

PERMISSION FOR USE OF MEDI-CAL INSURANCE

Ventura County Special Education Local Plan Area (SELPA)

Date _____

Student _____

DOB _____

District _____

Dear Parent:

The LEA Medi-Cal Billing Option Program began January 1, 1994. The federal Medicaid program allows school districts and county offices of education to apply for reimbursement for certain health-related services which are provided to eligible children within the school environment.

Any income from this program is used by the district to offset costs of providing special education services. **It will not affect your child's individual benefits.**

The district may only bill Medi-Cal with specific permission from the parents. For more information about the school district Medi-Cal program, please contact _____

I do do not give permission to the school district to bill the LEA Medi-Cal Billing Option Program for the services checked below. Permission is given for the duration of the current IEP or until revoked by me, in writing.

Any of the following:

- Vision & Hearing Assessment
- Speech-Language Assessment & Services
- Physical Therapy Assessment & Services
- Occupational Therapy Assessment & Services

- Health/Nutrition Assessment
- Specialized Physical Health Care Services
- Nursing Services
- Audiological Assessment & Services
- Psychological Assessment & Counseling

- Wheelchair Transportation to Medical Services
- Health Education
- Psychological Status Assessment

Signature

Date