

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201108 APRIL 5, 2011



Coverage of IEP-related nursing and transportation services

The Indiana Health Coverage Programs (IHCP) provides coverage for nursing services and transportation services provided by public school corporations for students with health-related nursing and transportation needs identified in Individualized Education Programs (IEPs). The Office of Medicaid Policy and Planning (OMPP) and representatives from the Indiana Department of Education (DOE) developed the instructions in this bulletin to assist school corporations in billing for these services. School corporations may submit claims to the IHCP for nursing and transportation services provided on or after July 1, 2010, to Medicaid-enrolled students with health-related nursing and transportation needs identified in IEPs.

IEP nursing service

Medicaid reimbursement is available for IEP nursing services rendered by a registered nurse (RN) employed by or under contract with a Medicaid-enrolled school corporation provider when the services are medically necessary, as ordered by a physician and provided pursuant to a Medicaid-enrolled student's IEP. The IEP is the prior authorization for the IEP nursing services; thus, no additional prior authorization is necessary. School corporations should bill the Current Procedural Terminology (CPT^{®1}) code 99600 TD TM and the appropriate number of units based on accurate start and stop times.

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IEP nursing services

CPT Code	Description	Billing Unit	Reimbursement
99600 TD TM	IEP-related nursing services	15 minutes	\$9.97 per 15 minutes

Aggregate daily total care time should be billed. If total daily care is eight minutes or more, the provider may round the units up to the 15-minute unit of service and bill one unit of 99600 TD TM. If total daily care time is seven minutes or less, the provider cannot round this up, and therefore, cannot bill for it.

Documentation of IEP nursing services must include the start and stop times for each IEP nursing service provided per date of service. Documentation of IEP nursing services provided off-site or during a school field trip must note the place of service and include a description of the beginning and ending dates and times of the school field trip. The student's IEP must specifically authorize the Medicaid-covered IEP service for which there is a documented medical need.

Coverage and reimbursement of CPT 99600 TD TM includes all services performed in accordance with the scope of practice for a registered nurse. Thus, CPT 99600 TD TM is an all-inclusive code, including, but not limited to, administration of oral medication and nebulizer treatments. The exception to this is diabetes self-management training (DSMT). If DSMT is provided pursuant to a Medicaid-enrolled student's IEP, the most appropriate code should be billed with the IEP-related modifier TM to identify it as an IEP-related service. Providers are reminded that, as with all IEP nursing services, DSMT must be medically necessary and provided pursuant to a Medicaid-enrolled student's IEP. Additionally, all other requirements and guidelines stated in IHCP provider communications, including the *IHCP Provider Manual* and provider banners and bulletins, must be met. Further information may also be found in *School Corporation Medicaid Billing Tool Kit, Chapter 8.2*, located on the [Indiana Department of Education Web site](http://www.doe.in.gov) (www.doe.in.gov).

IEP nursing services – DSMT

CPT Code	Description
G0108 TM	Diabetes outpatient self-management training services, individual, per 30 minutes (IEP related)
G0109 TM	Diabetes outpatient self-management training services, group session (2 or more) per 30 minutes (IEP related)

IEP transportation service

Medicaid reimbursement is available for IEP transportation services rendered by personnel employed by or contractors of a Medicaid-enrolled school corporation provider when the services are medically necessary and provided pursuant to a Medicaid-enrolled student's IEP. IEP-related transportation services are not covered when provided by a member of the child's family, unless that person is employed by or a contractor of the school corporation.

IEP transportation services must be authorized in the child's IEP and must be provided to enable the child to receive another Medicaid-covered service identified in the child's IEP. The IEP is the prior authorization for the IEP transportation service; thus, no additional prior authorization is necessary. Two types of IEP transportation services are covered

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on a day when the child received another Medicaid-covered IEP service: (1) a trip from home to school and the return trip (school to home); and (2) a trip from school or home to an off-site Medicaid service provider and the return trip (off-site Medicaid provider to school or home). IEP transportation services include transportation of a child who resides in an area that does not typically have school bus service when that child's IEP stipulates a medical need for transportation, and all other requirements are met.

IEP transportation services shall be provided using a type of vehicle that is appropriate for the child's disability and which meets the specifications established in:

- 575 IAC 1-5;
- 575 IAC 1-5.5; or
- 575 IAC 1-1-1 (a) through (h).

Additional payment is available for an attendant, subject to the limitations in 405 IAC 5-30-8 (1) and (2), provided the student's IEP includes the need for an attendant, and all other Medicaid requirements are met.

When billing IEP transportation services, modifier TM must be attached to the end of all transportation billing codes to identify the service as IEP related. Additionally, school corporations should follow all IHCP transportation guidelines and rules, as stated in IHCP banners and bulletins, including [BT200505](#), and the *IHCP Provider Manual*. Additional information may be located in *School Corporation Medicaid Billing Tool Kit, Chapter 8.2*, located on the [Indiana Department of Education Web site](#) (www.doe.in.gov). The only transportation guidelines and regulations from which school corporations are exempt are listed below:

- Prior authorization requirement – The student's IEP serves as the prior authorization for IEP transportation services; thus, no additional PA is required, regardless of the number of one-way trips.
- Enrollment requirements set out in 405 IAC 5-4-2 – When transportation services provided conform with 405 IAC 5-30-11, and requirements set out in IC 20-27 are met.
- Copayment requirement – Pursuant to federal law, transportation copayments should not be collected by school corporations for members who receive IEP transportation services.
- Member's signature on documentation – Member's signature is not a documentation requirement for IEP transportation services. However, school corporations are responsible for all other transportation documentation requirements identified in IHCP bulletins and banners, including [BT200505](#), and the *IHCP Provider Manual*. Additional information may also be found in *School Corporation Medicaid Billing Tool Kit, Chapter 8.2*, located on the [Indiana Department of Education Web site](#) (www.doe.in.gov). This includes the member's Medicaid identification number, which may be documented on the trip log by office personnel.

The IHCP defines a trip as *transporting a member from the initial point of pickup to the drop-off point at the final destination*. The member being transported must be present in the vehicle in order for IHCP reimbursement to be available. The IEP transportation must be the least expensive type of transportation that meets the medical needs of the member. Additionally, providers are expected to transport members along the shortest, most efficient route to and from a destination. Providers must bill all transportation services according to the level of care rendered, not the vehicle type.

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For a complete list of transportation codes, please refer to [Chapter 8](#), Section 4, of the *IHCP Provider Manual* and IHCP banners and bulletins, including [BT200505](#). When billing IEP transportation services, school corporations should attach the information modifier TM to the end of all appropriate transportation billing codes to identify the services as IEP related. It is anticipated that the most frequently billed IEP-related transportation codes will be those for common ambulatory services (CAS) and nonambulatory services (NAS). The CAS and NAS code sets follow. Common ambulatory services (CAS), also referred to as *commercial* ambulatory services, may be provided to a member who is able to walk. Claims for ambulatory members transported in a vehicle equipped to transport nonambulatory members must be billed according to the CAS level of service and rate, and thus, not billed according to the vehicle type. Nonambulatory services (NAS) are transportation services provided to nonambulatory members who must travel in wheelchairs to or from an IHCP-covered service.

IEP-Related Common Ambulatory Service (CAS)

Note: CAS transportation indicates level of service rendered, not vehicle type.

HCPCS Code	Description
A0425 U3 TM	Ground mileage, per statute mile; CAS (TM = IEP related)
T2001 TM	Non-emergency transportation, patient attendant/escort (CAS) (TM = IEP related)
T2003 TM	Non-emergency transportation, encounter/trip (CAS) (TM = IEP related)
T2004 TM	Non-emergency transportation, commercial carrier, multi-pass (CAS) (TM = IEP related)
T2007 U3 TM	Transportation waiting time, air ambulance and non-emergency vehicle, one-half (½) hour increments; CAS (TM = IEP related)

IEP-Related Nonambulatory Service (NAS)

Note: NAS transportation indicates level of service rendered, not vehicle type.

HCPCS Code	Description
A0130 TM	Non-emergency transportation, wheelchair van base rate (TM = IEP related)
A0130 TK TM	Non-emergency transportation, wheelchair van base rate; extra patient or passenger, non-ambulance (TM = IEP related)
A0130 TT TM	Non-emergency transportation, wheelchair van base rate; individualized service provided to more than one patient in same setting (TM = IEP related)
A0130 U6 TM	Non-emergency transportation, wheelchair van base rate; additional attendant (TM = IEP related)
A0425 U5 TM	Ground mileage, per statute mile; NAS (TM = IEP related)
T2007 U5 TM	Transportation waiting time, air ambulance and non-emergency vehicle, one-half (½) hour increments; NAS (TM = IEP related)

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Although the first 10 miles of a CAS or NAS trip are automatically deducted from each one-way trip, CAS and NAS providers must bill for all mileage, including the first 10 miles, to ensure proper reimbursement. For trips of less than 10 miles, the provider is not required to bill mileage; however, if mileage is billed, the mileage processes as a denied line item. Providers must bill the IHCP for whole units only. Partial mileage units must be rounded to the nearest whole unit. For example, if the provider transports a member between 15.5 miles and 16.0 miles, the provider must bill 16 miles. If the provider transports the member between 15.0 and 15.4 miles, the provider must bill 15 miles.

QUESTIONS?

If you have questions about this bulletin, please contact Customer Assistance at (317) 655-3240 in the Indianapolis local area or toll-free at 1-800-577-1278.

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