

Pennsylvania State Board of Occupational Therapy Education and Licensure Newsletter

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School-Based Services and Medicaid Billing

By Kerri Hample, OTD, OTR/L

Many preschool and school-age students receiving occupational therapy services through the Individuals with Disabilities Education Act qualify for Medicaid billing through the Department of Education's School-Based Access Program.

While it is the responsibility of the preschool program and school district to ultimately submit Medical Access billing to the program's statewide vendor, Leader Services, it is the therapist's responsibility to supply adequate, legible documentation to support such billing.

As with any third-party reimbursement program, there are many procedures that must be followed for the preschool program and school district to receive Medical Access reimbursement. Typically therapists use the Leader Service's *Professional Services Log* and *Description Slip* in either a paper or electronic format (with original signature) to substantiate the billing.

Occupational therapists and occupational therapy assistants working with children in preschool and school-based programs who are billing Medical Access for their services are advised to visit Leader Service's [Web site](#) for a complete understanding of the billing process.

From the site's home page, click on *Provider Manual* and then open the *School-Based Access Program Manual*. Chapters 4 and 5 specifically relate to the billing of occupational therapy services through this program.

Therapists are highly encouraged to reference progress reports written for the preschool, school district or Intermediate Unit program at the bottom of the service log by writing, "Additional data can be found in the current IEP and progress report submitted to district/family on _____."

Additionally, in the student treatment progress block on the *Professional Services Log*, it is highly recommended that reference be made to specific Individual Education

Plan goals or specially designed instructions within the individual education plan, rather than making generic comments.

As with any documentation related to billing, it is suggested that therapists provide as much information as possible in an effort to justify the services rendered to any reader. Please consult your district Medical Access billing representative for further clarification on the documentation needed to support billing.

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