

BASIC PLAN
(For Low-Income Children and Working-Age Adults)
BENCHMARK BENEFIT PACKAGE

3.R ESSENTIAL PROVIDERS

The Basic Benchmark Benefit Package includes **Clinic Services and Rehabilitative Services** furnished by certain essential providers permitted under sections 1905(a)(9), 1905(a)(13) and 2110(a)(5) of the Social Security Act.

Services from essential providers are preventative, diagnostic, therapeutic, rehabilitative, or palliative items or services furnished to an outpatient by or under the direction of a physician and which may include those services provided by community health centers.

3.R.1 Rural Health Clinic Services

Rural Health Clinic services and other ambulatory services furnished by a rural health clinic, which are otherwise included in the State plan.

3.R.2 Federally Qualified Health Center Services

Federally Qualified Health Center (FQHC) services and other ambulatory services that are covered under the State plan and furnished by an FQHC in accordance with section 4231 of the State Medicaid Manual (HCFA-Pub. 45-4).

Federally qualified health centers are provided within the scope, amount, and duration of the State's Medical Assistance Program as described under applicable Department rules.

3.R.3 Indian Health Services Facility Services

Indian Health Service Facilities are accepted as providers, in accordance with 42 CFR 431.110(b), on the same basis as other qualified providers.

3.R.4 Independent School Districts Services

Independent School Districts that have entered into a provider agreement with the Department may bill for the following Basic and Enhanced Plan Services when they are identified on the student's Individual Education Plan (IEP). Comparable services will be provided by providers other than independent schools districts, regardless of the existence of an IEP. Medically necessary behavioral health services are designed to restore a participant to his or her best possible level of functioning (per 42 CFR 440.130). All individuals under the age of 21, with a medical need for the services, will have access to the services. Individuals have the freedom to choose from among all qualified providers including those providing services outside the school setting. Services are provided year round when found to be medically necessary to do so.

Covered Services:

Behavioral Intervention - Behavioral Intervention is used to promote the student's ability to participate in educational services through a consistent, assertive, and continuous intervention process. It includes the development of replacement behaviors with the purpose to prevent or treat behavioral conditions of students who exhibit maladaptive behaviors. Qualifications for a Behavioral Intervention Professional are as follows:

- An individual with an Exceptional Child Certificate who meets the qualifications defined under IDAPA 08.02.02, "Rules Governing Uniformity," Section 028; or
- An individual with an Early Childhood/Early Childhood Special Education Blended Certificate who meets the qualifications defined under IDAPA 08.02.02, "Rules Governing Uniformity," Section 019; or
- A Special Education Consulting Teacher who meets the qualifications defined under IDAPA 08.02.02, "Rules Governing Uniformity," Section 029; or
- Habilitative intervention professional who meets the requirements defined in IDAPA 16.03.10 "Medicaid Enhanced Plan Benefits," Section 685; or
- Individuals employed by a school as certified Intensive Behavioral Intervention (IBI) professionals prior to July 1, 2013, are qualified to provide behavioral intervention; and
- Must be able to provide documentation of one (1) year's supervised experience working with children with developmental disabilities.

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Qualifications for a Behavioral Intervention Paraprofessional are as follows:

- Must be at least eighteen (18) years of age;
- Demonstrate the knowledge, have the skills needed to support the program to which they are assigned, and meet the requirements under the “Standards for Paraprofessionals Supporting Students with Special Needs,” available online at the State Department of Education website; and
- Must meet the paraprofessional requirements under the Elementary and Secondary Education Act of 1965, as amended, Title 1, Part A, Section 1119.
- A paraprofessional delivering behavioral intervention services must be under the supervision of a behavioral intervention professional or behavioral consultation provider.

Behavioral Consultation - Behavioral consultation assists education professionals by consulting with the IEP team during the assessment process, performing advanced assessment, coordinating the implementation of the behavior implementation plan and providing ongoing training to the behavioral interventionist and other team members.

Qualifications for Behavior Consultation are as follows:

- Behavioral consultation must be provided by a professional who has a Doctoral or Master’s degree in psychology, education, applied behavioral analysis, or have a related discipline with one thousand five hundred (1500) hours of relevant coursework or training, or both, in principles of child development, learning theory, positive behavior support techniques, dual diagnosis, or behavior analysis (may be included as part of degree program); and who meets one (1) of the following:
- An individual with an Exceptional Child Certificate who meets the qualifications defined under IDAPA 08.02.02, “Rules Governing Uniformity,” Section 028.
- An individual with an Early Childhood/Early Childhood Special Education Blended Certificate who meets the qualifications defined under IDAPA 08.02.02, “Rules Governing Uniformity,” Section 019.
- A Special Education Consulting Teacher who meets the qualifications defined under IDAPA 08.02.02, “Rules Governing Uniformity” Section 029.
- An individual with a Pupil Personnel Certificate who meets the qualifications defined under IDAPA 08.02.02, “Rules Governing Uniformity,” Section 027, excluding a registered nurse or Audiologist.
- An occupation therapist who is qualified and registered to practice in Idaho.
- Therapeutic consultation professional who meets the requirements defined in IDAPA 16.03.10, “Medicaid Enhanced Plan Benefits,” Section 685.

Medical Equipment and Supplies - Medical equipment and supplies as allowed under 42 CFR440.70 that are covered by Medicaid and are needed for use at school but are too large or unsanitary to transport from home to school. They must be for the student’s exclusive use and transfer with the student if the student changes schools.

Nursing Services - Skilled nursing services that must be provided by a licensed nurse. Emergency, first aide or assistance with non-routine medications not identified on the IEP as health related services are not reimbursable

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Occupational Therapy and Evaluation - Occupational therapy and evaluation services for vocational assessment, training or vocational rehabilitation is not covered Please see section 3.M. Therapy Service for additional information.

Personal Care Services - School based personal care services include medically oriented tasks having to do with the student's physical or functional requirements while at school.

Physical Therapy and Evaluation - Please see section 3.M. Therapy Service for additional information.

Psychological Evaluation

Psychotherapy

Psychosocial Rehabilitation and Evaluation - Services to assist the student in gaining and utilizing skills necessary to participate in school such as training in behavior control, social skills, and coping skills.

Speech/Audiological Therapy and Evaluation - Please see section 3.M. Therapy Service for additional information.

Social History and Evaluation

Transportation - Student must require special transportation that is ordered by a physician and included on the IEP, and receive another Medicaid reimbursable service on the same day.

Interpretive Services - May only be billed when the student needs the services of an interpreter to receive a Medicaid reimbursable service. Not covered if the person providing the service is able to communicate in the student's primary language.

Limitations:

Individuals under twenty-one (21) years of age pursuant to EPSDT, may receive additional services if determined to be medically necessary and prior authorized by the Department.

Excluded Services: Vocational, Educational and Recreational services are not reimbursable under the Benchmark Plans.

3.5 MEDICAL TRANSPORTATION SERVICES

The Basic Benchmark Benefit Package includes **Medical Transportation Services** permitted under sections 1905(a)(26), 1905(a)(6) and 2110(a)(17) of the Social Security Act.

These services include transportation services and assistance for eligible persons to medical facilities.

Payment for meals and lodging may be authorized where appropriate. Ambulance services will be covered in emergency situations or when prior authorized by the Department or its designee.

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Covered Services.

Behavioral Intervention - Behavioral Intervention is used to promote the student's ability to participate in educational services through a consistent, assertive, and continuous intervention process. It includes the development of replacement behaviors with the purpose to prevent or treat behavioral conditions of students who exhibit maladaptive behaviors. Qualifications for a Behavior Intervention Professional are as follows:

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- A Special Education Consulting Teacher who meets the qualifications defined under IDAPA 08.02.02, "Rules Governing Uniformity," Section 029; or
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- Individuals employed by a school as certified Intensive Behavioral Intervention (IBI) professionals prior to July 1, 2013, are qualified to provide behavioral intervention; and
- Must be able to provide documentation of one (1) year's supervised experience working with children with developmental disabilities.

Qualifications for a Behavioral Intervention Paraprofessional are as follows:

- Must be at least eighteen (18) years of age;
- Demonstrate the knowledge, have the skills needed to support the program to which they are assigned, and meet the requirements under the "Standards for Paraprofessionals Supporting Students with Special Needs," available online at the State Department of Education website; and
- Must meet the paraprofessional requirements under the Elementary and Secondary Education Act of 1965, as amended, Title 1, Part A, Section 1119.

A paraprofessional delivering behavioral intervention services must be under the supervision of a behavioral intervention professional or behavioral consultation provider.

Behavioral Consultation - Behavioral consultation assists education professionals by consulting with the IEP team during the assessment process, performing advanced assessment, coordinating the implementation of the behavior implementation plan and providing ongoing training to the behavioral interventionist and other team members.

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as part of degree program); and who meets one (1) of the following:

- An individual with an Exceptional Child Certificate who meets the qualifications defined under IDAPA 08.02.02, "Rules Governing Uniformity," Section 028.
- An individual with an Early Childhood/Early Childhood Special Education Blended Certificate who meets the qualifications defined under IDAPA 08.02.02, "Rules Governing Uniformity," Section 019.
- A Special Education Consulting Teacher who meets the qualifications defined under IDAPA 08.02.02, "Rules Governing Uniformity" Section 029.
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Limitations.

Individuals under twenty-one (21) years of age pursuant to EPSDT, may receive additional services if determined to be medically necessary and prior authorized by the Department.

Excluded Services: Vocational, Education and Recreational services are not reimbursable under the Benchmark Plans.

3.S MEDICAL TRANSPORTATION SERVICES

The Enhanced Benchmark Benefit Package includes Medical

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24. g. School Based Services – Payment will be made to an enrolled school district for procedures listed in a child's Individualized Education Plan (IEP) or Individualized Family Service Plan (IFSP) and identified in the most current United States Department of Health and Human Services, Centers for Medicare and Medicaid's (CMS) Healthcare Common Procedure Coding System (HCPCS) and described in Section 3.1-C, pages 35 and 36, section 3.R.4. and Section 3.1-C, page 43, section 3.R.4 Reimbursement will be set to community-based provider reimbursement rates for 15 minute units except for nine CPT codes that do not have an exact community-based CPT code equivalent. The nine codes are based on 15 minute units and are described as the following:

- 92508 – Group speech/hearing therapy by a technician in a school
- 97150 – Group physical therapy by a technician in a school
- 97530 – Group occupational therapy by a technician in a school
- H2019 TM – Behavioral Consultation
- 96150 TM – Behavioral Intervention Assessment
- 96152 TM – Individual Behavioral Intervention
- 96152 HM/TM – Individual Behavioral Intervention by a paraprofessional in a school
- 96153 TM - Group Behavioral Intervention
- 96153 HM/TM - Group Behavioral Intervention by a paraprofessional in a school

Effective May 1, 2007, the Department will calculate the reimbursement rate for the following group services as 25% of the technician rate for individual therapy since the service is being provided to an average of 4 students:

- 92508
- 97150
- 97530

The fee schedule for the above listed codes and any annual/periodic adjustments to the fee schedule for the above listed codes are published at the following web site:
<http://www.healthandwelfare.idaho.gov>

The fee schedule will be effective for services on or after 7/1/2013.

Effective July 1, 2013, the Department will calculate the reimbursement rate for the following services in the following manner.

	<p>Behavioral Consultation (CPT H2019 TM):</p> <p>The reimbursement methodology adds many cost components together to arrive at a 15 min unit rate for the Behavioral Consultation. We use the Bureau of Labor statistics (BLS) mean wage (Idaho) for all others (BLS code 29-9099 for May 2009) which uses reasonable payroll rate studies. Then, this hourly wage is inflated by using (GI) index. In SFY 2010 (2 months) it was .0005% and SFY 2011 it is .008%. Using the Survey results we use direct care staff multipliers for employer related, program related, and general & administrative percentages. These multipliers are decreased to accommodate the average payroll rate currently paid for these services along with the BLS cost for employer related payroll expenses. Lastly, we add costs for paid leave time for direct care staff based on BLS (MWD) report.</p> <p>The dollar figure arriving from the calculations is divided by the ratio provided. The hourly rate then is brought into a quarterly unit rate, or the target rate. The final unit rate is 84.73% of the target rate.</p>
	<p>Behavioral Intervention – Professional</p> <p>Individual (CPT 96152 TM) and Group (CPT 96153 TM) and Assessment (CPT 96150 TM) - The reimbursement methodology adds many cost components together to arrive at a 15 min unit rate for the Behavioral Intervention professional services. We use the (BLS) mean wage (Idaho) for all others (BLS code 31-1011 for May 2009) which uses reasonable payroll rate studies. Then, this hourly wage is inflated by using (GI) index. In SFY 2010 (2 months) it was .5% and SFY 2011 it is .8%. Using the Survey results we use direct care staff multipliers for employer related, program related, and general & administrative percentages. These multipliers are decreased to accommodate the average payroll rate currently paid for these services along with the BLS cost for employer related payroll expenses. Lastly, we add costs for paid leave time for direct care staff based on BLS (MWD) report.</p> <p>The dollar figure arriving from the calculations is divided by the ratio provided. The hourly rate then is brought into a quarterly unit rate, or the target rate. The final unit rate is 85.5% of the target rate.</p>

Reimbursement rates for the services above can be found on p. 43 of Attachment 4.19-B.

	Behavioral Intervention – Paraprofessional
	<p>Individual (CPT 96152 TM HM) and Group (CPT 96153 TM HM) - The reimbursement methodology adds many cost components together to arrive at a 15 min unit rate for the Behavioral Intervention paraprofessional services. We use the (BLS) mean wage (Idaho) for all others (BLS code 31-9099 for May 2009) which uses reasonable payroll rate studies. Then, this hourly wage is inflated by using (GI) index. In SFY 2010 (2 months) it was .0005% and SFY 2011 it is .008%. Using the Survey results we use direct care staff multipliers for employer related, program related, and general & administrative percentages. These multipliers are decreased to accommodate the average payroll rate currently paid for these services along with the BLS cost for employer related payroll expenses. Lastly, we add costs for paid leave time for direct care staff based on BLS (MWD) report.</p> <p>The dollar figure arriving from the calculations is divided by the ratio provided. The hourly rate then is brought into a quarterly unit rate, or the target rate. The final unit rate is 84.73% of the target rate.</p>

Reimbursement rates for the services above can be found on p. 43 of Attachment 4.19-B.

29. Developmental Disability Services - The rate of reimbursement for each component of ambulatory services included in the State's Medicaid Plan will be established by the Department's Medical Assistance Unit. This reimbursement rate will not exceed the usual and customary charges for comparable services under comparable circumstances in public and private agencies in the State of Idaho.

Rate(s):

For physician services where mid-levels are authorized to administer mental health services, the Department reimburses based on the Department's Medical Assistance fee schedule.

For other health professional authorized to administer developmental disability services, the statewide reimbursement rate for developmental disability services was derived by using Bureau of Labor Statistics mean wage for the direct care staff providing the service adjusted for employment related expenditures and indirect general and administrative costs which includes program related costs and are based on surveyed data.

Reimbursement rates for these services is set at a percentage of the statewide target reimbursement rate described above. The following CPT codes represent the service codes paid to developmental disability service providers who are considered other health professionals authorized to administer developmental disability services:

Code	Modifier	Description	Rate of Reimbursement
96150	TM	Behavioral Intervention Assessment on an IEP (per 15 min.)	\$11.35
96152	TM	Individual Behavioral Intervention on an IEP (per 15 min.)	\$11.35
96152	HM/TM	Individual Behavioral Intervention by paraprofessional on an IEP (per 15 min.)	\$5.01
96153	TM	Group Behavioral Intervention on an IEP (per 15 min.)	\$4.56
96153	HM/TM	Group Behavioral Intervention by paraprofessional on an IEP (per 15 min.)	\$2.14
H2000		Developmental Disability Evaluation (per 15 min.)	\$4.53
H2019	TM	Behavioral Consultation on an IEP (per 15 min.)	\$16.20

The fee schedule for the above listed codes and any annual/periodic adjustments to the fee schedule for the above listed codes are published at the following Website:

<https://www.healthandwelfare.idaho.gov>

The fee schedule will be effective for services on or after 7/1/2013.