

SCHOOL ADMINISTRATIVE UNIT #13

881A Tamworth Road Tamworth, NH 03886

(603)323-5088 Fax: (603)323-5093

Louis J. Goscinski, Sr.
Superintendent
lgoscinski@sau13.org

Raina Shearer Chick
Student Services Director
rchick@sau13.org

Dear Parents,

We appreciate the opportunity to educate your child with special needs and count it as a privilege to do so.

As the cost of educating children with special needs continues to increase, however, we continue to seek sources of funding to help offset the cost to local tax payers of health related services that are provided to children with special needs pursuant to their Individualized Education Program (IEP). One source of funding in this regard is through Medicaid. As we seek funding through Medicaid, we want to remind you of your rights under Special Education Law (The "IDEA").

A. The School District must provide written notice to you that includes the following information, prior to seeking your consent to bill Medicaid:

- We may disclose personally identifiable information about your child for the purposes of Medicaid reimbursement to the state Medicaid agency;
- The limited purpose of these disclosures will be so that the school district may receive some reimbursement of health related services that may be provided pursuant to your child's IPE under the IDEA;
- You understand and agree that we may access you or your child's Medicaid coverage for the purposes of seeking reimbursement.
- The School District -
 - May not require you to sign up for or enroll in public benefits or insurance programs in order for your child to receive a Free Appropriate Public Education (FAPE) under Part B of the IDEA;
 - May not require you to incur an out-of-pocket expense such as the payment of a deductible or co-pay amount incurred in filing a claim for services provided under the IDEA;
 - May not use your child's benefits under Medicaid if that use would -
 - Decrease available lifetime coverage or any other insured benefit;
 - Result in the family paying for services that would otherwise be covered by Medicaid and that are required for your child outside of the time your child is in school;
 - Increase premiums or lead to the discontinuation of benefits or insurance; or
 - Risk loss of eligibility for home and community-based waivers, based on aggregate health-related expenditures
 - You have the right under 34 C.F.R. part 99 to withdraw consent to disclosure of your child's personally identifiable information to Medicaid at any time; and
 - Your withdrawal of consent or refusal to provide parental consent under 34 C.F.R. part 99 and 34 C.F.R. §300.622 does not relieve the School District of its responsibility to ensure that all services are provided at no cost to you consistent with the principles of a Free Appropriate Public Education under the IDEA.

B. The School District must also provide you with this notice annually.

Please feel free to contact me or your child's special education teacher.

Sincerely,

Raina S. Chick
SAU #13, Director of Student Services