

# OSPI Notification and Consent forms for School-Based Medicaid Overview

2026



Washington Office of Superintendent of  
**PUBLIC INSTRUCTION**

# Contents

- Overview ..... 3
  - Two forms are used in this process:..... 3
- Frequently Asked Questions .....6
- Staff Reminder .....7
- Legal Notice.....8

This document explains how school staff use OSPI Notification and Consent forms for School-Based Medicaid, 12A and 12B, what each form is for, and how to clearly guide families through the process. It also includes answers to common family questions.

## Overview

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Medicaid and School-Based Services help school districts receive federal funds for certain health services that students already receive through their Individualized Education Programs (IEPs) or Individualized Family Service Plan (IFSP). These funds help support services like nursing, speech therapy, counseling, and other health supports in schools.

In Washington, Medicaid is known as Apple Health, which is the state's Medicaid program. When schools bill Medicaid, they are billing Apple Health for eligible services provided to students.

Federal rules require schools to be clear and transparent with families. Families must receive information about their rights and must have a real choice about whether they give consent for Medicaid billing.

## Two forms are used in this process:

**Form 12A and Form 12B are used for different purposes in Medicaid and School-Based Services.**

**Form 12A is an annual notice and information form.** It explains how Medicaid and School-Based Services work, what information may be shared, and the rights and protections families have. It also allows the district to verify a student's Medicaid eligibility. Districts must give Form 12A to families **before first accessing Medicaid and every year after that** as the required annual notice.

**Form 12B is a consent form.** It asks families to give written permission to the district to bill Medicaid for school-based health services that are already part of the student's Individualized Education Program (IEP). This consent is required **before the district bills Medicaid for the first time**. It is collected once per school district and stays in effect unless the family revokes it. If a student moves to a different district, the new district must collect a new Form 12B before billing Medicaid.

Student mobility and transfers: OSPI Notification and Consent forms for School-Based Medicaid (Form 12A and Form 12B) do not transfer with a student when they move to a new district. Best practice is to embed consent collection into student onboarding, re-enrollment, and service initiation workflows so that when a student transfers, the receiving district proactively secures new consent as part of its standard enrollment and service planning processes.

When these forms are shared early and used consistently as part of district onboarding and yearly processes, districts can stay in compliance, reduce staff workload, and avoid missing opportunities to bill Medicaid appropriately.

## Clarifying Authority for OSPI Notification and Consent forms for School-Based Medicaid —12A and 12B

The requirement to provide written notification and obtain parental consent prior to accessing a child's public benefits or insurance is required by [federal law under 34 CFR § 300.300\(d\) \(Individuals](#)

[with Disabilities Education Act regulations](#)). This federal requirement is implemented in Washington through WAC 392-172A-07005(3), which states:

“Prior to accessing a student's or parent's public benefits or insurance for the first time, and annually thereafter, the school district must provide written notification, consistent with [WAC 392-172A-05010\(3\)](#), to the student's parents.”

The Office of Superintendent of Public Instruction (OSPI) has standardized Forms 12A (Annual Notification) and 12B (Parental Consent) to ensure districts consistently meet these federal and state legal requirements.

Form 12A fulfills the annual written notification requirement.

Form 12B fulfills the one-time written consent requirement prior to the first billing of Medicaid by a district.

## **Together, these forms operationalize compliance with both federal IDEA regulations and Washington Administrative Code.**

### *Step by Step Process for Staff*

#### **Step 1:** Share Information First

Provide Form 12A to families every year, the first time Medicaid billing is discussed, or when updated consent is needed.

Explain clearly that:

- This form is for information and transparency.
- It explains family rights and protections.
- It does not ask families to agree to Medicaid billing.

**Staff may say:** *"This form explains how Medicaid works in schools and outlines your rights. It will allow us only to check Medicaid Eligibility. You do not need to make any decisions today."*

#### **Step 2:** Talk About Services

During IEP meetings, always review the students' services before talking about Medicaid.

Make it clear that:

- Services are based on student needs.
- Medicaid does not decide what services to include in an IEP.
- Services are always provided at no cost to families.

This helps families understand that Medicaid is about funding, not eligibility for services.

#### **Step 3:** Offer the Consent Form

If appropriate, provide Form 12B after Form 12A has been shared.

Explain that:

- Signing the form allows the district to ask Medicaid to help pay for services already provided.
- Signing is optional.
- Saying no does not change services.

**Staff may say:** *"If you choose to sign, it helps the district receive federal funds for services your child already gets. If you choose not to sign, your child's services stay the same."*

**Step 4:** Answer Questions Clearly

Use simple, plain language.

Reassure families that:

- There is no cost to them.
- Medicaid billing does not affect benefits outside of school.
- Their choice will be respected.

Take time to listen and respond to concerns.

Frequently asked questions are included in this document for you to review. For any questions you cannot answer, you may say you want to follow up with the Health Services lead, school Principal or want to contact or [Office of Superintendent of Public Instruction \(OSPI\)](#).

**Step 5:** Respect the Family's Choice

Families may say yes or no.

Do not pressure families to sign.

Document their decision and continue services either way.

**Step 6:** Ongoing Rights

Families can withdraw consent at any time.

Explain that:

- Withdrawal only stops future billing.
- Services continue as written in the IEP/IFSP.

# Frequently Asked Questions

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## **How often do families receive these Medicaid forms?**

Families receive Medicaid information at least annually. Form 12A, the notification form, operationalizes this process and should be provided each year and can be paired with the district's annual Procedural Safeguards Notice.

Form 12B consent is a one-time, per-district activity, similar to consent for services. It should be gathered when a district proposes to begin IEP/IFSP services and then remains in effect unless the family revokes it. This reduces the need for repeated signatures and helps avoid delays in finalizing review of IEPs.

Staff may revisit Form 12B during IEP meetings or service check-ins as a reminder of how Medicaid billing works and to reinforce families' rights. Families should always be reminded that consent is optional, can be revoked at any time, and that revoking consent only stops future billing and does not affect services in the IEP.

## **Will signing change my child's IEP services?**

No. All services in the IEP are provided at no cost, whether or not you sign.

## **Will this cost my family money?**

No. There are no fees, copays, or deductibles.

## **Does this use up my child's Medicaid benefits?**

No. School Medicaid billing does not reduce benefits outside of school.

## **Can families change their minds later?**

Yes. You can withdraw consent at any time.

## **Why does the school use Medicaid?**

Medicaid helps schools support nurses, therapists, counselors, and other health staff so students can get the services they need.

## **What information is shared?**

Only limited information needed to verify Medicaid eligibility and request payment is shared. This includes things like a student's name, date of birth, the type of health service provided, and which school district or provider billed for the service.

This is the same kind of information used when a child receives care at a clinic, hospital, pharmacy, or behavioral health provider, and billing for school-based services does not change how Apple Health (Medicaid) information is used or shared.

# Staff Reminder

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Be kind and patient. Use clear, simple language. Never suggest services depend on signing. Make sure families receive the correct forms. Share district contact information for follow-up questions.

**If needed, you or school leadership may have questions and can reach out to:** [Office of Superintendent of Public Instruction \(OSPI\)](#).

[Model Forms](#).

# Legal Notice

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