



# **School Health and Related Services Program (SHARS)**

## **Compliance Review Guide**

**2010-2011**

## INTRODUCTION

The **Texas Education Agency (TEA)** and **Health and Human Services Commission (HHSC)** jointly developed the School Health and Related Services (SHARS) program to enable school districts in Texas to obtain federal Medicaid reimbursement for certain health-related services provided to Medicaid-eligible children with disabilities enrolled in special education. Federal regulations allow for interagency agreements between state educational and Medicaid agencies to ensure the appropriate management of such programs.

Provisions of a Memorandum of Understanding (MOU) between TEA and HHSC requires SHARS programs be monitored periodically. The TEA will conduct reviews of provider program and payment compliance with program rules and guidelines.

## OVERVIEW OF COMPLIANCE REVIEW

**PURPOSE.** The purpose of the School Health and Related Services (SHARS) program compliance review is to:

- a. monitor provider program and payment compliance with program rules and guidelines for certain health-related services provided to Medicaid-eligible children with special needs enrolled in special education;
- b. obtain information to assist school districts with SHARS reimbursement claims and cost reporting;
- c. provide technical assistance and policy clarifications to school districts;
- d. validate information reported to HHSC by school districts ;
- e. work in cooperation with school districts to minimize exposure to provider waste, program abuse, and fraud.

**RESPONSIBILITIES.** The Texas Education Agency (TEA) has the primary responsibility for SHARS program compliance monitoring. TEA is committed to ensuring school districts are adequately documenting health-related services provided to obtain Medicaid reimbursement for services provided to students who have Individual Education Plans (IEPs) that prescribe the needed services.

SHARS services eligible for Medicaid reimbursement include:

- 1. Audiology Services
- 2. Counseling

3. Nursing Services
4. Physician Services
5. Occupational Therapy
6. Physical Therapy
7. Psychological Services, including assessments (procedure code 96101)
8. Speech Therapy Services
9. Personal Care Services
10. Specialized Transportation in a school setting--must be provided the same day the health-related service is provided. Specialized transportation must meet the definition of specially adapted vehicle. The IEP must document the need for specialized transportation and describe the medical necessity for specialized transportation.

### **On-Site/Desk Review Process**

School districts will be reviewed annually. TEA will select up to 15 school districts for each quarter for review based on approved risk-based criteria provided by HHSC.

TEA will contact the HHSC to receive claim and billing information for students from each school district selected for a 30-day review period predetermined by TEA.

At a minimum, the following is a suggested checklist of documents that should be collected and maintained for SHARS documentation; this is not an all inclusive list:

- Full and Individual Evaluation
- ARD/IEP documents
- Attendance records
- Assessment/evaluations
- Provider qualifications (current licenses and certifications)
- Written agreements (contract) for contracted service providers
- Required prescriptions, evaluations, or referrals for corresponding services
- Supervision logs
- Session notes or service logs
- Personal care services documentation
- Delegated nursing services documentation
- Specialized transportation documentation (daily trip logs; maintenance logs/records; bus documentation; documentation for cost report)
- Claims Submittal and Payment Histories (R&S Reports and General Ledger)

- Copies of signed/notarized quarterly Certification of Funds (COF) letters and supporting documentation, including quarterly COF Reports
- Nonschool SHARS provider affiliation letter and attachments (if applicable)
- Cost Report and supporting documentation such as Salary and benefit information, documentation of participant list for the Random Moment Time Study, receipts for materials and supplies claimed on appendix A of the Cost Report, IEP and One-way trip verification/documentation, and allocation methodology if SSA or Co-op.

**NOTE:** The child's name and Medicaid number should appear on every page of the student records (see the Provider Enrollment and Responsibilities Section of the current TMPPM). This would include each page of the ARD/IEP document, session notes and service logs, and evaluations.

### **Notification of Compliance Review**

Each school district selected for a SHARS program compliance review will receive a letter notification detailing instructions to facilitate the compliance review process.

For Desk Reviews, school districts will be required to provide the needed documents to TEA by ground mail within thirty (30) days of the request.

For On-Site Reviews, school districts will be required to make the needed documents available for review in a designated area at the program site.

**SCOPE.** The compliance review will include:

- a. Review of the following records for each student file selected;
  - 1) Eligibility Assessment (Procedure Code 96101)
    - verify current assessment/evaluation is included in the student's IEP/ARD that determined the student's eligibility for Special Education Services
  - 2) Student's Individual Educational Plan (IEP) that was effective during the month selected for review
    - for each SHARS service paid during the month reviewed, review IEP for:
      - (a) description of medical necessity documentation authorizing the SHARS service(s) and,
      - (b) the quantity (i.e. hours, units, etc.) or frequency of the SHARS service(s).
    - compare information listed in the IEP with the claim/billing information
    - review IEP for compliance with the federal IDEA (34 CFR)
  - 3) Prescription/Evaluation/Referral information for speech therapy, occupational therapy, and/or physical therapy, as appropriate

- verify current referral/prescription documents for the selected students, as appropriate
- 4) Licensure/certification that was in effect during the month reviewed for all providers who provided related/medical service to a student
- verify that each of the providers were appropriately certified and/or licensed
- 5) Session notes from each provider for each session that Medicaid reimbursement was received during the month reviewed
- review session notes from each provider or compliance with the appropriate Texas Medicaid Provider Manual

Session notes must include:

- student's Medicaid number
- reference to medical necessity; IEP objective
- date of service
- time session begins
- time session ends
- total billable minutes
- number of units
- service provided in a group or individual setting
- notation as to activity performed
- student observation
- signature/initials

Services requiring session notes are:

- speech therapy services
- occupational therapy services
- physical therapy services
- counseling services
- psychological services-treatment
- audiology services

- 6) Personal care services (PCS) documentation
- must answer the following questions or provide the requested documentation:
    - (a) the reason(s) for PCS, such as medical necessity, etc.
    - (b) goals and objectives
    - (b) when/where are the services needed; and,
    - (c) examples of PCS;
  - billable start time, billable stop time, total billable minutes, and the type of personal care service that was performed.

- 7) Delegated nursing services documentation including medication administration.
  - 8) Specialized transportation logs for each student service is provided to, as appropriate
    - verify compliance with IDEA and Medicaid requirements;
    - verify medical necessity is documented in the IEP (need for special adaptation & the adaptation is specified);
    - verify another SHARS service was provided on the same day the specialized transportation is provided.
  - 9) Attendance registers for the selected students
    - verify selected students were in attendance on the day of health-related service was provided.
- b. Preparing and issuing the compliance review report to the school district and HHSC.
  - c. Follow-up areas of concern, discrepancies and recommended corrective actions after issuance of compliance review report.

In accordance with the MOU, results of the compliance reviews and reports will be provided to HHSC for their review. If significant issues or discrepancies are discovered during the desk review, a more in-depth review will be conducted. HHSC has the authority to disallow any claims questioned during the review process. A copy of the report will also be provided to the school business manager and Special Education Director.

## **SELF-MONITORING TOOL**

A self-monitoring tool has been developed for school districts to use to conduct an in-depth self-evaluation of its SHARS program documentation for audit and review purposes. By utilizing the self-monitoring tool as a guide for adequate documentation of health-related services provided, districts can avoid recoupment of SHARS Medicaid payments for lack of medical documentation during audits.

The self-monitoring tool can be downloaded from TEA's website [here](#).

## **RETENTION OF RECORDS**

TEA requires SHARS records be retained for at least seven years pursuant to educational records retention requirements. [Records Retention Schedule](#) Medicaid records must meet federal retention guidelines and, as such, must be maintained for a minimum period of five years from the date of service or until all audit questions, appeal hearings, investigations, or court cases are resolved. The federal guidelines governing public education require records to be stored for seven years. SHARS providers must maintain records as outlined in the TMPPM

in the Provider Enrollment and Responsibilities Section and the SHARS Section, which meet the federal retention guidelines.

At a minimum, the following is a suggested checklist of documents that should be collected and maintained for SHARS documentation. This is not an all inclusive list:

- ARD/IEP documents
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- Assessment/evaluations
- Provider qualifications (current licenses and certifications)
- Written agreements (contract) for contracted service providers
- Required prescriptions or referrals for services
- Supervision logs
- Session notes or service logs
- Transportation documentation (daily trip logs; maintenance logs/records; bus documentation; documentation for cost report)
- Claims Submittal and Payment Histories (R&S Reports and General Ledger)
- Copies of signed/notarized quarterly Certification of Funds (COF) letters and supporting documentation, including quarterly COF Reports
- Nonschool SHARS provider affiliation letter and attachments (if applicable)
- Cost Report and supporting documentation such as Salary and benefit information, documentation of participant list for the Random Moment Time Study, receipts for materials and supplies claimed on appendix A of the Cost Report, IEP and One-way trip verification/documentation, and allocation methodology if SSA or Co-op.

**NOTE:** The child's name and Medicaid number should appear on every page of the medical records (see the Provider Enrollment and Responsibilities Section of the current TMPPM). This would include each page of the ARD/IEP document, session notes and service logs, and evaluations.

Records may be kept in electronic files or microfilm; however, the "original records" must also be maintained.

## **PARTICIPATION IN SHARS**

To be eligible to **receive and retain** federal reimbursement for Texas Medicaid reimbursement as a provider of medical services for SHARS, a school district must:

- Be enrolled and approved for participation as a Texas Medicaid provider;
- Obtain a National Provider Identifier (NPI);
- Ensure that SHARS services are provided by approved/qualified providers;
- Meet TEA standards for delivery of SHARS;
- Abide by rules and regulations of TEA;
- Meet all Random Moment Time Study (RMTS) requirements and participate in all three (3) quarterly RMTS periods;
- Bill for SHARS allowable services covered by Texas Medicaid; and

- Submit an annual SHARS Cost Report according to all state regulations and published guidelines.

To enroll as a SHARS provider, the school district must complete the Texas Medicaid fee-for-service provider enrollment form on the Texas Medicaid and Healthcare Partnership (TMHP) website: [Texas Medicaid Provider Enrollment](#)

**For further information go to the HHSC SHARS website:**  
[School Health and Related Services](#)