

Free Care FAQs

June 2019

- Q.** What's an example of reimbursable Free Care services outside of mental health?
A. Checking glucose levels, administrate medication, asthma care. Vision and hearing screenings if administered by a Medicaid qualified and registered provider. Services must be on another plan of care such as a health care plan or behavior intervention plan.
- Q.** Will there be a phased approach when implementing districts?
A. All districts will be implemented at the same time.
- Q.** What are the documentation requirements when Free Care services are rendered?
A. A plan of care will be required such as a 504 plan, health care plan or behavior intervention plan. Other plans may be approved pending state plan updates.
- Q.** Would there be an additional cost pool for Free Care?
A. No, we would not have an additional cost pool. This would be an addition to the existing direct service cost pool.
- Q.** Will participants have to answer more moments with the addition of Free Care?
A. No. Since we are not adding a cost pool, there would not be an increase in generated moments.
- Q.** Are clinic aides and behavioral specialist currently in the program as direct service providers?
A. No. Clinic aides and behavioral specialist are not included as direct service providers.
- Q.** Will we be able to add new providers to our Staff Pool List (SPLs)?
A. Any provider types that may be added will require Centers for Medicare and Medicaid Services (CMS) approval.
- Q.** How long does the Department anticipate getting State Plan Amendment (SPA) approval from CMS once the amendments are submitted.
A. CMS responses vary. We've seen them take anywhere from two months to five years.

Q: If my district does not identify any new providers to add to the SPL for additional Free Care services, can we opt out of participating in Free Care expansion?

A: No. Free Care expansion is part of a program transformation that will impact all districts/BOCES statewide regardless of the addition of direct service providers. Districts can choose not to expand their roster however their reimbursement will be limited to those people that are on the SPL. Current providers will still need to know the difference between a free care service and Individual Education Program (IEP) service when answering moments.

Q: Were the participants in the pilot time study existing providers or were they new to the Random Moment Time Study (RMTS) experience?

A: The pilot was a mix of new and existing providers.

Q: How did the Department determine what moments were Free Care reimbursable in the pilot?

A: The RMTS questions were altered to help capture other plans of care such as 504, behavior and health care plans.

Q: What can/should we be training our providers on right now in preparation of Free Care?

A: Training should begin with those who are already on the roster as they will need to know the difference between students that have an IEP/IFSP and those that have a standalone plan for services. Training should be ongoing as new providers are added to rosters.

Q: Can/will other job categories be considered in the expansion of eligible providers?

A: The Department is researching the option of adding Non-licensed Psychologist to the direct service cost pool. CMS will have to approve this update.

Q: What does the Department do if 85% compliance is not achieved for a time study quarter?

A: The Department works with districts on a case by case basis should they fall below the 85% compliance rate in a quarter. Most often a corrective action plan is developed by the district.

Q: Can additional time study notifications be added if CMS requires a change to the current notification process?

A: The number and frequency of notifications can be adjusted as long as they meet CMS requirements.

Q: How will the Department support districts to train providers so they know when they are rendering Free Care services?

A: The Department and Public Consulting Group (PCG) will train coordinators and work with the School Health Services (SHS) Stakeholders on training documents and plans. The training of direct service providers will be ultimately on the districts.

The School Health Services Program is a joint effort between the Colorado Department of Education and Department of Health Care Policy and Financing.
www.cde.state.co.us
www.colorado.gov/hcpf



Q. How will districts distinguish between students with health plans that are part of their IEP/IFSP and students with health plans without an IEP/IFSP?

A. This will be a training topic that district should be training participants.

Q. Do Free Care services still have to be rendered by a qualified medical provider?

A. Yes, Free Care services will still need to be rendered by a qualified medical provider.

Q. Will the questions capture all plans?

A. The time study questions will be revised to capture approved plans of care.

Q. Will safety response after threat assessment or suicide meet criteria for billing?

A. Most likely, if a medical necessity is determined and documented. There are a lot of variables and will have to be researched further.

Q. What are the requirements for student documentation to validate Free Care services?

A. Documentation requirements will remain the same as IEP/IFSP documentation. All plans must include scope, duration and frequency to be claimable.

Q. When will the districts know the questions that will be asked so they can start training staff on how to answer moments?

A. The exact wording of the questions has not been developed yet and will be dependent on CMS approval. The best way to prepare providers is to train them on the types of services prescribe and rendered for all plans of care.

October 2019

Q. Where can districts locate a list of providers that are currently approved to provide medical services outside the school setting?

A. Health Colorado Qualified Provider can be found at <https://www.colorado.gov/pacific/hcpf/information-provider-type>

Q. Will master's level psychologists be considered direct service providers since they may render reimbursable services within the community?

A. Potentially. More research needs to be done to verify if they are considered eligible providers in the greater community and how the School Health Services (SHS) requirement to hold Colorado Department of Regulatory Agency (DORA) licensure would affect this.

Q. If our current master's level psychologists are not certified by the Colorado Department of Regulatory Agency (DORA), should we remove them from the SPL?

A. No. Do not make any changes to your SPL until final determinations are made and communicated. Master's level psychologist are currently allowed in the Administrative cost pool if they are routinely performing outreach and coordination activities.



Q. Is the Department still looking at implementing Free Care in October 2020?
A. Yes. The Department submitted the SPA to CMS on November 2019 and hopes it will be approved in time to be implemented prospectively on October 1, 2020.

Q. Will there be supervisory requirements for behavioral health providers?
A. The requirements for providers that participate in the SHS program will be the same as their requirements in the larger community setting.

Q. Will health assistants be included in the list of added providers?
A. Health assistants already currently qualify for participation in the SHS program as a "Health Aide or Health Technician". SHS job categories for staff participants should be determined by their duties/activities rather than the district's title.

Q. What types of plans of care document medical necessity?
A. There is not an all-inclusive list of plans of care because any plan demonstrating necessity (scope, frequency, and duration) outlined by a qualified provider would be acceptable. A couple examples include health plans and 504 plans.

Q. How will our providers know the difference between services that are documented in IEPs and stand-alone plans of care?
A. This is what you will need to clearly outline within your district and should be a large focus of training for all providers.

Q. Is the SPA the same thing as the Time Study Implementation Guide?
A. No. The Time Study Implementation Guide will also require approval and will likely be used to answer some of the questions submitted in response to the SPA submission so that they can both be approved at the same time.

Q. How much of the Direct Medical Percentage (DMP) moments will we lose to Free Care?
A. It is nearly impossible to quantify the DMP percentage difference once Free Care is implemented but please continue to evaluate appropriateness of all participants included on the SPL in order to avoid a reduced reimbursable DMP in the current time study results.

January 2020

Q. If CDE changes the consent form do we have to go back and get consent if there's already one in place?
A. No.

Q. What kind of licensure is required for an Applied Behavior Analyst?
A. To be determined



Q. Will the new providers to be added to the Direct Service cost pool for Free Care services be required to bill and submit claims?

A. Yes. They will also be required to maintain progress notes or service documentation to support the claims.

Q. What is the Speech Language Pathologist Assistant (SLPA) licensure requirements?

A. To be determined

Q. What are the Current Procedural Terminology (CPT) codes that will be added to include the expansion of Free Care services?

A. To be determined

Q: Will writing the other medical plans of care be reimbursable?

A: Yes. The coding methodology will be similar to the structure currently in place for writing the health-related goals on an IEP/IFSP.

Q: What happens if CMS does not approve the State Plan Amendment (SPA) in time to update the OD20 SPL?

A: The Department can push back the starting quarter of the revised time study to include Free Care survey questions.

Q: If my district does not identify any new providers to add to the SPL for additional Free Care services, can we opt out of participating in Free Care expansion?

A: No. Free Care expansion is part of a program transformation that will impact all districts/BOCES statewide regardless of the addition of direct service providers. Since time study activity results are combined into a statewide percentage, those districts that chose to do nothing, regarding training of free care, will negatively impact all other districts/BOCES.

Q: Do Speech Language Pathology Assistants (SLPAs) submit claims as providers or under the supervising of a licensed Speech Language Pathologist (SLP)?

A: To be determined

Q: Will there be an impact to transportation with the Free Care expansion?

A: No. Transportation program requirements will remain the same

Q: Will Health Technician administering medication to students without an IEP qualify for reimbursable Free Care services?

A: Yes, if the other medical plan of care meets the minimum requirements of established medical necessity, scope, frequency, duration and service logs.

Q: Will there be language added to the new RMTS questions advising participants not to include the names of students?

A: These types of instructions will be added to the training screens that participants will be required to move through before answering their moments.



Q: If a special education teacher provides activities of daily living but also teaches should they be recategorized as Personal Care Aides or Health Technicians?

A: The primary duties and activities of each participant should be considered when adding participants to your SPL. Teachers are primarily hired because they have been educated and properly credentialed to teach.

Q: Will a master level social worker be allowable within the direct service providers cost pool?

A: This job category already exists in the direct service cost pool and specific licensure requirements can be found in the program manual.

Q: Will doctoral level Psychologists that do not have a DORA be allowable within the direct service providers cost pool?

A: No. The DORA license will be required for both a doctoral and master's level Psychologist.

