, but not limited to, school behavior social workers, school psychologists, and some special education teachers.

A QP may be any of the following:

- Audiologist
- Licensed school psychologist
- Licensed school social worker
- Mental health professionals
- Occupational therapist
- Physical therapist
- Professional nurse
- Special education teacher
- Speech/Language Pathologist

QP Duties

A QP must supervise anyone providing personal care assistance through the use of direct training, observation, return demonstrations, and consultation with school staff, the child or youth, and the parent or guardian of the child or youth.

The QP trains and supervises the person providing PCA services and evaluates the effectiveness of the services. The QP must do the following:

- Confirm that the personal care assistant meets the qualifications to provide the services
- Appropriately assign tasks to the personal care assistant
- Provide training and ensure competency of the personal care assistant in meeting the individual needs of the child or youth before services are provided

- Verify that the PCA plan of care, based on the needs of the child or youth as described in the IEP plan, is completed within the first week after the start of services and updated as needed
- Review the personal care assistant's documentation of services provided
- Document training, communication, initial and periodic evaluations of the PCA services, and what actions are needed to improve services provided by the personal care assistant

Evaluation of the Person Providing PCA Services

Initial Evaluation

The QP must complete an initial evaluation of the personal care assistant through direct observation of the personal care assistant's work within the first 14 days (or sooner as determined by the QP) of starting to provide regularly scheduled services to the child or youth.

After the initial evaluation, subsequent visits do not require direct observation of each person providing PCA services unless determined by the QP based on the needs of the child or youth and the personal care assistant's ability to meet those needs.

Periodic Evaluations

The QP must complete periodic evaluations as follows:

- At least every 90 days for the first year of service to the child or youth. After the first two 90-day evaluations (total of 180 days) of a PCA providing service to the same child, the supervisory visits may alternate between unscheduled phone or internet technology and in-person visits, unless the in-person visits are needed according to the care plan
- Every 120 days in the second and succeeding years that the same person is providing the PCA services to the same child

Sign, date and indicate the supervision visit on the PCA activity checklist when a periodic evaluation and supervision visit is conducted during the period identified on the activity checklist.

Conduct evaluations more often if:

- The QP determines more are necessary based on the needs of the child or the personal care assistant's ability to meet those needs
- The child or youth, parent or guardian, teacher, IEP case manager or other educator makes a request for increased supervision of the PCA services
- The PCA plan of care requires more frequent evaluations

Documentation of Evaluations

At the initial and each periodic supervisory visit, the QP must evaluate whether the PCA services:

- Meet the needs of the child or youth as identified in the IEP or IFSP
- Help the child or youth participate in and benefit from regular and special education

The QP evaluation must include a review and documentation of the following:

- Satisfaction level of the child or youth and parent or guardian with the PCA services
- Adequacy of the tasks and activities in the PCA plan of care to meet the needs of the child or youth
- The personal care assistant's understanding of the child's or youth's needs, knowledge of the care plan, when to notify the QP of concerns or changes in the condition or behavior of the child or youth, and when emergency actions and contacts are required
- The personal care assistant's demonstrated ability to competently carry out the tasks and activities to meet the needs of the child or youth as trained
- Documentation by the personal care assistant of the services provided, the personal care assistant's communication with the QP, and emergency contacts made, if any
- Changes in the needs of the child or youth requiring changes in the level of service, revision of the PCA care plan, or additional training of the person providing PCA services

At the conclusion of the evaluation, the QP must document the above and the following:

- Actions necessary to correct any deficiencies in the work of a person providing PCA services, actions taken, and timeline for actions planned
- Hands-on training or individualized training for the care of the child or youth that was conducted or assignments and timeline for training to occur
- Revision of the PCA plan of care as necessary to meet the needs of the child or youth