Florida Department of Education (FDOE) 2022-2023 Medicaid Reimbursement to Public Schools and Revenue Maximization November 2023

Florida's school districts continue to receive significant reimbursement through the **Medicaid Certified School Match** (MCSM) **program** and the **School District Administrative Claiming (SDAC) program**. Fifty-nine school districts and Florida School for the Deaf and the Blind participate in both programs. The FDOE and the Agency for Health Care Administration (AHCA) are working collaboratively to review policies and technical assistance to support school districts to maximize Medicaid reimbursement.

The Florida MCSM program allows school districts to receive reimbursement under the Florida Medicaid program in accordance with 42 CFR 440.130(d). The 2020 Florida Legislature passed Committee Substitute for House Bill 81, Health Care for Children. This legislation amended section 409.9071, Florida Statutes, revising provisions for the reimbursement of school-based services by AHCA. This bill had an effective date of July 1, 2020. This change in law eliminated the requirement that Medicaid recipients receiving services through the Florida MCSM program qualify for Part B or H of the Individuals with Disabilities Education Act (IDEA) for exceptional student services or have an Individual Educational Plan (IEP).

In fiscal year (FY) 2022-2023, twenty school districts used the FDOE-sponsored **Medicaid Tracking System** (version 2.0 or 3.0) at no cost to the district, to verify students' Medicaid eligibility and submit reimbursement requests for direct services to AHCA.

Twenty-seven school districts participated in the no-cost **Electronic Medicaid Administrative Claiming System** (**EMACS**). EMACS is the FDOE-sponsored SDAC system through which districts receive reimbursement for costs associated with Medicaid outreach activities to all students and their families, such as training, referrals, coordination and monitoring of health services. Three districts continue to use the paper-based version of the system.

Reimbursement History for the MCSM Program

School districts have participated in the MCSM program since 1998. Through FY 2022-2023, school districts received reimbursement for services provided in the areas of speech therapy, occupational therapy, physical therapy, behavioral services, nursing services and specialized transportation. The following data, provided by AHCA, reflects funds school districts have received for reimbursable services provided to eligible students with medical necessity through the MCSM program since FY 2017-2018:

- FY 2017-2018 \$16,767,517
- FY 2018-2019 \$20,847,933
- FY 2019-2020 \$17,818,501
- FY 2020-2021 \$20,021,428
- FY 2021-2022 \$23,099,412
- FY 2022-2023 \$24.616.595**

During the reporting period, all but one school district, Jefferson County Schools (JCS), received reimbursement under the MCSM program. JCS is not currently enrolled as a Medicaid provider. FDOE staff has provided information on enrollment to JCS.

Reimbursement History for the SDAC Program

School districts have participated in the SDAC program since 1998. As of November 3, 2023, school districts have received \$1,720,091,463. The following data, provided by AHCA, reflect funds that have been claimed by school districts and paid by AHCA through the SDAC program since FY 2017-2018:

- FY 2017-2018 \$98,374,299*
- FY 2018-2019 \$74,323,578*
- FY 2019-2020 \$99,579,470*
- FY 2020-2021 \$77,628,670*
- FY 2021-2022 \$54,199,930**
- FY 2022-2023 \$0**

During the reporting period, all but eight districts participated in the SDAC program: Gadsden, Gilchrist, Glades, Hamilton, Holmes, Jefferson, Okeechobee and Taylor. FDOE staff continue to provide training and technical assistance to maximize Medicaid reimbursement.

*Final amounts, as all administrative claims filed applicable to quarters within the noted fiscal year have been paid to districts.

**Amounts are subject to change as new claims are processed. Per AHCA policy, districts must file claims with AHCA in a timely manner so that AHCA has enough time to submit a claim for reimbursement to the federal Medicaid agency. The SDAC claim must be filed with the federal Medicaid agency within two years from the last day of the last month in the claimed quarter. The MCSM claim must be filed within one year.