Questions have been updated to include information to address the [School-Based Medicaid Expansion Program applicable to all MassHealth enrolled students and the updated Parental Consent form](http://www.doe.mass.edu/sped/advisories/13_1.html). This information is provided to assist local communities in seeking reimbursement for additional services that will be covered beginning July 1, 2019. The frequently asked questions are categorized by theme below. Additional questions may be directed to achievement@doe.mass.edu.

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# General Information about the New Form

1. Why do parents/guardians need to sign the parental consent form? **Under the Family Educational Rights and Privacy Act (FERPA), parents are granted certain rights with respect to their children’s education records. Parents/guardians are acknowledging that their child is enrolled in MassHealth and they are giving the district permission to be partially reimbursed for the services their children receive.**
2. Can services be reimbursed even if a parent has not signed the consent form? **No.** **It is the LEA’s responsibility to ONLY submit claims if the parent has given consent.**
3. Who can provide consent? **Parents or legal guardians. Students who are 18 or older can provide consent for themselves, unless a guardian has been appointed for the student by a court of competent jurisdiction.**
	1. Why was a new Parental Consent form created? **Starting July 1, 2019, LEAs can seek reimbursement for Medicaid-covered services provided in a school setting, that are determined medically necessary. Prior to July 1, 2019, services had to be required by to an Individualized Education Program (IEP) to be eligible for reimbursement. The new form allows parents to consent to the local educational agency (LEA) sharing information with MassHealth related to all covered services the LEA provides to their child.** **All school-aged children in MassHealth enrolled families can be listed on the current form (updated in July 2018), not just students currently receiving IEP related services.**
4. How does parental consent impact local revenue? **The more parents who provide consent to the LEA, the higher Medicaid reimbursement will be since LEAs cannot be reimbursed for the cost of providing services to Medicaid enrolled students for whom they do not have parental consent. For details on the reimbursement process related to the SBMP Direct Medical Services Cost Report, refer to information on the SBMP Resource Center at** [**mass.gov/masshealth/schools**](https://urldefense.proofpoint.com/v2/url?u=http-3A__mass.gov_masshealth_schools&d=DwQFAg&c=WJBj9sUF1mbpVIAf3biu3CPHX4MeRjY_w4DerPlOmhQ&r=OlOxuLLWmFGvKLuxalYXXmrxx0paU543ej2yPGS2oIA&m=Pod6D02hLuI9S4AM4O7uTvi0CaMhmKO7WQggvZHetr0&s=pJu91Ztlf8XTjMS7NO5ij1Zx7cTPk-HuFGYE0wHtqTA&e=)**.**
5. Are school districts required to use the written notification form available on the Massachusetts Department of Elementary and Secondary Education (DESE) website?Can districts make up their own form as long as it contains the necessary information? **The** [**one-time consent form**](http://www.doe.mass.edu/sped/28mr/28m13.docm) **is a mandated form. Districts must use the form created by DESE, however, LEA’s can add their district specific information such as School District Name, District Code Number and School District Contact information. Districts can contact DESE at** **achievement@doe.mass****.edu with questions about the form and its use by districts.**
6. Can school districts translate the form into other languages? **Yes, forms should be translated into other languages as needed. Forms are currently available in Chinese, English, Haitian Creole, Portuguese and Spanish and can be found on the DESE website at** [**http://www.doe.mass.edu/sped/advisories/13\_1.html**](http://www.doe.mass.edu/sped/advisories/13_1.html)**.**
7. Can the LEA use more than one form for one family? For example, if three children in the same family are at two different schools, can there be two forms? **Yes, families with more than one child can use one or more forms to give consent for their children (e.g., all children can be listed on one form, or alternatively one form can list a child in their family attending middle school and another form can list two other children in their family attending elementary school).**

# Seeking new and updated consents

1. For whom should the school district seek consent? **School districts should seek consent for all children enrolled in MassHealth. If consent is already on file for a student on an IEP, the updated form is required for the LEA to bill for services outside of an IEP. Even if the child is not on an IEP, most children receive Medicaid-covered services such as screenings. Additionally, parental consent directly impacts communities’ revenue since LEAs (school districts) cannot count costs for children without parental consent.**
2. Do we use the [July 2018 updated parental consent form](http://www.doe.mass.edu/sped/28mr/28m13.docm) for new students? **Yes, the updated 2018 form should be used for all students who are enrolled in MassHealth regardless of whether or not they are on an IEP.**
3. Can consent be provided electronically? **Electronic signature is allowable if the consent includes a record that identifies and authenticates a particular person as the source of the electronic consent along with all of the other required elements of the consent. Forms can also be signed, scanned and returned to the district via email. Of course, the consent on paper with an original signature is also accepted.**
4. After the updated consent form has been signed, when is another parental consent required? **New consent is only required if (1) the school district responsible for the student changes, or (2) the legal guardian for the child changes. Every instance of change under 1 or 2 requires new consent. Consent cannot be transferred across districts.**

**If a student for whom the district previously received consent returns to the school district, then a new consent form is required (because there was a different school district responsible in the interim).**

**Guardianship changes [including the Department of Children and Families (DCF)]**

1. **For all students under 18 years of age, requests for consent and annual written notification should be directed to and provided by the student’s legal guardian.**
2. **If a student is in DCF custody, then the guardian is DCF and a DCF social worker can provide the consent.**
3. **Other legal guardians may include foster parents or individuals with court-appointed legal authority.**
4. **Special Education Surrogate Parents are NOT legal guardians and as such cannot provide legal guardian consent or satisfy the annual notification requirement.**

# Allowable methods and best practices for obtaining consent

1. What are best practices DESE has identified for collecting parental consent?
	1. **LEAs may use the new consent form at IEP or other health plan meetings. During the meeting, the LEA can ask if parent/guardians are willing to complete the form naming all children in the family.**
	2. **LEAs may include the new consent form with other required information going home pursuant to Title I, information about free and/or reduced lunch applications or other similar communication.**
	3. **LEAs may include the form in annual “back to school packets” for families that are believed to have MassHealth, including any family that participates in the Free Lunch Program.**
	4. **LEAs may use the Medicaid Eligibility Matching response file information made available to school districts to identify students who are enrolled in MassHealth.**
	5. **LEAs may use the Provider Online Service Center (POSC) individual eligibility inquiry function to determine if a student is enrolled in MassHealth prior to obtaining parental consent.**

# Annual Written Notification Requirements

1. How may annual written notification be provided to parents? [**The Parent’s Notice of Procedural Safeguards (PNPS)**](http://www.doe.mass.edu/sped/prb/) **has been updated and contains sufficient written notice to meet the annual notice requirement for students on Individualized Education Programs (IEPs). Districts will need to provide annual notice in another format for other students. This may include sending an email to all families from whom the LEA has obtained consent. Annual notification will remind parents they have acknowledged their children are enrolled in MassHealth and they are continuing to give the district permission to be partially reimbursed for the services their children receive.**
2. When must subsequent annual written notification be provided to parents? **Annually, as is true also for the PNPS (containing sufficient notification). The notification must happen after the initial consent is obtained, ideally prior to the beginning of each new school year.**
3. May the school district post the annual written notification on its website instead of providing it directly to parents by mail or email? **No, posting is not sufficient. A district may post the annual notification on their website, but must also provide directly to parents a notice of its availability along with the website location at least annually.**
4. How should the school district document that the annual written notification has been provided to parents, as required by federal regulation? **School districts may document the annual distribution of the notification in any manner such as via mail, electronic communication or any other methods a district uses in communicating with parents.**
5. If sending by postal mail, do the written notification and parental consent forms need to be sent by registered mail? **No.**
6. Is a cover letter required to accompany the written notification and/or the Parental Consent form? **No.**

# Filing and record retention of parental consent forms

1. Where should parental consent forms be filed? **The law does not specify this; however, it may make sense to keep these consents with other billing documents for Medicaid.**
2. How long must a school district keep the signed parental consent form on file? **This information is considered part of the** [**student’s temporary record**](http://www.doe.mass.edu/lawsregs/603cmr23.html?section=06)**. According to 603 CMR 23.06(3), the temporary record of any student shall be destroyed no later than seven years after the student transfers, graduates, or withdraws from the school system.**

# Effective date of consent forms, including billing

1. What is the effective date of a parent’s consent? What if the student had received services before the consent was obtained? **The effective date is the date of consent provided on the consent form. Consent applies from the date of consent, not retroactively and the LEA cannot bill for services delivered prior to the date on the consent form for services provided starting July 1, 2019.**
2. If a parent previously provided the school consent to bill MassHealth, but then revokes that consent, for which dates of service are eligible for reimbursement from MassHealth? **The LEA may bill for services from the time of consent until the date of revocation of consent. The LEA may keep revenue it received for billing and cost reports prior to the revocation of consent.**

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# Miscellaneous

1. Does obtaining parental consent at an IEP meeting violate [Health Insurance Portability and Accountability Act (HIPPA)?](https://www.hhs.gov/hipaa/for-professionals/privacy/index.html) **No.**
2. By giving consent, will the parent be contacted by MassHealth or UMass regarding the consent forms? **No**. **Consent is between the school district and parent agreeing to allow the LEA to seek partial reimbursement from the federal Medicaid Office for services provided under the School-Based Medicaid Program. MassHealth and UMass are not provided with copies of the consent forms.**
3. If a parent has previously declined to provide parental consent, may the school/district continue to ask for consent? **Districts must** **respect the parents’ rights to not consent. Districts may ask, but may not pressure parents nor condition receipt of any special education or other services on the parents’ consent. LEAs should also reference the part of the consent form that makes clear that refusal to consent will not impact students’ MassHealth benefit.**
4. I have never seen a SASID (State Assigned Student Identifier) used to identify a MassHealth enrolled student, how does this apply? **Medicaid does not use the SASID. This is an identifier that is used for school district purposes only. It has been included on the consent form so that the school district will have no confusion about which student the consent applies to, especially in cases where students have the same or similar names.**
5. What happens if a family does not inform the school that they are no longer enrolled in MassHealth? **MassHealth will verify who is no longer enrolled. The MassHealth ID is a cross-reference check that will provide notification that claims are not reimbursable. For students for whom a district has obtained parental consent, the school district may also choose to check students’ enrollment status in MassHealth in the Provider Online Service Center (POSC).**
6. Does the expansion of services apply to the use of private insurance? **No.**
7. If a family provides the district consent for billing for in school services, will this reduce or change the type and/or hours of service to be provided out of school? **No. Provision and billing of school-based Medicaid services do not impact students’ services for which they are eligible outside of school. Mass Health does not have lifetime or plan year benefit maximums or limits.**