

Individualized Education Program (IEP)/ Individualized Family Service Plan (IFSP) Nursing Training

**Office of Medicaid Services
2025-2026**



**SOUTH CAROLINA
DEPARTMENT OF EDUCATION**

Overview of IEP/IFSP Nursing Services

This training provides a brief overview of policy requirements specific to IEP/IFSP Nursing Services and promotes a greater understanding of Medicaid policies and procedures.



Overview of Nursing Services

- Medicaid recognizes nursing services as those that fall within the scope of practice of a Registered Nurse (RN), or Licensed Practical Nurse (LPN) as authorized by the South Carolina State Board of Nursing.
- Reimbursable nursing services under this program will include any service that an RN or LPN is allowed to provide under state licensure and regulation.
- Districts are responsible for reviewing the LEA Provider Manual in its entirety for a comprehensive overview of policy requirements and expectations.



Nursing Services

Nursing services can include, but are not limited to, the following:

- nursing care assessments,
- nursing procedures,
- emergency care or individual health counseling, and
- medication administration.



Qualified Staff

Per the Local Education Agencies (LEA) Provider Manual, only a RN, LPN, or Advanced Practice Registered Nurse (APRN) can render IEP Nursing Services.

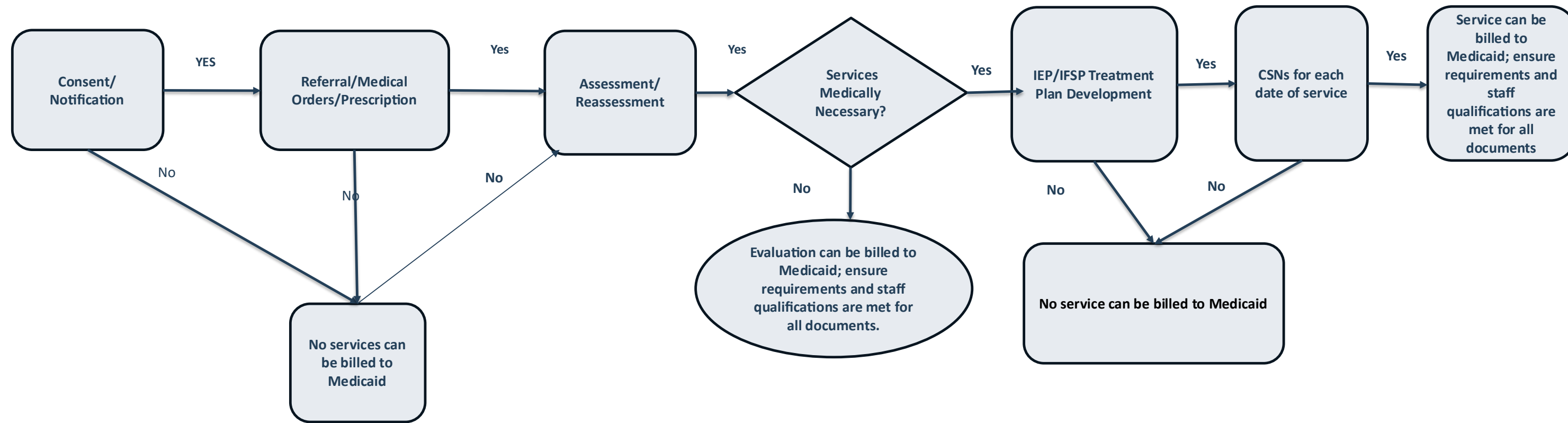


Qualified Staff Definitions

- Per the LEA Provider Manual, “A nurse is defined as an individual who is currently licensed as a RN or an LPN by the State Board of Nursing for South Carolina.”
- Per the Nurse Practice Act, “A RN means a person to whom the board has issued an authorization to practice as a registered nurse”.
- Per the Nurse Practice Act, “An LPN means a person to whom the board has issued an authorization to practice as an LPN.
- Per the Nurse Practice Act, “APRN means a registered nurse who is prepared for an advanced practice registered nursing role by virtue of additional knowledge and skills gained through an advanced formal education program of nursing in a specialty area that is approved by the board”.



IEP/IFSP Nursing Sequence of Documentation



Consent

Consent is the act of providing express permission, in writing, for some particular action to take place. To comply with legal requirements and the guidelines established by Health Insurance Portability and Accountability Act (HIPAA), Individuals with Disabilities Education Act (IDEA), and the Family Educational Rights and Privacy Act (FERPA), the person providing written consent must be fully informed of all information, in his or her native language, relevant to the activity for which consent is sought and understand the activity for which consent is sought. For the purposes of Medicaid, consent refers to express permission to medically assess/evaluate, provide treatment, share information to a third-party, and bill Medicaid and/or third-party insurance providers for covered services within the guidelines established by the State Medicaid program, the HIPAA, IDEA, and FERPA.



Consent (Cont.)

- A consent form must be signed by the parent/guardian on behalf of the child.
- The General Consent form can be found at the Office of Medicaid Services (OMS) webpage.



Release of Information

- A Release of Information Form must be signed and dated by the student, the student's parent or guardian and be present in the clinical record.
- A Release of Information Form authorizes the release of any medical information necessary to process Medicaid claims.
- The release may be incorporated into a consent form.
- The release has been incorporated into the OMS' Medicaid General Consent form.



Referral/ Medical Orders/ Prescription

A medical order is a written order by an authorized licensed prescriber for a medication, treatment or procedure; may also be referred to as a treatment order, medication permission form, or prescription. Medical orders must be:

- given for prescriptions,
- written for treatments, and
- written for procedures.



Prescribing of a Referral/ Medical Orders/ Prescription

A medical order for prescriptions or treatment must be prescribed by one of the following:

- Medical Doctor (M.D.),
- Doctor of Osteopathy (D.O.),
- Dentist (D.M.D., D.D.S),
- Advanced Practice Registered Nurse (APRN), (Nurse Practitioner (NP), Certified Nurse Midwives (CNMs), Certified Registered Nurse Anesthetist (CRNAs), and Clinical Nurse Specialists (CNS), or
- Physician Assistant (PA).



Prescribing of a Referral/ Medical Orders/ Prescription (Cont.)

The documentation must include:

- student name,
- date,
- reason for the Medical Orders,
- description of services to be rendered, and
- name, date, and title of the provider.



Assessment/ Reassessment

Nursing assessments must be completed for the following events:

- applicants registering for early child development programs,
- children referred for special education eligibility evaluation,
- new or previously identified medical/health problems based on child initiated or teacher/staff referral including substance abuse, child abuse, pregnancy confirmation, etc.,
- related to the IEP/IFSP, ITP and IHP,
- home visits for comprehensive health, developmental, and/or environmental assessments, and
- emergency care.



Assessment/ Reassessment (Cont.)

Nursing Assessments must include:

- new medical health problems,
- existing medical health problems,
- Medications,
- treatments,
- procedures, and
- child development.



IEP/IFSP Treatment Plan

For the purposes of Medicaid, the IEP and IFSP serve as written documents that mandate the provision of specific services to students with disabilities.

- The IEP and IFSP detail the medical plan to administer medically necessary assessments, treatment, procedures, medications, and/or other covered services.
- IEPs and IFSPs establish the amount, type, frequency and duration of services the student must receive, includes measurable annual goals for the services, describes how progress toward the goals will be monitored, and how often progress toward each goal will be monitored by service providers.
- The IEP should be reviewed and updated according to the level of progress. If a determination is made during treatment that additional services are required, these services should be added to the treatment plan.



IEP/IFSP Requirements

To bill Medicaid, the IEP must include the following components:

- Individualized,
- specific problems to be addressed,
- goals of treatment,
- short term objectives (only required for students on) SC-ALT,
- types of interventions to be utilized,
- planned frequency of service delivery,
- estimated duration,
- criteria for achievement,
- exact service the beneficiary should be receiving,
- beneficiary's strengths and weaknesses (strongly recommended), and
- name, date, signature, and title of the nurse.



Clinical Service Note (CSN)

CSNs must be documented in a narrative of each treatment session, with the purpose of recording the nature of the student's treatment. Notes must capture the Medicaid services provided as related to the treatment plan goals, summarizing the student's response and participation in treatment.

Note: Electronic signatures must be present and clearly indicate the nurse's name, title, and date.



CSN (Cont.)

CSNs must include a narrative summary of each treatment encounter and must justify the number of units billed. The following are CSN required components:

- provide a pertinent clinical description of the activities that took place during the session,
- student's level of participation/response to treatment,
- reflect the delivery of a specific billable service as identified in the physician's order,
- date of service,
- type of service and number of units billed,
- individualized and student specific,
- name, date, signature, and professional title of the provider delivering the service.



Medicaid's CSN Requirements

- CSNs to support all billed claims must be present on file.
- Each CSN must be dated, titled, and signed by the provider of service.
- CSNs must reflect a Medicaid billable service that is identified in the student's treatment plan.
- All CSNs must include the date of service.
- CSN documentation must be sufficient to support the number of units billed to Medicaid.
- Each CSN must be individualized and student specific.



Medicaid's CSN Requirements (Cont.)

- CSNs must describe the activities that take place during the session and be directly related to the treatment plan goals.
- CSNs must include the student's response to treatment and activities.
- CSN must document a Medicaid reimbursable activity.



Supervision

An LPN must be supervised at all times by a RN.

- RN must be physically present or accessible by phone or pager, and
- RN must be readily available (i.e., physically accessible to the individual being supervised within a certain response time based upon the medical history and condition of the beneficiary and competency of staff).



Supervision (Cont.)

- The RN supervisor will provide the initial assessment of the child's condition as appropriate and establish a plan of care based on the child's medical condition in accordance with state licensure and regulation.
- If the LPN receives additional information regarding the child's health condition after the initial assessment, the LPN will consult with the RN.
- Supervision by the RN of the LPN must be performed at a minimum of every 60 days via direct observation or review of clinical service notes.



Electronic Signatures

The South Carolina Department of Health and Human Services (SCDHHS) Electronic Signature policy guidance:

- SCDHHS will accept electronic signatures on Medicaid documentation when an electronic health record/system is being utilized.
- Please review the SCDHHS Provider Administrative and Billing Manual to review/identify the requirements and standards specific to electronic signatures.

Note: The electronic signatures must be clearly seen on all documents and must include the nurse's name, title, and date signed.



Personnel Records

School districts are responsible for verifying the staff's credentials via the following authorities:

- South Carolina Department of Labor, Licensing and Regulation (SCLLR) — exclusions and terminations
- South Carolina Department of Health and Human Services (SCDHHS) Office of Inspector General (OIG) website — exclusions and terminations.
- Federal OIG website — exclusions and terminations
- Copies of documents must be kept in the credential file or in the student's file. Districts must verify staff credentials at least annually and copies of the OIG lists must be date stamped.



Clinical Records and Maintenance

- LEAs are required to maintain a clinical record on each Medicaid eligible child that includes documentation of all Medicaid-reimbursable services to justify Medicaid payment.
- Clinical records must be current, meet documentation requirements and provide a clear descriptive narrative of the services provided.
- Records are key documents for post-payment review. In the absence of appropriately completed clinical records, previous payments may be recovered by SCDHHS.
- It is essential that an internal records review be conducted by each LEA to ensure that the services are medically necessary and appropriate both in quality and quantity, and that service delivery, documentation and billing comply with Medicaid policy and procedure.



Clinical Records and Maintenance (Cont.)

Medicaid policy requirements guidelines for clinical records and maintenance are as follows:

- each clinical entry must be typed or legibly handwritten in ink,
- clinical records must be arranged logically,
- all clinical entries must be filed in the student's clinical records,
- a signature sheet must be available that identifies the staff's name, signature, and initials,
- an abbreviation and symbols key must be available, and
- each entry must stand on its own and not include arrows, ditto marks, etc.

Note: If an error occurs on any document the nurse must place a line through the error, make the correction, initial and date.





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