## **Wood County Board of Developmental Disabilities**

## **POLICY**

Policy #:

01-ALL-ALL-0159

**Effective Date:** 

Person Responsible:

03-01-06

Superintendent

Subject:

Last Revision:

Payment for Medical Services

09-01-09

Approvals/Date:

Superintendent WCRDD

Date

Board President, WCBDD

Date

The Board has established a policy for the payment of medical services, including medical equipment, that are not covered by Medicaid for adults who are eligible for services from the Wood County Board of DD.

Reimbursement will be paid according to medical industry standards.

Prior to requesting payment from the Board, an assessment will be conducted by the Service Coordinator to determine the eligible individual's financial need.

The Board shall be the payor of last resort.

The Board shall pay for only those services that have been determined to be medically essential by the physician and/or therapist (psychiatric and/or counseling services). As needed, the Board will also pay the required co-payment for prescriptions.

For efficiency and effectiveness purposes, this policy shall be reviewed on a quarterly basis and shall be effective for no longer than twelve (12) months following the implementation date. Expenditures for this policy, in conjunction with the dental services policy, shall not exceed an annual cost of \$20,000 per person.

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