

Billing Medicaid for Health-Related Services in Student's Section 504 Education Plans

Information and Answers for Families

Why are school districts billing Medicaid?

The Individuals with Disabilities Education

What can school districts bill Medicaid for?

School districts can only bill for health-related services that are outlined in the student's Section 504 plan. In general, services for which school districts may bill Medicaid are: evaluation and testing, nursing services, counseling services, and social work services.

Do school districts need parental consent to bill Medicaid?

Yes. Before billing Medicaid for the first time, the school district must ask for your permission to bill your or your child's public benefits or insurance to pay for your child's related services under the IDEA. School districts are required by the Family Educational Rights and Privacy Act (FERPA) to obtain parental consent before sharing information about a student. This includes sharing personally identifiable information about a student to Medicaid. To receive funding from Medicaid to help pay for the cost of services, the school district must have parental consent to bill Medicaid.

Can parents withdraw their consent to bill Medicaid?

Yes. Parents have the right to withdraw their consent at any time.

Notification Form for the Use of Public Benefits or Insurance for School-Based Service

School: Groton Public Schools

Address: 1300 Flanders Road

Mystic CT 06355

Phone: 860-572-2100

Website: <https://www.groton.k12.ct.us/>

If consent is not given by parents to bill Medicaid, will their children still receive 504 services?

Yes. Districts are required to provide all Section 504 plan services, at no cost to parents, even if the district cannot bill Medicaid. A school district may not require parents to sign up for or enroll in public insurance programs in order for their child to receive a free, appropriate education under IDEA, Part B.

If school districts bill Medicaid, will Medicaid services that parents or guardians receive outside school be affected?

No. Medicaid services received outside school and the child's Section 504 plan are authorized separately. The district may not use your child's benefits under a public benefits or insurance program if that use would result in a decrease of any other insured benefit; result in the family paying for services that would otherwise be covered by a public benefits or insurance program and that are required for the child outside of time the child is at school; result in discontinuation of coverage; or result in the risk of loss of eligibility for home and community based waivers based on aggregate health-related expenditures.

If medical service benefits are affected, families may contact **HUSKY Health** at 1-800-859-9889 (Monday-Friday, 9 a.m. – 7 p.m.). If behavioral health service benefits have been affected, families may contact the **Connecticut Behavioral Health Partnership** at 1-877-552-8247 (Monday-Friday, 9 a.m. – 7 p.m.).

Are school districts required to notify parents? If so, how often must parents be notified?

As the parent or guardian of a student who has or may have a disability, you have certain rights under federal and state law. Your child's school district must provide you with written notification of these rights regarding parental consent prior to accessing your public benefits or insurance for the first time and annually thereafter. This document serves as your written notification.

Where can parents get more information about this?

The US Department of Education Web site at
<http://www2.ed.gov/policy/speced/reg/idea/part-b/part-b-parental-consent.html>.