

**441—78.50(249A) Local education agency services.** Subject to the following subrules, payment will be made for medical services provided by local education agency services providers to Medicaid members under the age of 21.

**78.50(1) Covered services.** Covered services include but are not limited to audiology services, behavior services, consultation services, medical transportation, nursing services, nutrition services, occupational therapy services, personal assistance, physical therapy services, psychologist services, speech-language services, social work services, vision services, and school-based clinic visit services.

*a.* In order to be paid for the administration of a vaccine covered under the VFC program, a local education agency must enroll in the VFC program. Payment for the vaccine will be approved only if the VFC program stock has been depleted.

*b.* Payment for supplies will be approved when the supplies are incidental to the patient's care, e.g., syringes for injections, and do not exceed \$25 per month. Durable medical equipment and other supplies are not covered as local education agency services.

*c.* To the extent that federal funding is not available under Title XIX of the Social Security Act as amended to July 1, 2026, payment for transportation between home and school is not a covered service.

**78.50(2) Delivery of services.** Services must be delivered directly by the local education agency services providers or by a practitioner under contract with the local education agency services provider.

**78.50(3) Remission of nonfederal share of costs.** Payment for services shall be made only when the following conditions are met:

*a.* The local education agency services provider has executed an agreement to remit the nonfederal share of the cost to the department.

*b.* The local education agency provider shall sign and return a Medicaid Billing Remittance form along with the funds remitted for the nonfederal share of the costs of the services as specified on the form.

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