**SCHOOL HEALTH AND RELATED SERVICES (SHARS) HIGHLIGHTS**

**CLARIFICATIONS AS OF JANUARY 24, 2022**

**Sources:** HHSC Webinars, HHSC Clarification Document, TEA, frontline education

Changes have been made to SHARS due to a need to bring the SHARS program further into compliance with federal standards for Medicaid reimbursement.

**National Provider Identifier (NPI) Number**

Districts have an NPI Number if they participate in SHARS. The change is that effective November 1, 2021, the HHSC and Texas Medicaid Healthcare Partnership (TMPH) began offering a one-year grace period, for dates of service on or after November 1, 2021, to allow SHARS providers adequate time to come into compliance with the claim’s submission requirements for the referring or prescribing provider NPI number of SHARS PT, OT, ST, or audiology services.

Beginning November 1, 2022, all therapy claims must have the referring/prescribing provider NPI attached to the claim.

Individual providers do not pay a fee for an NPI number.

**Medicaid Enrollment Criteria**

Medicaid defines services for individuals with speech, hearing and language disorder as diagnostic, screening, preventative, or corrective services provided by or under the direction of a speech pathologist or audiologist, for which a patient is referred by a physician or licensed practitioner of the healing arts within the scope of his or her practice under State law. Referrals may be made by licensed SLPs and AUDs.

SLPs/AUDs whose evaluations serve as the referral must be enrolled in Medicaid as an individual practitioner and must use their individual NPI for claim submission. They must also adhere to licensure standard of practice and professional ethics.

**SLP/AUD Assistants**

Non-referringSLPs/SLP Assistants and AUDs/AUD Assistants do not need an NPI number, nor must they enroll as Texas Medicaid providers. An NPI number is only needed if the professional is making a referral/completing an evaluation.

SLPs and AUDs are advised to refer to their professional licensing board for questions relating to supervision of interns or assistants, as it is expected that providers of SHARS follow their respective licensing board requirements.

**Prescription/Referrals**

Keep In mind that the referral is different from a referral for an initial evaluation conducted before the ARD Committee meeting.

Speech therapy requires a written document requesting evaluation for services. Referrals must include:

* Medicaid prescribing provider
* NPI #, complete address, with signature

Referrals must be completed within three calendar years before initiation of services

Frequency and duration are not required on prescriptions

Referral and IEP must match and become part of the student’s medical record.

(See TEA sample referral form).

**Documentation Requirements**

For reimbursement of SHARS benefit, SHARS providers should adhere to documentation requirements and privacy standards set forth by professional licensure requirements, medical practice standards, the Texas Medicaid Provider Procedures Manual (TMPPM), the Health Insurance Portability and Accountability Act (HIPPA) Privacy Rule, and any applicable federal and state laws.

SHARS providers must document services provided in the student’s record (i.e., Service log, session note, or evaluation) within 1 week, or 7 calendar days, from the date the service was rendered, regardless of whether in paper or electronic form. The 7-day period includes non-school days, holidays, and weekends.

Documentation of service provided (Service Log) must support the services billed and include:

* The student’s name
* Date of birth
* Medicaid identification number on every page of the chart/record/note
* Date of service including the following for each date of service:
	+ Billable start and stop time
	+ Total billable minutes, activity performed during the session
	+ Student observation
	+ Procedure codes(s)
	+ Activity performed
* SHAR’s provider’s printed name, title, and original handwritten or electronic signature

Therapy session notes must include all elements of the service log, and:

* The student’s related IEP objective(s)
* The student’s progress toward the goals (if applicable)
* Whether the service was provided individually or in group.

Per the TMPPM, session notes for evaluations are not required; however, documentation must include:

* Billable start time
* Billable stop time
* Total billable minutes with a notation of the activity performed (e.g., audiology evaluation, speech therapy evaluation).

Supplemental documentation, such as completed evaluations, may be added at a later date.

Student observation should be documented anytime an activity is performed, whether it is a new activity or a repeat activity.

A prescription or referral is not required specifically for a re-evaluation, provided the prescription or referral for services has occurred in the previous three year.

The Texas Health and Human Services Commission (HHSC0 cannot provide guidance specific to the documentation and billing platforms and software utilized by districts. The TMPPM SHARS Handbook describes what information must be included in the forms, and it is the responsibility of the school district to draft the forms accordingly.

Any potential audit that may occur would likely include a review of the documentation, to include a review of the dated signature, either in electronic or paper form.

**Resources:**

SHARS Provider Handbook – Nov. 2021 - [www.tmph.com](http://www.tmph.com)

Texas Medicaid Provider Enrollment Questions – 800-925-9126 (option 3)

Provider.relations@TMPH.com

Enrollment as Texas Medicaid Provider – tmph.com/topics/provider-enrollment

NPI Application Process – 800-465-3203, <https://npiregistry.cms.hhs.gov/>

Customerservice@npinumeratpr.com

HHSC SHARS policy inquiries – MedicaidBenefitRequest@hhsc.state.tx.us

HHSC SHARS reimbursement inquiries – ProviderFinanceSHARS@hhs,texas.gov

Texas Medicare and Healthcare Partnership (TMHP) SHARS provider enrollment inquiries – ProviderEnrollmentStateCommunications@tmhp.com

All other TMPH SHARS provider related inquires to Provider.Relations@tmph.com

