



STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Earl Ray Tomblin
Governor

Bureau for Medical Services
Home & Community Based Services
350 Capitol Street – Room 251
Charleston, West Virginia 25301-3706
Telephone: (304) 558-1700 Fax: (304) 558-4398

Karen L. Bowling
Cabinet Secretary

March 28, 2014

Ms. Vickie Mohnacky, Coordinator
Office of Special Programs
Building 6, Room 304
1900 Kanawha Blvd., East
Charleston, West Virginia 25305-0330

Dear Ms. Mohnacky:

This memorandum has been created to clarify the billing of specialized transportation pertaining to school-based health services.

In order to bill Medicaid for specialized transportation, the modification needed to the vehicle must be identified and noted in the student's current approved Individualized Education Plan (IEP) and the student must have received at least one (1) Medicaid covered service (i.e., Occupational Therapy (OT), Physical Therapy (PT), Speech Therapy (ST), Targeted Case Management (TCM) or Personal Care (PC)) on the date specialized transportation services are billed. Any Medicaid covered service being billed for must also be included in the student's current approved IEP.

Specialized transportation should not be span billed unless the service is provided on concurrent dates. For example, if a student received a related service on January 3, 4, 5, 7, and 9th, then specialized transportation services can be span billed on the 3rd through the 5th. Separate billing would need to occur for the 7th and the 9th provided the student received a related service on those dates. If the student did not receive a related service on the 4th, then span billing cannot occur for the 3rd through the 5th.

The change in billing procedure is necessitated by the additional scrutiny being placed on States payment of School Based Health Services and the necessity to clearly demonstrate that specialized transportation services are billed only on dates in which an approved IEP service is provided. The billing procedure will serve to document and substantiate the appropriateness of claiming in the event of a review or audit.

Ms. Vicky Mohnacky
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If I can be of further assistance, please do not hesitate to call me at 304-356-4936.

Sincerely,

A handwritten signature in blue ink that reads "Cynthia Parsons". The signature is written in a cursive style.

Cynthia Parsons, Manager
Behavioral Health, Targeted Case Management and
School-based Health Services

CP/TMM:bak

cc: Amy Willard, WVDE, Office of School Finance
Cynthia E. Beane, Deputy Director, Medicaid
Tina Bailes, Deputy Director, Medicaid
Patricia S. Nisbet, Director, HCBS, Medicaid