

Business and Non-Instructional Operations

Medical Reimbursement for Special Education Students

In accordance with federal and state law Eastford School personnel will seek Medicaid reimbursement (1) for eligible medically related services provided to Medicaid eligible special education students and (2) when applicable, request permission of parents/guardians to access private health insurance. School personnel shall also inform parents/guardians that use of private health insurance may affect benefits available through such insurance or costs of such insurance.

The Board of Education, having a student population of less than one thousand students, may conduct a cost benefit analysis in a form prescribed by the Commissioner of Social Services to determine whether the cost to participate in the medical assistance program exceeds the revenue that would be generated for the Board. The Board, if exempted from the requirements of this policy after such cost benefit analysis, shall complete and submit such analysis to the Commissioner of Social Services every three years in order to remain exempt.

No child shall be denied special education and related services in the event parents/guardians refuse to use private health insurance, apply for Medicaid, or permit school district personnel to request Medicaid payment.

Medicaid payments received shall be:

- A. paid to the town, provided such payments shall be treated as a reduction in special education expenditures by crediting the special education expenditure account rather than town revenue, or
- B. upon agreement of the board of selectmen, paid to the board of education which may expend such funds in the fiscal year in which they are received.

Legal Reference: Connecticut General Statutes

10-76d Duties and powers of boards of education to provide special education programs and services. State agency placements; apportionment of costs. Relationship of insurance to special education costs.

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Medical Reimbursement for Special Education Students Regulations

The Board of Education (Board) authorizes the superintendent or designee to seek Medicaid reimbursement for eligible medically related services provided to Medicaid-eligible special education students in accordance with federal and state law. The services for which the Board may bill Medicaid include audiologist services, evaluation and testing, nursing services, occupational therapy, physical therapy, speech therapy, psychological services, and social work services.

The Board will utilize the following procedures:

1. **Eligibility Determination:** The superintendent/designee shall determine, for each student who requires special education services and for each student who is referred to special education, if that child is eligible for Medicaid.
2. **One-Time Written Consent:** The superintendent/designee shall obtain a one-time written consent from the parent or guardian, after providing the written notification described below, before accessing the student's, the parent's, or the guardian's public benefits or insurance for the first time. This consent must specify:
 - The personal identifiable information (PII) that may be disclosed (records or service information);
 - The purpose of the disclosure (billing for services);
 - The agency to which the disclosure may be made (e.g., Department of Social Services/Medicaid); and
 - That the parent or guardian understands and agrees that the District may access their public benefits or insurance to pay for services.
3. **Written Notification:** The superintendent/designee shall provide written notification to parents or guardians before accessing public benefits for the first time and annually thereafter. The notification must explain all protections available under Part B of the Individuals with Disabilities Act (IDEA). The notice must be in understandable language and in the native language of the parent or guardian unless clearly not feasible.
4. **Application Assistance:** If a child is eligible for Medicaid but not a current recipient, the superintendent/designee shall request and assist the parent or guardian with the application process.
5. **Reimbursement Requests:** For Medicaid-eligible children, the superintendent/designee will request written permission to seek reimbursement for health-related special education costs.
 - A. If permission is granted, claims will be submitted through the State Department of Administrative Services (DAS).
 - B. If permission is denied, the Board will terminate efforts to secure Medicaid reimbursements for that child.

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6. Voluntary Participation: Parental consent to access Medicaid is strictly optional. Refusal to provide consent does not relieve the Board of its responsibility to provide all required special education services at no cost to the parent or guardian.
7. Exemption for Districts with Fewer Than 1,000 Students: * A. Cost-Benefit Analysis: Per C.G.S. 10-76d(a), a Board with a student population of less than one thousand may elect not to participate in the Medicaid reimbursement program if a cost-benefit analysis determines that administrative costs exceed potential revenue.
 - o A. Submission Process: This analysis must be performed on the form prescribed by the Commissioner of Social Services.
 - o B. Three-Year Re-verification: To maintain an exempt status, the Board must re-conduct and submit this cost-benefit analysis to the Commissioner of Social Services every three years.
 - o C. Documentation: The District shall maintain a record of the most recent submission and approval of exemption to ensure compliance during state audits.

Legal Reference: Connecticut General Statutes

- 10-76d: Duties and powers of boards of education to provide special education programs and services. (As amended by P.A. 99-279, P.A. 18-182, and P.A. 24-206e).
- 1-266 to 1-286: Uniform Electronic Transactions Act (permitting electronic filing and signatures).
- 42 CFR Parts 431, 433, and 440: Medicaid Program; Elimination of Reimbursement Under Medicaid for School Administration Expenditures.
- 34 C.F.R. §300.154(d): Individuals with Disabilities Act (IDEA) Part B, related to parental consent to access public benefits or insurance.