Medicaid School-Based Services
Acronym Dictionary

504 Plan	The **504 Accommodation Plan** is available to students that have a behavioral and/or physical impairment that limits their access to education. This plan provides accommodation and program accessibility to allow students to have an equal access to education.
ASD	**Administrative Services Division** is the financial division of the Human Services Department. **ASD** is responsible for invoicing the LEAs, RECs, and SFEAs for the state share of direct services and the Medicaid Administrative Claiming fee. **ASD** works with the Medicaid School Health Office to ensure prompt payment of Administrative Claim invoices submitted by the LEAs, RECs and SFEAs.
AVRS	The Medicaid **Automated Voice Response System**. LEAs, RECs and SFEAs may call **AVRS** (1-800-820-6901) to check recipient Medicaid eligibility.
BMS	**Benefit Management Systems** oversees the KYP workspace program.
CAP	**Corrective Action Plan**. Following a MSBS review or desk audit, if noncompliance issues are identified, districts must submit a **CAP** outlining how they intend to correct any findings.
CFR	The **Code of Federal Regulations** is the codification of the general and permanent rules published by the federal register and agencies of the federal government.
CMS	**The Centers for Medicare and Medicaid Services,** of the U.S. Department of Health and Human Services, is the federal Medicaid funding and oversight agency of the MSBS program
CONDUENT	**Conduent** is New Mexico's Medicaid fiscal agent. LEAs, RECs and SFEAs submit electronic claims for direct medical services under the MSBS program to Conduent for reimbursement. Paper claims may be submitted with written approval from **Conduent.**
CPT	**Current Procedural Terminology** codes are five digit numeric or alphanumeric national codes designated by the U.S. Department of Health and Human Services under HIPAA. **CPT** codes are used to assign procedure codes for services billed within the MSBS program.
CSHCN	**Children with Special Health Care Needs** are children who have or are at an increased risk for chronic physical, developmental, behavioral and/or emotional conditions. These children typically require higher levels of health and related services that are beyond the type or amount required by children generally.

DOH	The **Department of Health** or the **New Mexico Department of Health** is the state agency that provides oversight of various public health and medical related programs in New Mexico.
EPSDT	The **Early and Periodic Screening, Diagnosis and Treatment Services** benefit provides comprehensive and preventive health care services for children under 21 years of age, who are enrolled in Medicaid**.** The MSBS program follows the guidelines of the **EPSDT** program policy (8.320.6)
FERPA	The **Family Educational Rights and Privacy Act** of 1974 is a federal law that protects the privacy of student education records. It prohibits a school from disclosing personally identifiable information from students' education records without the consent of a parent or eligible student and it allows parents or eligible students to inspect education records and request corrections for inaccurate education records. Schools must notify parents and eligible students annually of their rights under **FERPA.**
FFP	**Federal Financial Participation** represents the federal government's share of total Medicaid reimbursements.
FMAP	The **Federal Medical Assistance Percentage** is used to calculate the share that the federal government will reimburse the state for Medicaid services. This percentage is calculated on an annual basis and is published by the Secretary of Health and Human Services.
GDIT	**General Dynamics Information Technology Company-** GDIT is a global technology and professional services company that delivers solutions, technology, and mission services to agencies across the U.S. government
GFE	**Good Faith Effort** is the process of at least three attempts to get the PCP notification completed.
GSA	A **Governmental Services Agreement** is a contract between HSD/MAD and the LEAs, RECs, or SFEAs outlining roles and responsibilities of each party in the MSBS program.
HIPAA	The **Health Information Portability and Accountability Act** of 1996 is a set of rules to be followed by all health care providers. **HIPAA** took effect on April 14, 2006, and helps to ensure that all medical records, medical billing, and patient accounts meet certain consistent standards with regard to documentation, handling and privacy.
HCA/MAD	The **Health Care Authority/Medical Assistance Division**. The New Mexico State Agency responsible for administering the MSBS program.

ICD-10	The **International Classification of Diseases-10** is the 10th edition of treatment codes, which took effect on October 1, 2015. **ICD-10** codes must be used by MSBS providers to identify medical necessity.
IDEA	The **Individuals with Disabilities Education Act** requires that all students with special education and related needs are entitled to a free and appropriate public education.
IEP	An **Individualized Education Plan**, created for a student aged 5-21 when the student qualifies for services under IDEA.
IFSP	An **Individualized Family Services Plan** created for a student aged 3-5 and their family when the student qualifies for services under IDEA.
IHCP/IHP	An **Individualized Health Care Plan** or **Individualized Health Plan** is a document used by healthcare providers that outlines the provision of student healthcare services.
IHS	**The Indian Health Services** of the U.S. Department of Health and Human Services. **IHS** funds health care for American Indian and Alaska Native
ISD	The **Income Support Division** of the Human Services Department. Clients apply for Medicaid and other assistance programs through **ISD**.
ITP	The **Individualized Treatment Plan** of a recipient's IEP, IFSP, 504 plan, IHCP or other plan of care. The ITP states the medical needs of the recipient and is the basis for the LEA's, REC's and SFEA's Medicaid billing activities under the MSBS program.
KYP	**Know Your Provider-** KYP Enrollment stands for "Know Your Provider" Enrollment. It is a comprehensive digital platform that reviews applications for all healthcare providers seeking to enroll, re-enroll, or revalidate their participation in Medicaid programs. The system automates workflows and helps ensure providers meet federal and state participation eligibility regulations mandated by the Affordable Care Ac
LEA	A **Local Education Agency** is a commonly used synonym for a school district, an entity which operates local public primary and secondary schools.
MAC	**Medicaid Administrative Claiming** is the process of billing for Medicaid administrative functions performed by the LEAs, RECs, and SFEAs.
MCO	**Managed Care Organization**. Under New Mexico's managed care program, *Centennial Care*, recipients are assigned to one of four **MCOs** (Blue Cross/Blue

Shield NM, Molina, Presbyterian, and United Healthcare).

MMIS The **Medicaid Management Information System** is used to assist with MSBS functions, such as processing quarterly adjustments for the MSBS program.

MER The **Medicaid Eligibility Rate** is calculated by finding the percentage of Medicaid eligible students taken from the total enrolled student population.

MOVE IT-DMZ **DeMilitarized Zone product** is a secure file transfer and secure message server. The product provides comprehensive, integrated, standards-based solutions for secure handling of sensitive information. This product is utilized by HSD/MAD for sending and receiving confidential patient information. LEAs, RECs and SFEAs must use the **DMZ** to transmit confidential student information to the SHO, including the 80 day count.

MSBS **Medicaid School-Based Services** for recipients under twenty-one years of Age (refer to Medicaid program policy manual 8.320.6.).

NMAC The **New Mexico Administrative Code** is a compilation of all New Mexico state agency rules/regulations which clarify and interpret laws passed by the legislature.

NPI A **National Provider Identifier** is a unique, ten-digit, identification number required by all HIPAA health care providers to identify themselves in all HIPAA transactions.

ORP **Ordering, Referring and Rendering Provider.** The Affordable Care Act (CFR Title 42 Part 455) requires that attending, ordering, referring, rendering and/or prescribing providers need to be enrolled in the Medicaid program and that their NPI number is listed on MSBS claims. This requirement applies to four service domains: occupational therapy, physical therapy, speech therapy and audiology services.

PCP **Primary Care Provider**. Under New Mexico's managed care program, *Centennial Care*, recipients are assigned a physician who acts as their "medical home."

PED The **Public Education Department** is the New Mexico State Agency responsible for oversight of the LEAs/RECs/SFEAs. HSD/MAD collaborates with **PED** to ensure the effective administration of the MSBS program.

PEDs **Presumptive Eligibility Determiners** are certified personnel that can screen for Medicaid eligibility, submit ongoing applications on a client's behalf and grant short term presumptive eligibility while their ongoing Medicaid application is in process. Each school should have **PEDs** on site.

PE	Medicaid **Presumptive Eligibility.** LEAs, RECs, or SFEAs may perform **PE** assessments on students who are not enrolled in Medicaid but may be eligible. If a student appears to be eligible for Medicaid, they will be granted short-term Medicaid coverage, called **PE.**
PERM	**Payment Error Rate Measurement,** is an audit mandated by CMS, conducted though HCA.
PLAAFP/PLP	The **Present Levels of Academic Achievement and Functional Performance** (PLAAFP) is a critical component of an Individualized Education Program (IEP). It provides a comprehensive overview of a student's current abilities, strengths, and needs, which is essential for developing effective educational goals and services. According to the Individuals with Disabilities Education Act (IDEA), this section must include how the student's disability affects their involvement and progress in the general education curriculum.
PPA	**Provider Participation Agreement**. Districts wishing to participate in the MSBS program must sign a **PPA** (MAD 335) with Conduent Some related service providers are also required to sign a PPA (MAD 312) in order to bill for Medicaid covered services.
PWN	**Prior Written Notice** is the written explanation of any proposed change(s) to the student's special education program, which is sent to the student's parent(s).
REC	**Regional Education Cooperative** is generally composed of smaller school districts joined together for administrative and financial support.
RLD	The New Mexico **Regulation and Licensing Department**. Many direct service providers receive a license through one of RLD's licensing boards.
RMTS	The **Random Moment Time Study** is the method used to determine the Medicaid activity performed by certain employees and/or contractors within a district.
RTP	**Returned to Provider**. Acronym used by Conduent regarding provider enrollment.
SBHC	**School-Based Health Centers** are outpatient clinics located on school campuses that provide medical, behavioral, and dental services. Districts may use their MSBS reimbursements to help fund their **SBHC**.
SFEA	A **State Funded Education Agency** is a public schools funded by the state for a specific population of students.
SHO	The Medical Assistance Division's **School Health Office** has oversight of the Medicaid School-based Services Program.

SPA	**State Plan Amendment**. A State Plan is an agreement between the state and the Federal government describing how the state plans to administer its Medicaid program. When a state plans to make a change to its program policies or operational approach, states send **SPAs** to CMS for review and approval.
TAD	**Turn around Documents** (these are also referenced in the guide as re-verification forms)**,** federally required verification for providers, must be update every three years.
YESNM-PE	**YesNM-PE** is a secure online portal that presumptive eligibility determiners use to submit Medicaid eligibility applications for students.