Notice and Consent Regarding Payment from Medicaid Benefits

Student Name: __________________________ LEA: __________________________

School Year: __________________________ (One time) Consent Date: __________________________

Notification Date: __________________________ [ ] Consent Denied

The rules under the *Individuals With Disabilities Education* (IDEA) regarding the use of public benefits, such as Medicaid, require schools to provide written notification and obtain consent from a parent one time before accessing a child’s Medicaid benefits and notify the parent annually thereafter. IDEA and the *Family Educational Rights and Privacy Act* (FERPA) also require schools to obtain parental consent before disclosing information from a child’s education records to outside parties such as Medicaid or another public health insurance agency.

“Consent” means that the parent has been fully informed of all relevant information in his or her native language or other mode of communication; that the parent understands and agrees in writing; that the consent describes what the school system seeks to do and lists the records that will be released and to whom; and that the parent understands that giving consent is voluntary and that he or she can change his/her mind at any time. Parents must have advance notice of the school’s efforts to use a child’s public benefits to pay for special education services and an opportunity to prevent any related disclosure of information from the child’s education records.

Prior to accessing a child’s Medicaid benefits, the school system must make sure that using the child’s Medicaid benefits will *not*:

- Decrease available lifetime coverage or any other insured benefit.
- Result in the family paying for services that the child needs outside of school and that otherwise would be covered by the public benefits.
- Increase premiums or lead to discontinuation of benefits.
- Risk loss of eligibility for home and community-based waivers based on total health-related expenditures.

School officials must annually notify the parent of the school’s interest in utilizing Medicaid benefits as well as the above-listed constraints; seek from the parent (and other relevant sources) the information necessary for the school system to utilize Medicaid benefits; solicit any parental concerns; and give parents a meaningful opportunity to express any relevant concerns about the process.

School officials may not require parents to sign up for Medicaid benefits as a condition for their child receiving services under IDEA. Nor may they require parents whose children are enrolled in Medicaid to incur any out-of-pocket expenses, such as paying a deductible or co-payment.

I authorize the Local Education Agency (LEA) to disclose personally identifiable information of this student to the Alabama State Medicaid Agency and its contractors ("Medicaid"), for the purposes of determining the student's Medicaid status. If the student is determined to be covered by Medicaid, I authorize the LEA to bill Medicaid for Medicaid-covered health services provided to the student that are in the student's Individualized Education Program (IEP). I understand that, upon request, I may receive copies of the student's educational records that are disclosed as a result of this authorization. I understand that this consent is required one time and I will be notified annually. I also understand that my refusal to allow access to the Medicaid benefits does not relieve the school system of its responsibility to ensure that all required IEP services are provided at no cost to me.

_________________________  __________________________  __________________________
Parent/Guardian Signature  Relationship to Student  Date

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