

Individual Plan of Care Guidance

The School Based Health Services (SBHS) Medicaid program provides partial reimbursement to education agencies¹ (EAs) for medically necessary and medically appropriate Medicaid-covered services provided to children and young adults (birth to age 21) in education settings. Medicaid requires supporting documentation for all services.

The Oregon Health Authority (OHA) has introduced the Individual Plan of Care (IPOC)² for SBHS services to ensure services are medically necessary and medically appropriate in alignment with the student's educational needs and Medicaid guidelines. IPOC covers a variety of plans and does not replace the Individual Education Program (IEP) or the Individualized Family Service Plan (IFSP). The IEP or IFSP may serve as an IPOC. The elements required to bill Medicaid are identified in the table below and may be found between the IPOC and supporting documentation.

Elements required to bill Medicaid

IPOC	Supporting documentation
Effective date	 Date, location, and duration of service
Education Agency name	Education Agency name
Child or young adult's first and last name	 Child or young adult's first and last name (number in group, when applicable)

¹ See Oregon Administrative Rule (OAR) 410-133-0040

² See OAR 410-133-0050

IPOC	Supporting documentation
	Child or young adult's Medicaid ID
	Child or young adult's diagnosis code
Health service type	Medical need for the service
 Nature, extent, or units of service 	 Name of the individual providing the service
Therapeutic value of service	 Name of the individual supervising the service (when applicable)
	Signed parent/guardian consent

If all required elements are met the following plans may serve as an IPOC:

- Individual Education Program (IEP);
- Individualized Family Service Plan (IFSP);
- Individualized Healthcare Plans (IHP); or
- Any individualized health or behavioral health plans, which may include, but are not limited to:
 - Nurse treatment plans of care.
 - Occupational therapy service plans.
 - Physical therapy plans of care.
 - Behavioral health service plans.

Section 504 plan consideration

Recommended practice for services provided in relation to a Section 504 plan is to have a separate IPOC document linked to, and referenced within, the Section 504 plan. For example, for a student who has a Section 504 plan for diabetes management, the additional elements for the IPOC could be contained in the nurse treatment plan of care and supporting documentation (i.e., log notes, evaluations/assessments, written recommendation).

Other covered services

The following services may be performed in relation to, or in the development of, an IPOC but do not need to be listed specifically in an IPOC.

- Evaluations and assessments
- Care coordination and consultation when provided as directly related to the SBHS specified on the IPOC
- Episodic occurrences for chronic conditions (i.e., seizures, allergies, asthma)

In the absence of the IPOC, the supporting documentation for these services must include all elements required to bill Medicaid (all the elements listed under IPOC and supporting documentation in the above table).

*Please note: The effective date of a parent/guardian consent is the date that it is signed. EAs may want to develop a written notification and parent/guardian consent process where consent is obtained prior to conducting evaluations.

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Medicaid Division School-Based Health Services Program

