

51535.5 Local Educational Agency (LEA) Services

(a)

Reimbursement to LEA Providers is limited to the specified set of LEA Services defined in Section 51190.4 and set forth in Section 51360.

(b)

LEA Services shall be reimbursable only when provided to an LEA eligible beneficiary, as defined in Section 51190.1; by an LEA Practitioner, as defined in Section 51190.3; and subject to the limitations of this section.

(c)

When a beneficiary is covered by a managed care plan contract the following applies:(1) If the beneficiary does not have an IEP or an IFSP, the LEA Provider may be reimbursed for LEA Services for which the plan is not capitated under the managed care plan contract; (2) If the beneficiary has an IEP or an IFSP, the LEA Provider may be reimbursed for LEA Services rendered according to the IEP or IFSP as well as LEA Services for which the plan is not capitated under the managed care plan contract.

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(d)

Any claims for LEA services, as defined in Section 51190.4, rendered by an LEA Practitioner shall conform with the standards set forth in Welfare and Institutions Code, Section 14115.

(e)

LEA Providers shall adhere to and comply with all federal and state third party liability requirements prior to billing Medi-Cal, including but not limited to policy directives issued by the federal Department of Health and Human Services and Health Care Financing Administration and those standards found in 42 United States Code Section 1396a(a)(25); 42 Code of Federal Regulations Section 433.139; Welfare and Institutions Code, Sections 14005, 14023.7, 14124.90; and Title 22, California Code of Regulations, Section 51005 and Article 15 commencing with Section 50761.

(f)

LEA Services are reimbursable subject to the following limitations: (1) Notwithstanding Section 51304, reimbursable LEA Services, as set forth in Section 51360(b)(1) through (8) are limited to medically necessary services up to a maximum of twenty-four (24) services per twelve- (12) month period for an LEA eligible beneficiary by one LEA Provider. (2) Any LEA Services beyond limits in (1) above shall be provided only as authorized and documented as medically necessary in one of the following: (A) The Individualized Education Plan (IEP), as set forth in Education Code, Section 56340 et seq., for special education students documents the need for additional services, and is maintained in the school's

records; or (B) The Individualized Family Service Plan (IFSP), as set forth in Government Code, Section 95020, for special education students documents the need for additional services, and is maintained in the school's records; or (C) The Individualized Health and Support Plan (IHSP), meaning a plan for assessment and treatment of students with disabilities or disorders other than those who have been diagnosed as eligible for special education and are therefore treated under an IEP. The IHSP documents the need for additional services, and is maintained in the school's records.

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(g)

Reimbursement for LEA Services shall not exceed the maximum allowances listed in this section. (1) Additional 15 minute period means any complete 15 minute period immediately following the maximum minutes allowed for the initial service unit.

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(h)

Maximum allowances for LEA Services are as follows:

Procedure Code	Maximum Allowance
X4900.....LEA health and mental health evaluation and health and mental health education.....	\$19.13
X4905.....LEA physical therapy--initial service unit (20-90 minute range).....	36.66
X4910.....LEA physical therapy--each	

additional 15 minutes.....	7.20	X4915.....	LEA occupational therapy--initial service unit (20-90 minute range).....	36.66		
X4920.....		LEA occupational therapy--each additional 15 minutes.....	7.20	X4925.....	LEA speech pathology and audiology services--initial service unit (15-45 minute range).....	23.76
X4930.....		LEA speech pathology and audiology services--each additional 15 minutes.....	11.88	X4935.....	LEA psychology and counseling services--initial service unit (15-90 minute range).....	39.91
X4940.....		LEA psychology and counseling services--each additional 15 minutes.....	9.97	X4945.....	LEA nursing services--initial service unit (15-90 minute range).....	32.34
X4950.....		LEA nursing services each additional 15 minutes.....	8.09	X4955.....	LEA school health aide services (15-90 minute range).....	6.06
X4960.....		LEA medical transportation (per trip).....	18.54	X4965.....	LEA mileage (per mile).....	1.30
X4970.....		LEA case management--low cost (per 15 minute increments).....	12.38	X4975.....	LEA case management--moderate cost (per 15 minute increments).....	14.40
X4980.....		LEA case management--high cost (per 15 minute increments).....	16.42			

(i)

The amount payable to the LEA Provider shall be the lesser of either: (1) the billed amount of charges or (2) The above listed maximum allowance multiplied by the federal medical assistance percentage (FMAP) for California that is effective on the date of payment.

(1)

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(2)

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(j)

The amount payable in (i) above shall be reduced by any or all of the following:

(1) Any processing charges withheld by the State as stated in the contract between Department of Health Services and the LEA Provider; or (2) Any third-party collections.

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