SPECIAL EDUCATION:
THIRD-PARTY REIMBURSEMENT (TPR)

PRIVATE INSURANCE COVERAGE

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## Quick Checklist for TPR: MHCP AND PRIVATE INSURERS

<table>
<thead>
<tr>
<th>Check</th>
<th>Task</th>
<th>Answer</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>✗</td>
<td>Does the child have an Individualized Education Program (IEP) or Individual Family Service Plan (IFSP)?</td>
<td>NO IEP/IFSP.</td>
<td>STOP. NO BILLING.</td>
</tr>
<tr>
<td>✗</td>
<td>Does the child’s IEP/IFSP include health related services?</td>
<td>NO health related services.</td>
<td>STOP. NO BILLING.</td>
</tr>
<tr>
<td>✗</td>
<td>Ask parent: Is the child enrolled in Minnesota Health Care Programs (MHCP)? This is a PUBLIC government plan, either Medical Assistance (MA) or MinnesotaCare.</td>
<td>NO MHCP (PUBLIC plan)</td>
<td>STOP. NO BILLING.</td>
</tr>
<tr>
<td>✗</td>
<td>Request parent consent 1) to share data and 2) to bill MHCP. + Parent may stop consent for school to share data and bill.</td>
<td>NO consent obtained.</td>
<td>Provide information prior to consent.</td>
</tr>
<tr>
<td>✗</td>
<td>In MN-ITS: Does the child have MHCP coverage during the time IEP health related services are provided? Parent can re-enroll and school district can bill back 3 months.</td>
<td>No, MHCP not current.</td>
<td>Assist parent to re-enroll.</td>
</tr>
<tr>
<td>✗</td>
<td>Ask parent: Does the child also have PRIVATE insurance coverage?</td>
<td>No PRIVATE plan.</td>
<td>Bill MHCP.</td>
</tr>
<tr>
<td>✗</td>
<td>Request parent consent 1) to share data and 2) to bill PUBLIC and PRIVATE plans..</td>
<td>NO prior consent obtained.</td>
<td>Provide information prior to consent.</td>
</tr>
<tr>
<td>✗</td>
<td>In MDE TPR Share Point, is the PRIVATE plan on the excel roster of PRIVATE insurers? If not, send PRIVATE plan information to MDE – see page 12.</td>
<td>NO, PRIVATE plan is not on roster.</td>
<td>Send MDE the plan’s contact info.</td>
</tr>
<tr>
<td>✗</td>
<td>Has the PRIVATE plan been contacted? On MDE’s roster, check progress. Contact MDE if you have questions.</td>
<td>YES, on roster. Check status of MDE requests.</td>
<td>Check back or send MDE a reminder.</td>
</tr>
<tr>
<td>✗</td>
<td>Denial letter on file in Share Point folder of letters. Make an electronic copy; keep the electronic file in student’s record or print and keep paper copy. In MN-ITS, insert parent’s PRIVATE plan info and denial code B1.</td>
<td>YES, MDE has PRIVATE plan denial letter.</td>
<td>BILL MHCP. Use code B1.</td>
</tr>
<tr>
<td>✗</td>
<td>NO denial. PRIVATE plan did not respond to 3 sent letters. Print letters; complete FAX coversheet. Fax to DHS per instructions in MN-ITS. Keep a paper or electronic copy. In MN-ITS, insert parent’s PRIVATE plan info and denial code B1</td>
<td>NO PRIVATE plan denial.</td>
<td>BILL MHCP and Fax 3 ltr bundle.</td>
</tr>
<tr>
<td>✗</td>
<td>PRIVATE plan requires individual letter. District calls the firm and/or sends a letter with child’s ID info, requesting payment or denial. (See example letter in packet.)</td>
<td>District receives denial letter:</td>
<td>Bill MHCP. Use code B1.</td>
</tr>
</tbody>
</table>

Table 1 is a checklist of the steps to take when preparing to bill MHCP for IEP health related services.
1. RESPONSIBILITY

According to federal law and regulations and state law, Minnesota school districts and charter schools are required to request payment for school provided IEP health related services covered by public and private health plans for children with disabilities. For students with both private and public plans, districts must first seek payment from the private plan before seeking reimbursement for services from public funds via Minnesota Health Care Programs (MHCP). The federal and state requirements are found in these citations:

**Federal Law:** 20 U.S.C. 1412(a)(12) and (e) SPECIAL EDUCATION, Methods of ensuring services.  
(http://www.law.cornell.edu/uscode/text/20/1412?quicktabs_8=1#quicktabs-8)

**Federal Regulation:** 34 CFR §300.154(d)(2)(iv - v) IDEA Part B Final Regulations Related to Parental Consent to Access Public Benefits or Insurance (e.g., Medicaid)  

**Minnesota Law:** Minnesota Statutes section 125A.21 THIRD-PARTY PAYMENT  
(https://www.revisor.mn.gov/statutes/?id=125A.21&year=2012&keyword_type=all&keyword=125a.21)

The Medicaid authority in Minnesota, the Department of Human Services (DHS), provides guidance for documenting health related services and for billing. Minnesota Health Care Programs (MHCP), which includes the federal Medical Assistance program and the state MinnesotaCare program, pays school districts for one-half of the costs, the federal share, of covered Individualized Education Program (IEP) and Individualized Family Service Plan (IFSP) health related services for eligible children and youth birth through age 21. View the DHS Manual, Individualized Education Program (IEP) Services Technical Assistance Guide (DHS-4439) (https://edocs.dhs.state.mn.us/fs/4439-ENG) for all policies, requirements and steps for third-party billing.

This resource packet covers steps school districts must take:

- when a child has both public and private insurance and
- to determine if the private insurers will pay or deny payment for school provided IEP health related services for children with disabilities.
- to proceed with billing MHCP for IEP health related services.
2. COVERED CHILDREN

Children for whom school districts must seek private insurance payment are:

1) Eligible for special education and have an Individual Education Program (IEP).

2) Covered by both a private health plan and a public plan.

3) In need of health related services in order to benefit from special instruction.

After the close of the IEP planning meeting, in private, one special education team member should discuss third-party billing with the child’s parent. If the parent consents to sharing information with DHS and for the district to bill, check the DHS online information and billing site, MN-ITS, for the child’s public and private health insurance. Confirm with the parent that a) MHCP enrollment status is current, and b) private insurance information, if the child is covered, is correct.

In MN-ITS, input the child’s name and birthdate to search for the child’s record. All children enrolled in MHCP are listed. The child’s eligibility screen displays his/her insurance coverage. At the top of the page is a grid for the Provider ID (school district) and Subscriber or Client ID / Name (child). Find the line for Major Programs that displays the child’s eligibility for Medical Assistance - whether or not the child is currently enrolled in MHCP. The Prepaid Health Plan line has the name of the agency providing MA-covered services.

Prepaid Health Plans may include private insurers designated as a Managed Care Organization (MCO) or Prepaid Health Plan or Prepaid Medical Assistance Plan (P-MAPS). DHS contracts with these agencies to be Medical Assistance providers. Agencies have both public plans (also known as government products) and private plans. Minnesota examples that have both public and private plans include Health Partners, Medica, Blue Cross/Blue Shield, UCare and MPH. When listed under Major Programs as a Prepaid Health Plan, and NOT later on the screen under Other Insurance, the child has only a public plan.

**NOTE:**
When a child is covered ONLY by a public plan - Minnesota Health Care Programs (MHCP: Medical Assistance and MinnesotaCare) - NO information about a private insurer is needed. The district may proceed directly to billing MHCP on the DHS web-based MN-ITS or via an electronic record system.

Scroll down to Other Insurance. There the child’s private insurer, if any, is listed.

This resource packet refers to steps districts must take when a firm is listed as Other Insurance – a private insurer - on the MN-ITS child eligibility page.
3. COVERED IEP HEALTH RELATED SERVICES

Listed below are the IEP health related services provided in schools that are reimbursed by MHCP. The health related services must meet Medical Assistance criteria - be medically necessary, provided by qualified professionals, follow documentation protocols, and so on. Private insurers, if covering these health related services, require that the services meet the same criteria.

To determine if a child has a disability and what services are necessary, IEP team members review areas from physical therapy through special transportation (below). When it is determined a child has a disability and is in need of special education, and an Individual Education Program (IEP) is developed, the assessment/evaluation conducted to reach the decision is eligible for MA reimbursement. Assistive Technology or Interpretive Services do not have an assessment component.

The services are listed with their respective billing codes (Healthcare Common Procedure Coding System (HCPCS)):

- T1018 U1: IEP Physical Therapy
- T1018 U2: IEP Occupational Therapy
- T1018 U3: IEP Speech-Language Pathology/Audiology
- T1018 U4 HE: IEP Children’s Therapeutic Services and Supports (CTSS)
- T1018 U4: IEP Mental Health Evaluation
- T1018 U5: IEP Nursing Services
- T1018 U6: IEP Personal Care Assistance (PCA)
- T1018 U8: IEP Special Transportation
- T1018 U7: IEP Assistive Technology Devices (Durable Medical Equipment)
- T1013: Interpreter Services provided during the services above

Codes will change based on the release of the International Classification of Diseases, 10th Revision, Procedure Coding System (ICD-10-PCS). Schools will be notified by DHS when changes must be implemented.

View the MHCP Providers - Individualized Education Program (IEP) Services Program Manual.

NOTE:
Private insurers do not cover the two services below. Therefore, even though a child has BOTH a public and private insurance, a district may proceed directly to billing MHCP on DHS web-based MN-ITS.

- T1018 U6: IEP Personal Care Assistance
- T1018 U8: IEP Special Transportation
4. PARENT CONCERNS: NOTICE, RIGHTS, BENEFITS

School districts must annually remind parents that they have consented to release information and bill insurers for school-provided services and that the school intends to bill for the services. Schools must also state that parents can stop permission at any time. Even if included in the Notice of Procedural Safeguards, a member of the special education team should review the consent to share data and to bill to ensure a parent understands the concepts.

School districts must obtain parent consent that specifically applies to PUBLIC plans AND to PRIVATE plans.

Parents may worry that when schools bill for the IEP health related services, insurance benefits could be affected. Protections in federal law prohibit reduction of any DHS services because schools access funds for IEP health-related services. On the DHS webpage for MHCP Providers - [Individualized Education Program (IEP) Services](http://www.pacer.org), see Forms, Checklists, Logs, Reports. Then see [Documents and Resources Brochures for Parents](http://www.pacer.org) (DHS-3456) for information in several languages.

Search the PACER website (http://www.pacer.org) using the term “third-party billing” for additional information for this parent question. The same protections are not in place when billing private insurance companies. There have been a few situations where parents’ premiums increase, service limits and prior approval levels change and lifetime maximums are affected.

**NOTE:**

Health insurance coverage for IEP health related services is often discussed with parents at the close of the IEP planning meeting. While convenient because a parent is present at the team meeting, it may not be an appropriate time. Many issues are discussed and the meeting can be overwhelming even without the third-party billing questions. In addition, parents may believe that family finances are a private matter and it is embarrassing and a breach of trust if brought up in a team setting or in front of their school age child or adolescent. A separate meeting or telephone contact is the opportunity to check out questions the parent has about the IEP as well as discuss information about health care coverage and billing.
5. STATEWIDE DETERMINATIONS

a) PLAN
The Minnesota Department of Education (MDE), on behalf of school districts and charter schools statewide, contacts private insurers per agreement between the Education and Human Services agencies starting with the 2011-12 school year. The goal is to seek private insurers’ intent to pay for IEP health related services for children with disabilities. If an insurer denies payment to schools, the single denial notice is used by school districts statewide. Information is posted in the MDE-hosted TPR SharePoint site. (For instructions on access to SharePoint, see section 6.)

b) COMMUNIQUES TO PRIVATE INSURERS
DHS requires that private insurers’ intent to pay be reported annually. Therefore, each school year, MDE sends a standard cover letter and form to be returned by email or, when no valid email address is available, by standard mail. The form includes the PRIVATE insurer’s current contact information, date and a request indicator (first, second, third). See the example at the end of this packet.

c) RESPONSE FROM PRIVATE INSURERS

• Denial of coverage:
School districts DO NOT need to obtain an individual denial for each student covered by a hat plan but can proceed to bill MHCP.

  1) Print or make an electronic copy of the denial letter.
  2) Use the code OAB1 in MN–ITS to indicate private insurance was denied.
  3) Keep a print or electronic copy in the child’s folder or central file, easily accessible if audited.

Typical reasons private plans deny payment include:

  ✓ School districts are not in the plan or network or do not have qualified providers. The plan does not pay school districts directly.

  ✓ The plan does not cover services that are determined by an Individualized Education Program (IEP) Team.

  ✓ The plan does not cover services without a referral from a medical doctor.

  ✓ Coverage is not provided for services in an educational setting to help a child benefit from special instruction.
• No response, even after three attempts:
Districts DO NOT NEED TO contact the insurance company but can proceed to bill MHCP.

1) Print the three-letter bundle and a blank coversheet found in the MDE Share Point folder.

2) In the child’s file in MN-ITS, select the “attach document” field; record the attachment code on the coversheet. Provide the other necessary identifying information: school district’s current National Provider Identifier (NPI) and child/client’s number.

3) Fax the coversheet with the three letters to DHS per instructions in the Individualized Education Program (IEP) Services Program Manual. In the left hand column, see the Basics for All IEP Services; select Billing and Authorization Requirements, Coordination of Benefits (COB).

4) Keep the coversheet and letters in paper or electronic form in the child’s folder or central file, easily accessible if audited.

When there is an attachment to a MN-ITS bill such as this three-letter packet, a DHS reviewer must locate the faxed attachment, review and approve, then mark and forward the electronic file for payment. If the reviewer cannot locate the attachment, that payment request stops.

When there has been no response from a private insurer, MDE continues to contact the private insurers for a response. This aims to reduce the extra steps necessary for attaching no-response letters when billing.

• Individual determination:
Some private insurance companies will not provide MDE information to on a general policy but only determine coverage on a case-by-case basis, requiring individual client information. Some companies are, in fact, brokers or clearinghouses for a number of businesses. The businesses choose different benefit packages. If the clearinghouse has not specifically eliminated covering IEP health related services from its array of offerings, it cannot provide a ‘blanket’ denial.

Therefore, districts MUST contact the insurance company to request a determination by telephone call or letter (see example at the end of this resource packet). A district provides the company the child/parent’s insurance plan. Specify that the services are 1) school provided, 2) determined by the IEP team (vs. a physician’s order), and 3) labeled as code T1018.

If coverage is denied, document the phone call or keep letter as described above. If no response after sending three letters within a 90 day period, proceed as described above.

• Refusal:
If an insurance company refuses to provide information to MDE, and the reason is determinations are only made on an individual basis, the district must contact the company with the child/parent’s identification information. If the company refuses to provide information, even
with parent consent to contact the company, consider the refusal a denial. Document the contact or letter and keep in the child’s. Proceed to bill as in the denial information above.

NOTE:
MDE’s experience from contacting private insurers during the 2011-12 school year shows that private insurers do not pay for school-provided health related services for students. Of all firms contacted, only one agreed to pay schools, and then only for physical therapy services.

Of the approximately 120 insurers contacted, nearly 40 percent sent responses denying services. Thirty percent sent no response even after three contact attempts within 90 days. For the rest, several firms repeatedly did not answer the question, insisting that individual client identification be provided; others firms no longer provided health coverage or provided only dental services; others were billing agents and not insurers; and, finally, mail was returned due to incorrect addresses with no forwarding information available.
6. SHAREPOINT – LOCATING PRIVATE INSURANCE DETERMINATIONS

The Minnesota Department of Education (MDE) uses SharePoint to provide web-based information that is specific to certain groups. Users need an account for MDE’s protected website pages. Follow these instructions to either: a) create an MDE account and then request SharePoint access or b) request access to the TPR SharePoint account.

a) CREATE AN MDE WEBSITE ACCOUNT. (If you have an MDE account, go to step b.)

1) Go to the MDE website to set up an account (https://collaboration.education.state.mn.us/SpecialEd/3rdparty/default.aspx).
   Below the boxes, see the message about needing an account: Click ‘click here’.
2) On the Welcome to the MDE’s password protected web sites page, under ‘New user’, click ‘click here’.
4) On the MDE User Profile page, complete the required fields. Note the field requirements in blue to the right of the respective fields.
   User ID minimum length is 8 characters.
   Password minimum length is 8 characters and must contain at least one capital letter.
   Click ‘save’.

b) REQUEST ACCESS TO THE SHAREPOINT THIRD-PARTY REIMBURSEMENT SITE.

1) Go to the Share Point Third-Party Reimbursement site (https://collaboration.education.state.mn.us/SpecialEd/3rdparty/default.aspx).
2) You will see an Error: Access Denied page. At the bottom, click ‘Request Access’.
3) On the next page, Request Access, type your NAME and TPB in the text box.
4) Click ‘Send Request’. An email request is sent to the MDE site administrator for your User ID to be permitted access to this SharePoint site.
5) You will receive an email reply once your User ID is validated for access to the site.

c) LOG IN TO SHAREPOINT – TPR SITE.

1) Go to the Share Point Third-Party Reimbursement site (https://collaboration.education.state.mn.us/SpecialEd/3rdparty/default.aspx).
2) At the SIGN IN page, enter your User Name (same your User ID) and Password. Click ‘Sign In’. You will be forwarded to the main page of the TPR SharePoint site:

d) LOCATE PRIVATE INSURANCE DETERMINATIONS

1) See the column at the left. Under DOCUMENTS, click Shared Documents.
2) On Shared Documents page, see the folder, Private Health Plans.
3) In Private Health Plans, find the Excel roster of private insurers and the folders for the 2011-12 and 2012-13 school years and the 2013-14 school year.
e) FIND SPECIFIC PRIVATE INSURER INFORMATION

To locate private insurance determinations in MDE’s SharePoint:

1) Check the current school year’s Excel roster of private insurers to see if the insurance plan listed. Note progress in obtaining a response: See the color codes and dates communiques are sent.

2) If a private insurer is NOT on the Excel roster:
   a) Go to MN-ITS: (http://mn-its.dhs.state.mn.us).
   b) Find the eligibility screen for the child in question in MN-ITS. Near the top of the screen, the first insurance listed is the Medical Assistance provider, even if it “looks like” a private insurance company. If there is no other company listed, bill MHCP.
   c) In MN-ITS, scroll down to OTHER INSURANCE. A firm listed in this section is a private insurer.

   - Capture and copy the insurance information. Include:
     - Carrier ID number assigned on MN-ITS
     - Coverage Types
     - Carrier Name (Name of health insurance plan)
     - Carrier Billing Address
     - Carrier Contact Phone
     - Optional: Group Number
     - Name of contact person at the plan with email; fax number
     - Any other contact information that will assist MDE

   DELETE the POLICY NUMBER and POLICY HOLDER NAME.
   This is private data and must not be shared with MDE or anyone else.

   - Paste the information into the body of an email. Address the email to ruthellen.luehr@state.mn.us. Use the subject line: TPR Private Insurer. Send. MDE will put the company name on the roster and make contact.

f) PLEASE PROVIDE MDE UPDATES AND SUGGESTIONS

Please relay any information a school district has from past contacts with private insurers or more current information than on the roster of insurers. And please send suggestions or corrections to the information that is posted on the excel roster. Copy the information in question and paste into the email with suggestions and corrections. For example:

Email subject: TPR Private Insurer update
Body: Found a street address for MEGA-COOL and a contact person. Also found a problem on a letter – check it out.

| MEGA COOL CORP – MN | c/o Comp Care, Inc., PO Box 64668, St. Paul, MN 551644 | Carrier ID#0001 | (651)662-5950; 866-356-2425 | Ima’s phone: 911-911-0001 | Ima Great Guy; email: igreat@cinga.com | PROBLEM: Wrong company name on this letter. 3 ltrs posted 8/1/13 |
NOTES:
Blue Card Claims is not an insurer but a routing company based on agreement among ‘the Blues’ for a person who lives and accesses health care in one state but is covered by a plan from another state. In MN-ITS, click on Blue Care Claims; consider the name of the company revealed the correct actual insurer. Check MDE’s SharePoint roster for that company.

A family may be assigned to one network provider/clinic but the payer is another firm. (Ex. Person covered by Health Partners but in residence in Northfield. As there is no Health Partners clinic in Northfield, the client is assigned to a local Allina clinic. The payer is still Health Partners.) The same occurs nationally. For example, a parent works for Wal-Mart. The company head-quarters in Arkansas selects a national insurer such as Aetna or Assurant. Aetna or Assurant may use the PreferredOne network in Minnesota to provide services but insurer/payer is still Aetna or Assurant. MN-ITS lists the correct insurance carrier/payer.

7. FOLLOW DHS GUIDANCE FOR BILLING MHCP

Find information on the DHS website (http://mn.gov/dhs/) > Partners and Providers > Health Care > MHCP Providers > IEP Providers.

Refer to the most current information for MHCP Providers - Individualized Education Program (IEP) Services and, specifically, the Program Manual.

Recall these important steps:

• When a PRIVATE insurer has denied coverage as posted on the MDE TPR Share Point site, the school district should bill MN-ITS, using the code OAB1. Then keep a paper or electronic copy of the letter in the child’s file or a central location to be available in the event of an audit.

• If there has been no response from a PRIVATE insurer after three attempts, MDE bundles and posts the letters in SharePoint. The district must 1) download and print the letters and a coversheet, 2) record the MN-ITS attachment code plus other identifying information on the coversheet and 3) fax all to DHS.
Example: **SCHOOL DISTRICT REQUEST FOR PAYMENT from Private Plan**

**IEP HEALTH RELATED SERVICES FOR A STUDENT WITH DISABILITIES**

<table>
<thead>
<tr>
<th>Name of Private Insurer and Code</th>
<th>Address:</th>
<th>Telephone:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>School District; NPI#</th>
<th>Address:</th>
<th>Telephone:</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>School contact person:</th>
<th>Email</th>
<th>Telephone:</th>
<th>Fax:</th>
<th>Notes:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Parent Name</th>
<th>Address:</th>
<th>Telephone:</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<table>
<thead>
<tr>
<th>Student Name</th>
<th>Subscriber (parent) Insurance number</th>
<th>Notes:</th>
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This student is receiving the following checked health related services in order to support special instruction as determined in his/her Individualized Education Program (IEP) Team. The student’s school-based (IEP) services include assessment and services for: *(Check services child is receiving):*

- Physical Therapy
- Occupational Therapy
- Speech-Language Pathology/Audiology
- Mental Health
- Nursing Services
- Assistive Technology Devices (Durable Medical Equipment)
- Interpreter Services provided during the services above

The billing code for these IEP services is T1018-xx.

- The school district is a qualified health care provider for Medical Assistant-reimbursable services. The school hires professional health care providers that meet qualifications for Medical Assistance billable services.
- The student has a medical diagnosis and the services the student receives are medically necessary.
- The IEP team determines the plan of action. If delegated medical functions are necessary, a health care provider (MD, Nurse Practitioner or Physician Associate) prescribes the services.

**Will the family’s insurance policy cover IEP health related services provided by school personnel?**

*YES / NO*

*If NO, DHS requires one or more reasons* for why your health plan does not cover IEP health related services provided by school personnel:

*If YES*, by federal law, special education must be provided at no cost to the family *(Free Appropriate Public Education – FAPE)*. Will there be any current or future cost to the family if you pay for these services? *Does not apply / YES / NO*

The family also has health coverage through Minnesota Health Care Programs (Medical Assistance and MinnesotaCare). If you say NO to payment for these services and provide a reason, payment will be made to the school by MHCP but only after payment for services is denied by the private insurer.

**PLEASE RETURN THIS SHEET WITH YOUR RESPONSE TO THE SCHOOL CONTACT PERSON NAMED ABOVE.** Your prompt attention is appreciated so that billing MA can be expedited.

**NOTE:** School district, attach the parent-signed consent to release information and to bill.

Example: MDE/REL/10-2013
Example: MDE REQUEST FOR PAYMENT FOR IEP HEALTH RELATED SERVICES

SCHOOL YEAR: 2014-15
Name of Private Insurer:
Address:
State/Zip
Telephone / Email:

DATE:
NOTICE #

Please read and respond to the questions below. Please sign, date and return.

Signature: ________________ Role/Position: ________________ Date: ________________

The Minnesota Department of Education (MDE) is requesting information on behalf of school districts and charter schools statewide. Schools have reported that families enrolled in your private insurance plan have children with Individualized Education Programs (IEP) and require health related services. The families are also eligible for coverage through public insurance, Minnesota Health Care Programs (MHCP (Medical Assistance (MA) or MinnesotaCare)). For students with both private and public plans, schools must first seek a payment determination from the private plan. If payment by the private plan is denied, schools bill MHCP at the Department of Human Services (DHS).

Individualized Education Program (IEP) health related services, billed using the code T-1018 xx, include assessment and services for the following:

- Physical Therapy
- Occupational Therapy
- Speech-Language Pathology/Audiology
- Mental Health
- Nursing Services
- Assistive Technology Devices (Durable Medical Equipment)
- Interpreter Services provided during the services above

✓ School districts are qualified health care providers for Medical Assistant-reimbursable services. School districts hire professional health care providers that meet qualifications for Medical Assistance billable services.

✓ The students have medical diagnoses and the services provided are medically necessary.

✓ Each student's plan is determined by an IEP team. If delegated medical functions are included in the plan, health care providers (Medical Doctors, Nurse Practitioners or Physician Associates) prescribe the services.

Will your private insurance plan cover IEP health related services provided by school personnel? YES / NO*

* If NO, DHS requires one or more reasons why your plan does not cover IEP health related services provided by school personnel.

* If YES, by federal law, special education must be provided at no cost to the family (Free Appropriate Public Education – FAPE). Will there be any current or future cost to families if you pay for these services? Does not apply. / YES / NO

Please return by scanning and emailing the form, faxing the form or sending by regular mail it to:

Ruth Ellen Luehr
Minnesota Department of Education, Special Education, P-32, 1500 Highway 36 West, Roseville, MN 55113

Email: ruthellen.luehr@state.mn.us; fax to 651-582-8729

Questions? Contact: Ruth Ellen Luehr: Telephone: 651-582-8403; or email (above)