

## SUPERINTENDENT ROCKY HANNA

BOARD CHAIR Laurie Lawson Cox BOARD VICE CHAIR Marcus Nicolas BOARD MEMBERS Rosanne Wood Darryl Jones Alva Swafford Smith

## 2025/2026 ANNUAL NOTIFICATION OF RIGHTS REGARDING MEDICAID CONSENT

The Individuals with Disabilities Education Act of 2004 (IDEA) permits school districts to seek reimbursement from Medicaid for services provided at school (Title 34, section 300.154(d)(2)(iv)(A)-(B), Code of Federal Regulations [CFR]). School districts are also allowed to seek reimbursement from Medicaid for services provided to students under the Florida Administrative Code Medicaid rule for school-based services (Rule 59G-4.035). Services may include speech, physical/occupational therapy, behavioral, nursing and transportation services. Prior to seeking reimbursement, the school district must obtain parental consent to share information contained in your student's education records in order to determine eligibility status. You will be asked to give consent when completing your student's emergency medical information in FOCUS.

This notification informs parents of their rights regarding the disclosure of personally identifiable information which may include your student's name, date of birth, address, primary special education disability (if applicable), Social Security Number (if provided by the parent) and the dates and times of health care services provided to The Florida Agency for Healthcare Administration. This agency manages our public insurance program (e.g. Medicaid). Sharing this information allows the school district to obtain eligibility information, seek Medicaid reimbursement, and satisfy compliant audit and review requests directly related to services provided to your child. Leon County Schools regularly works with this agency to obtain a share of the cost for health-related services outlined in the Individualized Education Program (IEP), as well as non-IEP medically necessary and related services.

## We must inform you that:

- This consent will not impact your child's Medicaid coverage;
- Consent can be withdrawn at any time;
- Services listed in your child's IEP or other health plans will be <u>provided at no cost</u> to the parent or student;
- Services listed in your child's IEP or other health plans will be provided regardless of your consent to bill Medicaid;
- Upon request, you may receive copies of records disclosed pursuant to this authorization;

The District relies on Medicaid reimbursements to support the delivery of health care services in all Leon County School Clinics. We appreciate your cooperation and support.

If you have any questions regarding this notification, please contact Karen Thomas, Medicaid Coordinator at (850) 414-5107.

2757 W. Pensacola Street • Tallahassec, Florida 32304-2998 • Phone (850) 487-7100 • Fax (850) 414-5194 • <a href="https://www.leonschools.net">www.leonschools.net</a>
"No person shall on the basis of sex, gender identity, marital status, sexual orientation, race, religion, ethnicity, national origin, age, color, pregnancy, disability, military status or genetic information be denied employment, receipt of services, access to or participation in school activities or programs if qualified to receive such services, or otherwise be discriminated against or placed in a hostile environment in any educational program or activity including those receiving federal financial assistance, except as provided by law." No person shall deny equal access or a fair opportunity to meet to, or discriminate against, any group officially affiliated with the Boy Scouts of America, or any other youth group listed in Title 36 of the United States Code as a patriotic society.