

How one district boosted Medicaid reimbursements

Only \$7,690 one year, and \$112,090 the next

By Sheila Carmody
Senior Writer

In June of 2002, Churchville-Chili school district's end-of-year reimbursement for Medicaid related services amounted to only \$7,690.

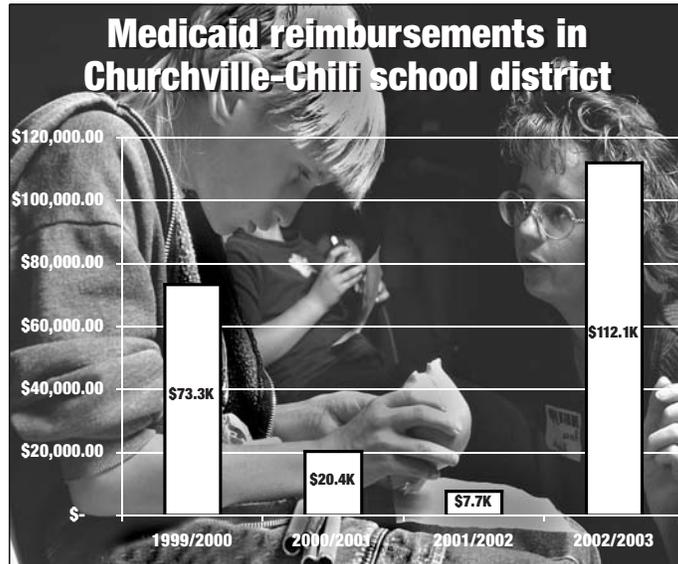
Elaine Damelio, pupil services director in the Monroe County district, knew they were spending much more than that on services for Medicaid-eligible special education students. She thought the district needed an outside expert.

A former colleague at the Fairport school district recommended Damelio contact Kinney & Associates, Inc., and in one year's time the Medicaid management reimbursement claim service firm bumped up the district's year-end reimbursement total to \$112,090. That's more than 14 times as much as Churchville-Chili received the previous year and 50 percent more than the previous high of \$73,000.

School districts are required to provide specific health-related services for special education students, but Medicaid regulations are complex and change so frequently it's difficult to keep abreast of the changes, Damelio said. Consequently, claims are left unmade, and some school districts receive less than they're entitled to.

In an effort to help districts improve their finances, NYSSBA has endorsed Kinney & Associates, which has a history of helping many districts increase their Medicaid reimbursement rates. "They help us understand the regulations, and the regulations do change frequently," Damelio said.

Based in Clifton Park in Saratoga County, Kinney & Associates currently serves 156 school districts in five states,



Medicaid reimbursements soared after the Churchville-Chili school district hired a specialist, Kinney & Associates, at the beginning of the 2002/03 school year.

Source: Kinney & Associates, Inc.

including 82 in New York State.

Calls to Kinney clients by *On Board* turned up similar stories.

"I know we were struggling with it," said Al Dietrich, Livonia school district's business administrator. Staff attended workshops on how to make Medicaid claims, but the minute someone in the office thought they had it all figured out, the government changed the regulations.

"Where do I go from here?" was the question asked most often around the office, Dietrich said. "Medicaid is a very specialized area, and that's when it pays to go outside."

Medicaid reimburses school districts for a variety of health-related services for special-education students, everything from occupational and physical therapy to transportation, psychological services and evaluations.

Kinney supports school districts by:

- Identifying the Medicaid-eligible special education population.
- Identifying eligible services.
- Reviewing documentation to ensure requirements are met.
- Tracking and reconciling claims submitted.
- Providing training to administrators and therapists.

Once a district contracts with Kinney, the firm provides support for making current claims and goes back and recovers reimbursements due from past years that were missed by the district, Damelio said.

Districts say that Kinney staff are quick with answers to questions, such as: Should we continue to collect and process paperwork even after a student is removed from the eligibility list? Have we completed all of the claims on a student who's left the district?

And in the event of an audit, backup systems are in place and Kinney's services are available to the districts they serve.

Many districts report monthly through Kinney's online application system, which collects information required by Medicaid. They also receive reimbursement monthly, and "on a monthly basis we're looking for that source of revenue," Damelio said.

Reimbursement as well as cost for Kinney's services vary from school district to school district. Kinney's fee is based on a district's Medicaid-eligible population at the outset and doesn't change from one year to the next, even if the number of students increases.

"Usually (the Medicaid-eligible population) doesn't decrease; it increases," Damelio said.

School districts are required by law to provide specialized services to special education students, and the expense of those services give districts every incentive to improve their tracking of Medicaid-related services. Districts are "becoming more assertive in trying to recoup as many costs as they can so they can pass that savings on to the taxpayer," Damelio said.



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