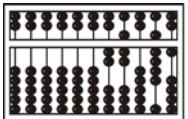


Medicaid Cost Report- 2016-17

Using Preschool Software system to assist with completing the Medicaid
Cost Report

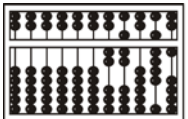


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**CP
SE** PORTAL

Framework

- ▶ 2016-17 Cost Report Training by PCG
- ▶ IEP Ratio and Tuition Calculations
- ▶ Transportation
- ▶ Preschool Reports for Completing the PSSHSP Cost Report
- ▶ Additional Reports
- ▶ BOCES
- ▶ Latest Medicaid in Education Alert 17-05



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 **PORTAL**

Medicaid Alert 17-04

CPE Cost Report Trainings

NYSED / Medicaid in Education / Issue #17-04

Medicaid in Education Alert

New York State Department of Health (DOH), Office of Health Insurance Programs (OHIP)
New York State Education Department (NYSED)
Preschool/School Supportive Health Services Program (SSHSP)
Medicaid in Education

Issue #17-04

To: All SSHSP Medicaid Providers

From: NYS DOH OHIP SSHSP &
NYSED Medicaid in Education Unit

Date: October 30, 2017

Subject: Certified Public Expenditure (CPE) Cost Report Training

Consistent with the New York State (NYS) Compliance Agreement with the Centers for Medicare and Medicaid Services (CMS), NYS is providing continuing School Supportive Health Services Program (SSHSP) training for relevant employees. SSHSP WebEx fall training sessions have been scheduled during the months of November and December 2017.

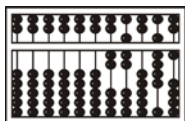
These sessions will be limited to the annual SSHSP cost reporting and desk review aspects of the certified public expenditure (CPE) component of the SSHSP. Because the random moment time study (RMTS) has been suspended for the 2017-18 school year, there is no need for an RMTS training this fall. This CPE process overview will be presented by representatives from the Department of Health's contractor, Public Consulting Group, Inc.

The following relevant employees are invited to attend one 90-minute training session: School district/county employees responsible for submission or development of cost reports; RMTS coordinators; and school district/county compliance officers (if applicable). Participation in a WebEx session is not mandatory, but is strongly encouraged for any staff new to the CPE process, or those with any cost reporting or RMTS questions. These Fall 2017 CPE trainings are being held as cost reporting is under way for the 2016-17 school year.

Registration is required. Participants may register at any time prior to the start of a session by clicking on the applicable Register Here link in the following NYSSHSP WebEx Training Schedule. When registering please enter your school district or county agency name in the box labeled "Company Name". An email confirming the registration was successful will be sent.

NYSSHSP WebEx Training Schedule

Tuesday 11/7/2017 10:00 - 11:30am [Register Here](#)



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PORTAL

Where we can help

Annual Payroll Information

→ Annual Contractors Costs Information

→ General and Statistical Information

Direct Medical Services Materials and Supplies

Direct Medical Services Equipment Depreciation

Transportation Payroll Information

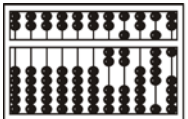
→ Transportation Other Costs

Transportation Equipment Depreciation

→ Annual Tuition Costs

Annual Edits

Cost Summary Report



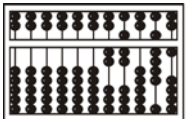
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CPE PORTAL

CPE Cost Report Training

IEP Ratio Methodology and Reporting Updates

- ▶ IEP Ratio denominator is “total number of students in the LEA with a direct medical service, as outlined in their IEP”
- ▶ Previously, this was
 - ▶ Calculated for you by BOCES
 - ▶ Based on a BEDS Day snapshot of your data
- ▶ Going forward
 - ▶ Must be supplied by you
 - ▶ Based on full school year of data

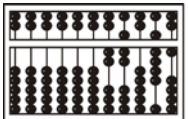


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 **PORTAL**

Students in the LEA with a Direct Medical Service as outlined in their IEP

- ▶ The SED Medicaid Website (<http://www.oms.nysed.gov/medicaid/>) lists the Direct Medical Service as OT, PT, ST, Psychological Counseling, Skilled Nursing, Psychological Evaluation, Medical Evaluation, Medical Specialist Evaluation, Audiological Evaluation
- ▶ Children with a Fee For Service Related Services that is a direct medical service (OT, PT, ST, etc.), are identified based on the existence of the related service enrollment
- ▶ For children in a center based tuition program we can only identify them if you indicate in the Preschool system that child has a direct medical service

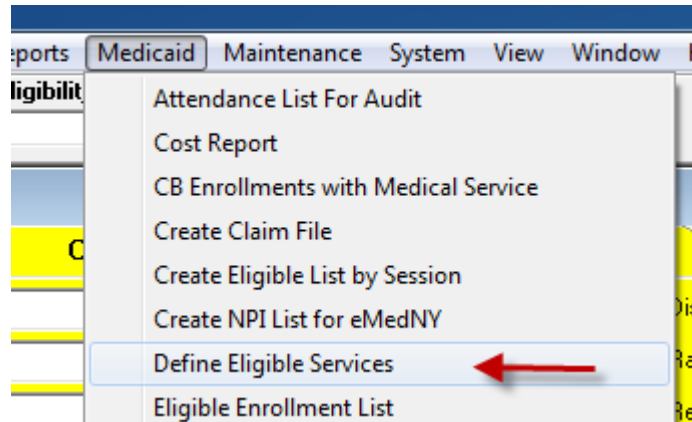


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C P
S E **PORTAL**

Defining Direct Medical Service in Preschool

- ▶ Using the top Menu bar in Preschool, Navigate to Medicaid->Define Eligible Services



Define Medicaid Eligible Services

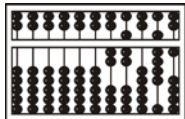
RS Service Types		
Service	Code	Medicaid Eligible
play therapy (OTH2)	OTH2	No
Audiology	AUD	No
Counseling	CSL	No
Occ. Therapy	OT	Yes
Physical Therapy	PT	Yes
Speech Therapy	ST	Yes
Visually Impaired Service	TVI	No
parent education training	CSL	No
Teacher of the Deaf	TDF	No
Orientation and Mobility	OM	No
Nursing	MED	No

Mark RS Service Type As
Eligible
Ineligible

Exit

EVAL Service Types		
Service	Code	Medicaid Eligible
Audiological	Aud	No
Education	Edu	No
Occupational Therapy	OT	No
Psychological	Psyc	No
Physical/Medical	PhMd	No
Physical Therapy	PT	No
Social	Soc	No
Speech/Language	SPL	No
Other (Physician)	OthP	No
Psychiatric	Psyi	No
Other (Non-Physician)	OthNP	No

Mark EVAL Service Type As
Eligible
Ineligible



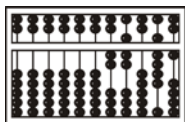
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SE PORTAL

Contractor Costs for Following Services

- ▶ There is an assumption that all these services are eligible, meaning
 - ▶ They were provided by a qualified provider
 - ▶ They were properly documented in IEP and CPSE process to qualify for medicaid

Audiological Evaluations	Speech Therapy	Skilled Nursing
Medical Evaluations	Physical Therapy	Psychological Counseling
Medical Specialist Evaluations	Occupational Therapy	
Psychological Evaluations		

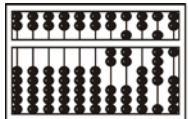
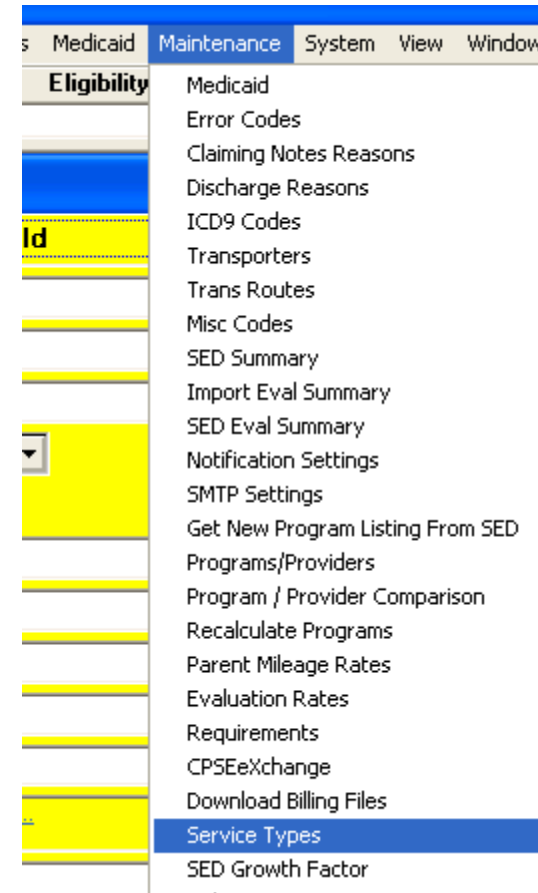


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PORTAL

Need to setup Preschool

- ▶ Before we can actually run the new reports, we need some minor setup in Preschool
- ▶ We need you to tie the related service types and evaluation types, to which services should be reported on the cost report.
- ▶ There is a new screen under the Maintenance menu for Service Types



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CPE PORTAL

Service Type Maintenance Screen (Related Services)

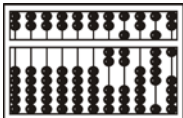
Service Type Code Maintenance

Services | Evaluations

Service Types

Service	SED Service Code	County RS Service	Medicaid Eligible	Rx Required	SSHSP Cost Report	DisplayOrder	Limit Type Span	Limit Pt
			<input type="checkbox"/>	<input type="checkbox"/>				
1:1 Aide - daycare	AID	AID	<input type="checkbox"/>	<input type="checkbox"/>				
assistive tech services	ATS	ATS	<input type="checkbox"/>	<input type="checkbox"/>				
Audiology	AUD	AUD	<input type="checkbox"/>	<input type="checkbox"/>				
Coordination (1 per	COR	COR	<input type="checkbox"/>	<input type="checkbox"/>			MONTHLY	1
Coordination (1 per	COR1	COR	<input type="checkbox"/>	<input type="checkbox"/>				
Counseling	CSL	CSL	<input type="checkbox"/>	<input type="checkbox"/>				
interpreter	OTH	INTRPT	<input type="checkbox"/>	<input type="checkbox"/>				
music therapy	MUS		<input type="checkbox"/>	<input type="checkbox"/>				
nursing	MED	MED	<input type="checkbox"/>	<input type="checkbox"/>				
Nursing	MED	MED	<input type="checkbox"/>	<input type="checkbox"/>				
Occ. Therapy - grp.	OT1	OT - group	<input type="checkbox"/>	<input type="checkbox"/>	Occupational Therapy			
Occ. Therapy - ind.	OT	OT - ind	<input type="checkbox"/>	<input type="checkbox"/>	Occupational Therapy			
Orientation and Mobility	OM	OM	<input type="checkbox"/>	<input type="checkbox"/>				
PARENT EDUC	PNT	PNT	<input type="checkbox"/>	<input type="checkbox"/>				
parent education	CSL	CSL	<input type="checkbox"/>	<input type="checkbox"/>				
Parent	OTH	PAR	<input type="checkbox"/>	<input type="checkbox"/>				
Physical Therapy - ind.	PT	PT - ind.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical Therapy			
Physical Therapy - grp.	PT1	PT - group	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical Therapy			
Play Therapy	OTH	PLAY	<input type="checkbox"/>	<input type="checkbox"/>				
play therapy 2	OTH2	OTH2	<input type="checkbox"/>	<input type="checkbox"/>				
Psychological	PSY	PSY	<input type="checkbox"/>	<input type="checkbox"/>	Psychological			
Social Work	SOC	SOC	<input type="checkbox"/>	<input type="checkbox"/>				
Speech Therapy - grp.	ST1	ST - group	<input type="checkbox"/>	<input type="checkbox"/>	Speech Therapy			
Speech Therapy - ind.	ST	ST - ind.	<input type="checkbox"/>	<input type="checkbox"/>	Speech Therapy			
Teacher of the Deaf	TDF	TDF	<input type="checkbox"/>	<input type="checkbox"/>				
Therapeutic Feeding	OTH	nth	<input type="checkbox"/>	<input type="checkbox"/>				

Done



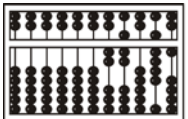
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SE PORTAL

Populate “SSHSP Cost Report” column

- ▶ There are two tabs, Service & Eval. Both have a SSHSP Cost Report Column
- ▶ Text must match PCG list exactly (spelling, spaces, capitalization)
- ▶ Only services with a value in the SSHSP cost report column will be included
- ▶ Allowable services from PCG list

Audiological Evaluations	Speech Therapy	Skilled Nursing
Medical Evaluations	Physical Therapy	Psychological Counseling
Medical Specialist Evaluations	Occupational Therapy	
Psychological Evaluations		

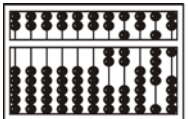


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C P
S E **PORTAL**

Indicating Direct Medical Service for Tuition Children

- ▶ Three options
 1. Enter the services from the IEP using the “RS in CB” screen
 2. Mark the tuition enrollment as having a Medicaid eligible service
 3. Make the very risky assumption that all center based children have a medical eligible service on their IEP
- ▶ We recommend using option 1, enter the services from the IEP
- ▶ Option 2 is a reasonable solution when used accurately
- ▶ We do not recommend option 3



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CPE PORTAL

Entering RS in CB services (aka CBRS)

Preschool (15-16 10 Month)

File Child / Services Payments Claims Providers eBilling Reports Medicaid Maintenance System View Window Help

Lookup Child **Current Child** **DOB** **Eligibility** **STAC ID** **Current Sess.** **CB**

ADCOCK, MALCOLM 11/1/2011 07/01/14 - 08/31/16 F42773 15-16 10 Month CTrans

Child / Services

Child / STAC Info

Center Based

STAC 09/01/15-06/24/16 9160-CWSN SCHOOL 5HR INTEGRATED (27073) Program Weeks Actual We

Program CWSN SCHOOL 5HR INTEGRATED 9160 (57119) 40 40

Start Date End Date Termination Date

09/01/2015 06/24/2016 MM/DD/YYYY

☒ 1:1 Aide? ☒ RS in CB ☒ Has Medicaid Medical Service on IEP

Program Maximum Hrs/Day Days/Wk

5 5

This Child 5 5

Full-Time Tuition Full-Time Aide Cost Weekly Rate Total Amount Class Ratio

27038 0.00 675.95 27038.00 06:01:01

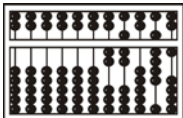
History

Program	Prg Wks	From	To	Term	Weeks	PFTE	FTE	Tuition	Rate	Hrs/Day	Days/Wk	Program Hou
CWSN SCHOOL 5HR	40	9/1/2015	6/24/2016		40	1	27,038.00	27038	5	5	5	

RS Delivered As Part of Program

ServiceType	Ind/Grp	FromDate	ToDate	Times/Wk	Min/Sess	Timespan	Rx Start	Rx End	Rx Signed	Service At Home	ICD	Add New
Physical Therapy	I	09/01/15	06/24/16	2	30	Weekly	09/04/15	06/24/16	09/04/15	<input type="checkbox"/>	315	
Speech Therapy	I	09/01/15	06/24/16	2	30	Weekly	09/01/15	06/24/16	09/01/15	<input type="checkbox"/>	315	
Speech Therapy	G	09/01/15	06/24/16	1	30	Weekly	09/01/15	06/24/16	09/01/15	<input type="checkbox"/>	315	
Occ. Therapy	I	09/01/15	06/24/16	2	30	Weekly	09/04/15	06/24/16	09/04/15	<input type="checkbox"/>	315	
Social Work	I	09/01/15	06/24/16	1	60	Monthly				<input checked="" type="checkbox"/>		
*										<input type="checkbox"/>		

OK Cancel



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How to tell if your County enters RS in CB

- ▶ If you are unsure of whether your county enters CBRS
 - ▶ Run the Enrollment Detail Listing Report (from top menu Reports->Enrollment Reports->Enrollment Detail Listing)
 - ▶ Run the report for just CB/RS service types
 - ▶ If there are only rows for Medicaid Children (CIN column), you probably only enter for Medicaid claiming which is insufficient

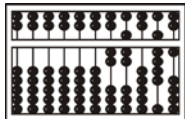
Enrollment Listing

Provider: [All Providers] [Reload] From: 09/01/15 To: 06/30/16

District: [All Districts]

Service type: ☐ CB ☐ SEIT ☒ CB/RS ☐ RS ☐ TRANS

Children											
	LastName	FirstName	DOB	Gender	CIN	Provider	ServiceType	ProgramName	Code	SC	FromD
	BOLLINGER	SERGIO	6/17/2011	M	EY20329Z	CWSN SCHOOL	CBRS-ST	CWSN SCHOOL 5HR	9100	I	3/21/20
	BOLLINGER	SERGIO	6/17/2011	M	EY20329Z	CWSN SCHOOL	CBRS-SOC	CWSN SCHOOL 5HR	9100	I	3/21/20
	BRINK	HERMAN	5/5/2012	M		CWSN SCHOOL	CBRS-PSY	CWSN SCHOOL 2.5HR	9165	I	9/1/20
	BRINK	HERMAN	5/5/2012	M		CWSN SCHOOL	CBRS-ST	CWSN SCHOOL 2.5HR	9165	I	9/1/20
	BRINK	HERMAN	5/5/2012	M		CWSN SCHOOL	CBRS-ST	CWSN SCHOOL 5HR	9160	I	2/29/20
	BRINK	HERMAN	5/5/2012	M		CWSN SCHOOL	CBRS-PSY	CWSN SCHOOL 5HR	9160	I	2/29/20



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Marking the tuition enrollment as having a Medicaid eligible service

- ▶ In lieu of entering the related services in a tuition program from the IEP, you can also just indicate that the child has them
- ▶ On County Center Based enrollment screen, click the check box "Has Medicaid Medical Service on IEP"
- ▶ This is automatically updated when you enter RS in CB

Preschool (15-16 10 Month)

File Child / Services Payments Claims Providers eBilling Reports Medicaid Maintenance System View Window Help

Lookup Child **Current Child** **DOB** **Eligibility** **STAC ID** **Current Sess.** **CB**

ADCOCK, MALCOLM 11/1/2011 07/01/14 - 08/31/16 F42773 15-16 10 Month CTrans

Child / Services

Child / STAC Info

Center Based

RS / SEIT

Transportation

Center Based

STAC 09/01/15-06/24/16 9160-CWSN SCHOOL 5HR INTEGRATED (27073) Program Weeks Actual We

Program CWSN SCHOOL 5HR INTEGRATED 9160 (57119) 40 40

Start Date End Date Termination Date

09/01/2015 06/24/2016 MM/DD/YYYY

☒ 1:1 Aide? ☒ RS in CB ☒ Has Medicaid Medical Service on IEP

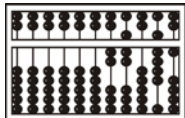
Program Maximum Hrs/Day Days/Wk

This Child 5 5

History

Full-Time Tuition	Full-Time Aide Cost	Weekly Rate	Total Amount	Class Ratio
27038	0.00	675.95	27038.00	06:01:01

Program	Prg Wks	From	To	Term	Weeks	PFTE	FTE	Tuition	Rate	Hrs/Day	Days/Wk	Program Hou
CWSN SCHOOL 5HR	40	9/1/2015	6/24/2016		40	1	27,038.00	27038	5	5	5	



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CPSE PORTAL

Batch updates of "Has Medicaid Medical Service on IEP"

CB Enrollments with Medical Services On IEP

Session: 15-16 10 Month

Retrieve

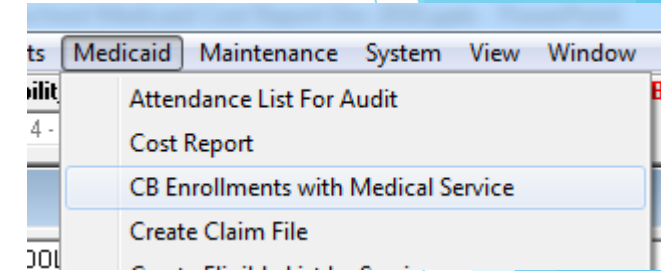
Excel

Update from RS in CB

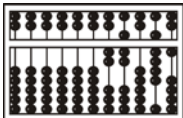
Mark All

Un Mark All

Has Medical On IEP	Last Name	First Name	CIN	From Date	To Date
<input checked="" type="checkbox"/>	ACUNA	STAR	EV79428W	09/09/15	06/24/16
<input checked="" type="checkbox"/>	ADCOCK	MALCOLM	ES50143J	09/01/15	06/24/16
<input checked="" type="checkbox"/>	AHMAD	NORMAN		11/02/15	06/24/16
<input checked="" type="checkbox"/>	ALARCON	CARROLL	EV83836F	09/08/15	06/23/16
<input checked="" type="checkbox"/>	ALVES	VIRGIE	FQ22287U	11/09/15	06/24/16
<input checked="" type="checkbox"/>	ANDREW	DARRIN		09/09/15	06/24/16
<input checked="" type="checkbox"/>	ARTEAGA	EMILIO	EW70871S	09/09/15	06/23/16
<input checked="" type="checkbox"/>	ASHTON	WESLEY		10/13/15	06/24/16
<input checked="" type="checkbox"/>	ASHTON	WESLEY		09/09/15	10/05/15
<input checked="" type="checkbox"/>	ASKEW	SHANNAN		09/09/15	06/24/16
<input checked="" type="checkbox"/>	BARRAZA	RUTHIE		09/09/15	06/24/16
<input checked="" type="checkbox"/>	BAUGH	WILLARD	ER83237J	10/26/15	06/23/16
<input checked="" type="checkbox"/>	BEARDEN	GRADY	PD90384E	09/08/15	06/23/16
<input checked="" type="checkbox"/>	BELANGER	SOFIA	EZ18077J	09/09/15	06/23/16
<input checked="" type="checkbox"/>	BENNER	VELDA		10/13/15	06/24/16
<input checked="" type="checkbox"/>	BENNETT	LEESA	EX83409H	03/07/16	06/24/16
<input checked="" type="checkbox"/>	BIGELOW	CRAIG	EU78636R	11/09/15	06/23/16
<input checked="" type="checkbox"/>	BILLINGSLEY	VELVA		10/07/15	06/23/16
<input checked="" type="checkbox"/>	BIRCH	TOMIKA		09/09/15	06/24/16
<input checked="" type="checkbox"/>	BLAKELY	RANDY	EX50635T	11/09/15	06/23/16
<input checked="" type="checkbox"/>	BLANK	GARRETT	EV67180H	09/08/15	06/24/16
<input checked="" type="checkbox"/>	BOCK	HARLEY		09/08/15	06/23/16
<input checked="" type="checkbox"/>	BOLAND	VICTORIA		01/04/16	06/24/16
<input checked="" type="checkbox"/>	BOLLINGER	SERGIO	EY20329Z	03/21/16	06/24/16
<input checked="" type="checkbox"/>	BOLLINGER	SERGIO	EY20329Z	09/01/15	03/18/16



- ▶ Retrieve fills the grid
- ▶ Excel exports grid to Excel
- ▶ You can update the 1st column by clicking in the grid
- ▶ Update from RS in CB, will check the box for every CB enrollment that has corresponding CBRs that are Medicaid eligible
- ▶ Mark All will check the box for every row
- ▶ Un-Mark All will clear the box for every row



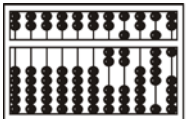
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Transportation

- ▶ If you plan on claiming Transportation for PSSHSP reimbursement, preschool can help collect the data needed for the report.
- ▶ To do this, on the grey transportation enrollment screen, use the radio buttons on the top to note the MA billable status

The screenshot shows a software window titled "Transportation Enrollment". At the top, there are fields for "STAC" (01/09/17-06/23/17TRANS (\$31,000.00)), "30346", and a dropdown menu. Below these are date fields: "Start Date" (01/09/2017), "End Date" (06/23/2017), and "Termination Date" (MM/DD/YYYY). To the right of these dates is a group of radio buttons. The "CB" radio button is selected. Next to it is a section labeled "Medicaid" with three options: "Meets Medicaid Rules", "Does Not Meet Medicaid Rules", and "Not determined". This entire section is circled in red. Below the date fields are "Transporter" and "Service" dropdown menus. To the right of these are "Contacted" and "Setup" checkboxes, with "Round Trip" checked under "Setup". Below these are fields for "CB Days" (110), "Rate" (0.00), "Additional" (0.00), "Total Rate" (0.00), "Notes", and "Total Trans" (0.00). At the bottom of the form is a table with columns: Type, Transporter, From Date, To Date, Service, Trip, Rate, Add Rate, # Of Trips, CTotals Rate, CTotals Trans, PA Vendor #, PA Trips / Day, PA Miles One Way, PA Rate / Mile, PA Total / Day, PA # Of Days, and PA Total. The table is currently empty. At the very bottom of the window are buttons: OK, Apply, New, Required, \$ Summary, Delete, and Cancel.



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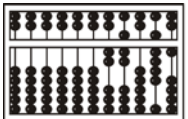
CP
SE PORTAL

Transportation

Medicaid One-Way Trip Ratio:

- ▶ A Medicaid one-way trip is defined as a trip in which a Medicaid enrolled student who has specialized transportation services in their IEP and received another Medicaid-covered service provided by the school district or county on the day of the trip. The numerator will be completed by PCG based on paid claims data
- ▶ If you entered trip information into preschool, the “Medicaid Cost Report” data will give you the data needed to complete the transportation information

$$\text{OWT Ratio} = \frac{\text{Total Number of Medicaid Paid One Way Trips (per MMIS)}}{\text{Total One Way Trips for Medicaid eligible students with specialized transportation in their IEP (from bus logs)}}$$



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 **PORTAL**

Transportation

Specialized Transportation:

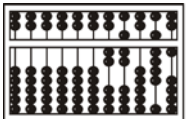
- ▶ The Specialized Transportation Ratio is used to break out specialized transportation costs from general transportation costs.
- ▶ If you used the “Medicaid Status” buttons on the Transportation enrollments, Preschool can report this data

**Specialized
Transportation
Ratio**

=

**Total Number of Medicaid Eligible Special Education
Students Receiving Specialized Transportation Services
per their IEP**

**Total Number of ALL Students Receiving Transportation
Services (Specialized or Non Specialized)**

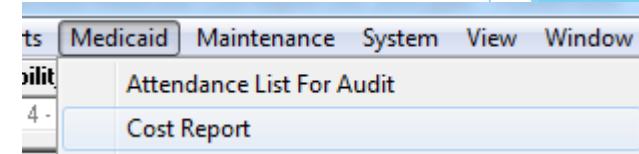


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**C P
S E** PORTAL

Medicaid Cost Report

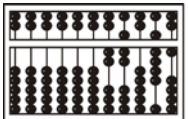
- ▶ Using the top menu, navigate to Medicaid->Cost Report
- ▶ Enter your date range
- ▶ Choose the appropriate method for determining which tuition enrollments have a Direct Medical Service on their IEP. This method is used for both the IEP ratio as well as determining what tuition costs should be reported



Service Date Range From Date: 07/01/16 To Date: 06/30/17	For Transportation <input type="radio"/> All Transportation is Specialized Transportation Documented in IEP <input checked="" type="radio"/> Only consider enrollments marked as "Meets Medicaid Rules" to have Specialized Trans Documented in IEP	Run Report
For IEP Ratio and Tuition Costs <input checked="" type="radio"/> Use RS Included in CB entries to determine which Children have a direct Medical Service included in IEP <input type="radio"/> Assume All CB children have a direct Medical Service included in IEP <input type="radio"/> Use "Has Medicaid Medical Service on IEP" indicator to determine children		

Cost Report Results

- ▶ Annual Contractor Costs
 - ▶ List that can be exported to CSV and uploaded to PCG reporting site
 - ▶ All individuals whose costs are captured in this section must be included on the Supplemental Form for Contracted Practitioners - this includes BOCES
 - ▶ Contract costs should only be reported for students with an IEP for a related service
 - ▶ Reminder: Contract Costs with other school districts or counties must be reported in Intergovernmental Contract Cost
 - ▶ Reminder: BOCES must be included in this section. The costs by discipline will need to be provided by them. These costs must be entered by hand on the Contractor Cost Schedule



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 **PORTAL**

Cost Report Results

Medicaid Cost Report

Service Date Range
From Date: 07/01/16
To Date: 06/30/17

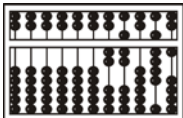
For Transportation
☐ All Transportation is Specialized Transportation Documented in IEP
☒ Only consider enrollments marked as "Meets Medicaid Rules" to have Specialized Trans Documented in IEP

For IEP Ratio and Tuition Costs
☒ Use RS Included in CB entries to determine which Children have a direct Medical Service included in IEP
☐ Assume All CB children have a direct Medical Service included in IEP
☐ Use "Has Medicaid Medical Service on IEP" indicator to determine children

Annual Contractors Cost Information | General and Statistical Information | Transportation Other Costs | Annual Tuition Costs | IEP Ratio Listing

Export To CSV

Service Type	Vendor Name	Clinician	Notes	Total Cost	Federal	Net
Occupational	ACCESS THERAPY			4037.5		
Occupational	ACHIEVEMENTS			3752.5		
Occupational	BEGINNINGS			2612.5		
Occupational	COLLINS KARA			21090		
Occupational	DZIEZYNSKI KARYN			10589		
Occupational	ECEC			13157.5		
Occupational	HELLMAN			2897.5		
Occupational	SPOTTED ZEBRA			427.5		
Occupational	SUNNYVIEW			43366.5		
Occupational	WHISPERING PINES			13442.5		
Physical Therapy	ACCESS THERAPY			6745		
Physical Therapy	ACHIEVEMENTS			1092.5		
Physical Therapy	BEGINNINGS			237.5		
Physical Therapy	DZIEZYNSKI KARYN			7172.5		
Physical Therapy	ECEC			4797.5		
Physical Therapy	FRANK KERRY			5700		
Physical Therapy	HELLMAN			570		



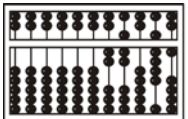
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SE
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Cost Report Results

- ▶ General and Statistical Information
 - ▶ IEP Ratio denominator
 - ▶ Transportation figures

$$\text{IEP Ratio} = \frac{\text{Total Number of Medicaid Eligible IEP Students with a Direct Medical Service in their IEP}}{\text{Total Number of ALL IEP Students with a Direct Medical Service in their IEP}}$$



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 **PORTAL**

Cost Report Results

Medicaid Cost Report

Service Date Range
From Date: 07/01/16
To Date: 06/30/17

For Transportation
☐ All Transportation is Specialized Transportation Documented in IEP
☒ Only consider enrollments marked as "Meets Medicaid Rules" to have Specialized Trans Documented in IEP

For IEP Ratio and Tuition Costs
☒ Use RS Included in CB entries to determine which Children have a direct Medical Service included in IEP
☐ Assume All CB children have a direct Medical Service included in IEP
☐ Use "Has Medicaid Medical Service on IEP" indicator to determine children

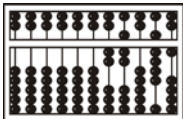
Run Report

General and Statistical Information

IEP Ratio
Total Medicaid SpEd Students with an IEP-Prescribed Reimbursable Service: N/A
Total SpEd Students with an IEP-Prescribed Reimbursable Service: 637

Specialized Transportation Trip Ratio
Total # of 1-Way Trips for Medicaid SpEd Students with Specialized Transportation Services Documented in the IEP: N/A
Total # of 1-Way Trips for SpEd Students with Specialized Transportation Services Documented in the IEP: 12

Specialized Transportation Ratio
Total Number of IEP Students Receiving Specialized Transportation Services: 1
Total Number of All Students Receiving Transportation Services: 205



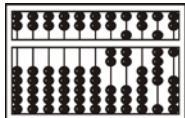
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Cost Report Results

- ▶ Transportation Other Costs
 - ▶ This is the Total Transportation costs for ANY child marked "Special Transportation"

The screenshot shows the 'Medicaid Cost Report' application window. It features several sections for configuring the report: 'Service Date Range' with date pickers for 'From Date' (07/01/16) and 'To Date' (06/30/17); 'For Transportation' with radio buttons for 'All Transportation is Specialized Transportation Documented in IEP' and 'Only consider enrollments marked as "Meets Medicaid Rules" to have Specialized Trans Documented in IEP'; and 'For IEP Ratio and Tuition Costs' with radio buttons for 'Use RS Included in CB entries to determine which Children have a direct Medical Service included in IEP', 'Assume All CB children have a direct Medical Service included in IEP', and 'Use "Has Medicaid Medical Service on IEP" indicator to determine children'. A 'Run Report' button is located on the right. Below these sections is a tabbed interface with five tabs: 'Annual Contractors Cost Information', 'General and Statistical Information', 'Transportation Other Costs' (which is selected and circled in red), 'Annual Tuition Costs', and 'IEP Ratio Listing'. The 'Transportation Other Costs' tab displays the text 'Contract-Transportation Services Transportation Services:' followed by a text box containing the value '\$264.36'.

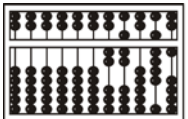


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Cost Report Results

- ▶ Annual Tuition costs
 - ▶ Need to be directly entered into PCG site- they do not accept the CSV upload for Tuition as they do for Contract Costs
 - ▶ Tuition cost should ONLY be reported for costs associated with a student who had an IEP for a related service
 - ▶ Reminder- Public School tuition should NOT be reported in Annual Tuition Cost. This should be reported in Intergovernmental Tuition
 - ▶ Reminder- Omit BOCES- the cost should be broken out by related service and reported in the Annual Contract Cost section



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C P
S E **PORTAL**

Cost Report Results

Medicaid Cost Report

Service Date Range
From Date: 07/01/16
To Date: 06/30/17

For Transportation
☐ All Transportation is Specialized Transportation Documented in IEP
☒ Only consider enrollments marked as "Meets Medicaid Rules" to have Specialized Trans Documented in IEP

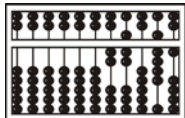
For IEP Ratio and Tuition Costs
☒ Use RS Included in CB entries to determine which Children have a direct Medical Service included in IEP
☐ Assume All CB children have a direct Medical Service included in IEP
☐ Use "Has Medicaid Medical Service on IEP" indicator to determine children

Annual Contractors Cost Information | **General and Statistical Information** | **Transportation Other Costs** | **Annual Tuition Costs** | **IEP Ratio Listing**

Run Report

Export To CSV

School	Notes	Total Cost	Federal Funds
ACHIEVEMENTS		\$475,779.80	
		\$111,371.62	
		\$651,620.77	
		\$1,220,552.67	
		\$806,613.03	
		\$918,447.34	
		\$553,688.95	
		\$63,963.23	
		\$985,653.50	

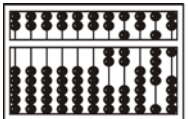


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Cost Report Results

- ▶ IEP Ratio listing
 - ▶ Prior years had to submit this thru CNYRIC
 - ▶ No new directions on when/if this is to be submitted this year
 - ▶ You can export to Excel the names of the children that comprise the IEP Ratio Denominator if you want to save this information



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 **PORTAL**

Cost Report Results

Medicaid Cost Report

Service Date Range
From Date: 07/01/16
To Date: 06/30/17

For Transportation
☐ All Transportation is Specialized Transportation Documented in IEP
☒ Only consider enrollments marked as "Meets Medicaid Rules" to have Specialized Trans Documented in IEP

For IEP Ratio and Tuition Costs
☒ Use RS Included in CB entries to determine which Children have a direct Medical Service included in IEP
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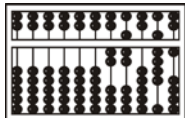
Run Report

Annual Contractors Cost Information | **General and Statistical Information** | **Transportation Other Costs** | **Annual Tuition Costs** | **IEP Ratio Listing**

ID	LastName	FirstName	MI	DOB	Gender	CIN
20101229				20101229	F	
20110427				20110427	M	
20110216				20110216	F	
20110302				20110302	M	
20110311				20110311	M	
20110616				20110616	M	
20101217				20101217	F	
20110706				20110706	M	
20110725				20110725	M	
20110418				20110418	M	
20110811				20110811	F	
20111219				20111219	M	
20110822				20110822	F	
20110730				20110730	M	

Total Number of Children have a direct Medical Service included in IEP: 637

Export To Excel



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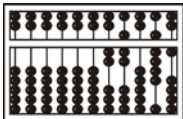
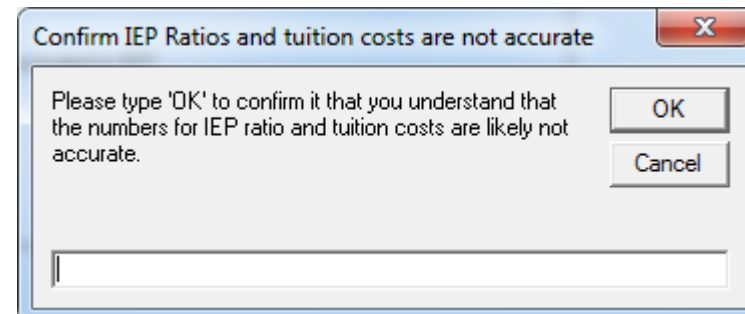
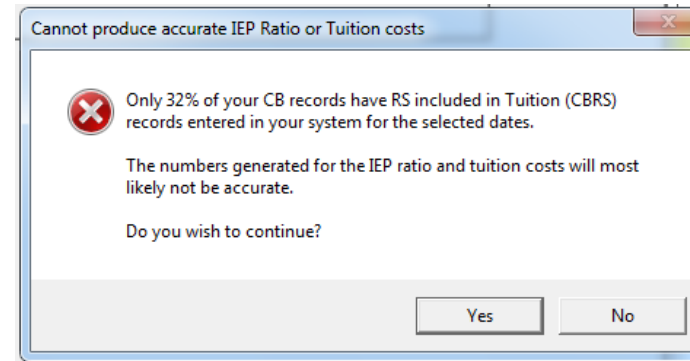
CP
SE
PORTAL

Warnings if not using CBRS

- ▶ If you select “Use RS Included in CB Entries to determine...” and the system notices that less than 50% of your CB tuition enrollments have corresponding CBRS,
 - ▶ You will be prompted with a warning
 - ▶ You will need to type “OK” to continue

For IEP Ratio and Tuition Costs

- ☒ Use RS Included in CB entries to determine which Children have a direct Medical Service included in IEP
- ☐ Assume All CB children have a direct Medical Service included in IEP
- ☐ Use "Has Medicaid Medical Service on IEP" indicator to determine children



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SE** PORTAL

Disclaimers

- ▶ If
 - ▶ you select “Use RS Included in CB Entries to determine...” and there is less 50% or
 - ▶ You select “Assume all CB children...”
- ▶ Then the numbers will have disclaimers indicating possible unreliability of the IEP Ratio and Tuition costs

Annual Contractors Cost Information | General and Statistical Information | Transportation Other Costs | Annual Tuition Costs

IEP Ratio

Total Medicaid SpEd Students with an IEP-Prescribed Reimbursable Service:

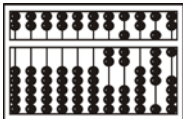
Total SpEd Students with an IEP-Prescribed Reimbursable Service:

Disclaimer: May not be a reliable figure

Annual Contractors Cost Information | General and Statistical Information | Transportation Other Costs | Annual Tuition Costs

Disclaimer: These costs may not be reliable

School	Notes	Total Cost	Federal Funds
▶ .		\$5,559.00	
		\$2,746,571.03	
		\$3,924,404.95	
		\$1,436,374.29	
		\$499,476.50	

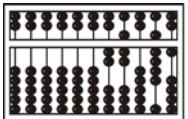


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Additional Reports

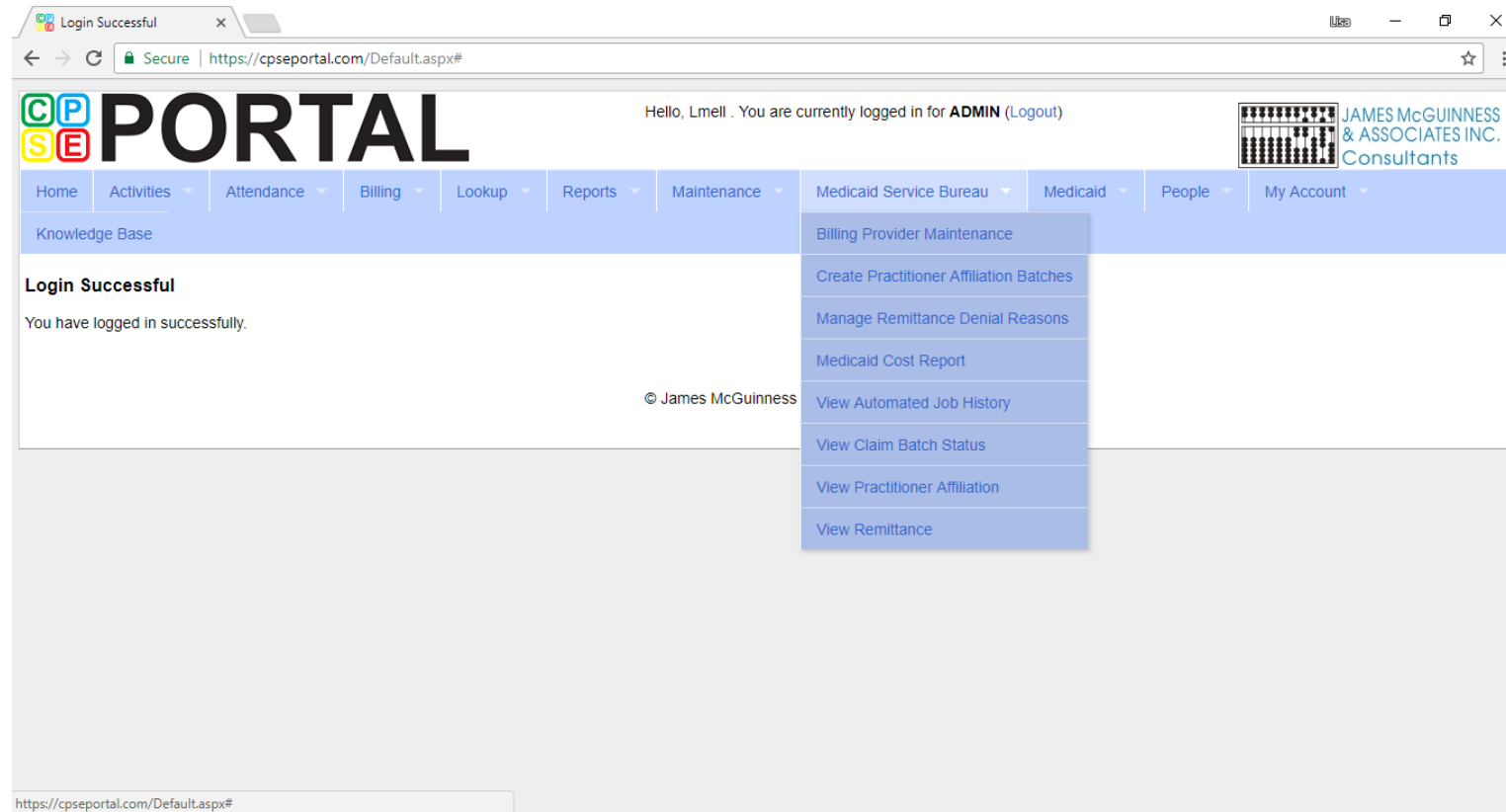
- ▶ 2 Reports:
 - ▶ Total Service Encounters
 - ▶ Supplemental Form (list of providers with NPI)
- ▶ For Counties that used CPSE Portal for all providers, all services, for the entire period of the cost report, there are 2 reports you can run to complete these
- ▶ These reports are found on the Portal under Medicaid Service Bureau, Medicaid Cost Report
- ▶ All other Counties must get this information directly from their agencies/providers



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Additional Reports



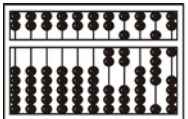
Additional Reports

- ▶ Select your county and click Retrieve

The screenshot displays the CPSE PORTAL interface. At the top, the logo "CPSE PORTAL" is visible, along with a user greeting: "Hello, Lmell . You are currently logged in for ADMIN (Logout)". A navigation bar contains links for Home, Activities, Attendance, Billing, Lookup, Reports, Maintenance, Medicaid Service Bureau, Medicaid, People, and My Account. Below this, a "Knowledge Base" section is present. The main content area is titled "Medicaid Cost Report" and includes a "Filters" section with a "County" dropdown menu set to "All Counties" and a "SchoolYear" dropdown menu set to "201617". A red arrow points to the "Retrieve" button next to the County dropdown. Below the filters, there are two tabs: "Service Provider Listing" and "Encounters".

Additional Reports-Encounters

- ▶ An encounter is defined as a documented face-to-face direct medical service visit that was provided pursuant to the recommendations of a students IEP by a qualified provider
- ▶ Need both fee for service related service sessions plus tuition based services to be counted
- ▶ Payments for non-treatment sessions should not be reported (CPSE meetings, etc.)
- ▶ Sessions that are not the full duration specified in the IEP should not be counted. If IEP says 2x45, and one day the session was only 40 minutes, that should not be counted



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Additional Reports-Encounters

Medicaid Cost Report

Filters

County
SchoolYear 201617

Service Provider Listing

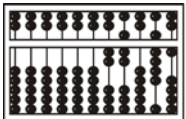
Encounters

Encounter Summary By Provider

Encounter Details For Provider

Excel

ServiceType	Description	Encounters
CSL	Counseling	432
HLT	School Health / Nurse	826
OT	Occupational Therapy	19359
OT1	Occupational Therapy Group	111
PSY	Psychological Services	407
PT	Physical Therapy	11724
PT1	Physical Therapy Group	6
ST	Speech Therapy	56159
ST1	Speech Therapy Group	29

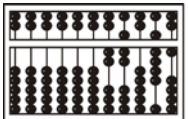


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C P
S E **PORTAL**

Additional Reports- Supplemental Form- List of Contracted Providers

- LEAs should only report Annual Contract Cost and Intergovernmental Contract Cost for students with an IEP for the health related service and are provided by Medicaid approved and qualified practitioner.
- Once the LEA has completed the cost report, the LEA should complete the Supplemental Form. The form should include the first name, last name, full professional job title, and NPI number for all practitioners associated with cost reported on the cost report.
- If the practitioner who provided the service works UDO a supervisor, then the LEA should report the supervisor's information in the "Supervisors Information" field of the form.
- If any of the above information is missing, the form will be considered incomplete.
- Once all practitioners are reported, please send via email to nysshsp@pcgus.com.



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 **PORTAL**

Additional Reports- Supplemental Form- List of Contracted Providers

Medicaid Cost Report

Filters

County

SchoolYear

Service Provider Listing

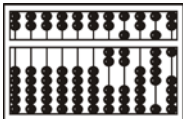
Encounters

Encounter Summary By Provider

Encounter Details For Provider

Excel

Last Name	First Name	Title	Agency Name	License #	NPI	Supervisor Last Name	Supervisor First Name	Supervisor Title	Supervisor License #	Supervisor NPI
	Jennifer	Licensed Speech & Language Pathologist	ACCENT ON CHILDREN, INC							
	Susan	Licensed Speech & Language Pathologist	ACCENT ON CHILDREN, INC							
	Stacy	Licensed Speech & Language Pathologist	ACCENT ON CHILDREN, INC							
	Robin	Licensed Speech & Language Pathologist	ACCENT ON CHILDREN, INC							
	Lynn	Licensed Physical Therapist	ACHIEVEMENT THERAPIES, LLC							
	Lianna	Licensed Speech & Language Pathologist	ACHIEVEMENT THERAPIES, LLC							



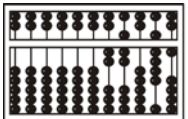
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CPE
SE PORTAL

BOCES - Tuition

- ▶ BOCES tuition programs should not be reported as tuition costs
- ▶ Instead, the costs for the direct medical services should be broken out of the tuition and reported as contractor costs
- ▶ How are the service costs broken out of the tuition? According to PCG...

“BOCES should be able to break out the health related expense at the LEA's request.”



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 **PORTAL**

BOCES Email Q&A from PCG



Mon 12/5/2016 10:02 AM

nysshsp <nysshsp@pcgus.com>

Re: Cost Report Questions related to Preschool programs

To: Frament, Tim

You replied to this message on 12/5/2016 10:03 AM.

B) A follow up for the BOCES question.

Where should BOCES tuition fees be reported?

BOCES tuition should NOT be reported, just service cost

The payments to BOCES are single payment for both Tuition and services. For some Counties, the vast majority of the medical service costs are embedded in tuition payments to BOCES.

What guidance does PCG have for determining those medical services costs?

Some possibilities are could be:

- Could BOCES use the County fee for service rate for that service and then approximate it by multiplying the corresponding fee-for-service rate times the # of services provided?

BOCES should be able to break out the health related expense at the LEA's request.

- It has been reported in your trainings/presentations, that PCG calculates a Health Related Tuition Percentage for each provider based on their CFR. Can PCG provide that to BOCES so that BOCES can apply that factor to approximate a cost?

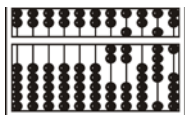
- We do not get a H RTP for BOCES because BOCES is not approved as a State Approved School for the purposes of this cost report.

Thank you,

Public Consulting Group, Inc. (PCG)

NYSSHSP@pcgus.com

866-912-2974

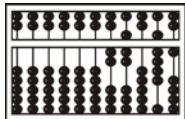


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CPE Cost Report Training by PCG

- ▶ Important Reminders:
- ▶ In order to report an allowed medical service cost, the service must be provided by a Medicaid qualified practitioner.
- ▶ The service must be included in the individual's IEP.
- ▶ The report must use Accrual Based Accounting.



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CPE PORTAL

Medicaid in Education Alert

Issue #17-05

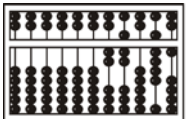
The Department of Health is implementing internal system updates to accommodate changes to physical and occupational therapy evaluation and re-evaluation billing codes. CPT codes 97001-97004 are replaced with 97161-97168 for dates of service on and after January 1, 2018. See Table 1 in this alert for the new CPT and rate codes for SSHSP billing.

As stated in Medicaid Alert #16-08, changes to the SSHSP CPT code list were necessary to comply with physical and occupational therapy evaluation and re-evaluation CPT code changes made in January 2017 by the American Medical Association (AMA). The new evaluation codes reflect 3 levels of patient presentation: low-complexity, moderate-complexity, and high-complexity. However, there will be no change in the reimbursement rates for physical and occupational therapy evaluations and re-evaluations. Service providers should refer to their professional associations (e.g., The American Occupational Therapy Association, Inc. and the American Physical Therapy Association) for guidance on the use of the new codes.

Prior to January 1, 2018 each enrolled SSHSP billing provider should receive correspondence from CSRA on behalf of the NYS Department of Health (DOH) indicating that the new billing codes have been added to their Medicaid enrollment file. The new codes must be used when billing SSHSP Medicaid for evaluations and re-evaluations conducted on and after January 1, 2018.....

Table 1: Crosswalk of Billing Code Changes Effective Date of Service (DOS) January 1, 2018 for SSHSP Physical and Occupational Therapy Evaluations and Re-evaluations

Billing providers should contact the Department of Health at (518) 473-2160 or email sshsp@health.ny.gov if they do not receive a letter by January 1, 2018 stating their billing codes have been updated.

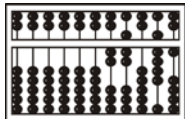


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Service Type	CPT Code	Rate Code	CPT Code	Rate Code	Description	Session Time/Units	Payment Rate
Physical Therapy	97001	2058	97161	2058	Physical therapy evaluation low complexity	1 per evaluation	\$54.81
			97162	2079	Physical therapy evaluation moderate complexity	1 per evaluation	\$54.81
			97163	2101	Physical therapy evaluation high complexity	1 per evaluation	\$54.81
	97002	2059	97164	2059	Physical therapy re-evaluation	1 per evaluation	\$29.74
Occupational Therapy	97003	2082	97165	2082	Occupational therapy evaluation low complexity	1 per evaluation	\$59.11
			97166	2105	Occupational therapy evaluation moderate complexity	1 per evaluation	\$59.11
			97167	2106	Occupational therapy evaluation high complexity	1 per evaluation	\$59.11
	97004	2083	97168	2083	Occupational therapy re-evaluation	1 per evaluation	\$34.98

A new version of Preschool will be available early 2018 with these updates



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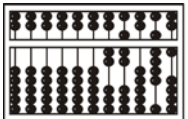
CPSE PORTAL

County Contacts

- ▶ Update our contact lists
- ▶ Please send your contacts to:

Lisa.mell@jmcguinness.com

- ▶ Also, please update us when staff changes so we can make sure we have the most current list in place

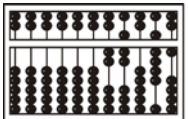


JAMES MCGUINNESS
& ASSOCIATES INC.
Consultants

 **PORTAL**

Contact Information

- ▶ preschoolsupport@cpseportal.com
- ▶ Questions??
- ▶ Next webinar Wednesday 12/13 10am for any questions you may have after running your own reports in Preschool



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