



# NEBRASKA

## DEPARTMENT OF EDUCATION

### The Individuals with Disabilities Education Act (IDEA) 92 NAC 51 (Rule 51)

### Medicaid in Public Schools (MIPS) Information as it relates to Special Education

The following information is intended to offer assistance in IEP/IFSP  
development to better document MIPS covered services.

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# Medicaid in Public Schools (MIPS) Guidance Document

## Medicaid in Public Schools (MIPS)

Public schools may receive Medicaid funds for some health services provided to students at school. The services must be medically necessary, the student must be eligible for Medicaid, and special education and services must be included in their Individual Education Plan (IEP) or Individualized Family Service Plan (IFSP).

## Nebraska MIPS

The following services are currently covered under Nebraska MIPS. All services must be provided in accordance with all relevant rules and regulations in force on the date of service:

1. Occupational Therapy
2. Physical Therapy
3. Speech-Language Therapy
4. Nursing
5. Mental Health
6. Personal Care
7. Vision
8. Transportation

To better understand MIPS covered services please visit <http://dhhs.ne.gov/medicaid/Documents/SBS%20Guide.pdf>

## School Health Plan

Students with chronic and complex healthcare needs often require specialized care at school to help ensure their health and safety. An Individual Health Plan may be developed by the school nurse as part of the IEP or a Section 504 Plan to specifically address your child's medical needs in the school setting. This individual health plan may be attached to the IEP as required documentation for the MIPS claiming process.

## Individual Health Plan

When healthcare needs impact the school day, an Individual Health Plan can be written as a related service provided by an IEP or as an accommodation under a Section 504 Plan. The school nurse helps identify students whose health needs affect their daily functioning and their ability to access the school curriculum. This usually includes students who:

- Are medically fragile
- Require complex health care support
- Need frequent and / or potential emergency contacts with a school nurse or other provider
- Have health care needs addressed on a daily basis

The Individual Health Plan is developed by the school nurse. *This care plan should be written with the input and approval of the primary care physician and / or your child's other health providers.* The plan identifies the medical needs that the child has at school and how those needs will be met. The team should look at the nature and complexity of the health care

need, such as suctioning, ventilator support or tube feeding and recommend the level of nursing or assistive personnel required to ensure the health and safety of the child. The team should consider supports needed during the entire school day, including the classroom, physical education, the school bus, behavior needs, field trips, and extracurricular activities.

Your school is obligated to provide the necessary school health services without cost to you. However, the school can ask you to pay for part or all of the health services through a financial assistance program such as your Medicaid, private insurance or other sources of funding, but only if this will not reduce your benefits or create additional cost to you. It is up to you to decide whether you will use these outside resources.

The Individual Health Plan will often require frequent updating as changes in the child's medical condition and needs occur. You can request an IEP or 504 Plan meeting at any time to address your concerns.

## **Nursing Services**

The Individual Health Plan should detail the nursing services that will be required in the school environment. There are a variety of options for nursing care, ranging from using an on-site school nurse for intermittent needs to assigning a dedicated one-to-one nurse for the entire school day. Some school districts may use Licensed Practical Nurses or aides who are supervised by a Registered Nurse.

When planning for nursing in the school environment it is important to consider:

- Type of skilled medical needs
- Level and frequency of skilled medical needs
- Proximity of the nurse to the child
- Type of nursing skill and / or licensure required to provide the care
- How providing the required care impacts student participation in a typical school schedule

Sometimes a family can use the same nurse before, during and after school. In this situation, before and after school nursing care is often paid for under a financial assistance program such as a home care benefit, a public waiver program or by private insurance. However, many school districts are beginning to hire their own nursing staff as a cost cutting strategy. As a result, families often face the challenge of providing nursing in the home to cover before and after school hours. This can be challenging because nurses are sometimes unwilling to work these short and fragmented shifts. Therefore, some families have selected home instruction on their child's IEP to avoid this dilemma.

## **Sample IEP language for Personal Assistance Services (PAS) and Nursing Services**

**Paraprofessional/PAS - Please be very specific in your IEP to identify all of the personal care supports your student needs.**

- Due to student's cerebral palsy, she requires paraprofessional/PAS support to assist her with personal care tasks including the following Activities of Daily Living (ADL's): mobility, transfers, positioning, grooming, dressing, eating and toileting. These

activities will be supervised by a qualified professional and the special education teacher will be the responsible party.

- Paraprofessional/PAS support is necessary to meet student's personal care needs by observing and redirecting her explosive behavior that often results in serious self-injury. The observation and redirection will occur throughout the entire school day and during transportation to and from school on the bus. Student also requires assistance with grooming and toileting. This activity will be supervised by a qualified professional and the classroom teacher will be the responsible party.
- Paraprofessional support necessary to provide daily tube feedings to the student as directed by family and physician under the supervision of the nurse. Training is provided by the nurse. Parents provide the food and equipment and will report schedule changes as needed.
- Due to student's spina bifida, paraprofessional/PAS support is needed daily to complete clean intermittent catheterization (CIC). Para services are also needed to assist with other activities of daily living including: dressing, assistance with transferring, mobility and positioning. These activities will be supervised by a qualified professional and the special education teacher will be the responsible party.

### **Nursing Services**

- Due to the student's myotonic dystrophy he will have access to full-time nursing services to continuously monitor his airway and breathing, provide suctioning and oxygen administration. The nurse will administer ordered tube feedings; assist with mobility, transfers, positioning, grooming, dressing and toileting.
- Student receives medication daily in the school health office for the treatment of her ADHD. Medication management is ongoing and provided by a nurse.
- Student diagnosed with diabetes in 2017. She needs to report to the nurse before meals and as needed for blood glucose checks and insulin administration. Nurse will provide ongoing diabetes management. Health and emergency care plan is in place and should be followed to meet student's health care needs in school.

### **Mental Health**

MENTAL HEALTH SERVICES. Medicaid covers behavioral modification, psychotherapy services, psychological testing, assessment needs for specific therapy services and evaluation as documented in an Individual Education Plan 10 (IEP) or Individualized Family Service Plan (IFSP). In addition to the requirements in 25-003.01 (D), mental health services must: (i) Be necessary to diagnose, treat, cure or prevent regression of significant functional impairments resulting from symptoms of a mental health disorder diagnosis; (ii) Be supported by evidence that the treatment improves symptoms and functioning for the individual client's mental health or substance use disorder diagnosis; and (iii) Be reasonably expected to improve the individual's condition or prevent further regression so that the services will no longer be necessary.