



NASHOBA

Regional School District

50 Mechanic Street Bolton, Massachusetts 01740

Joan DeAngelis
Pupil Personnel Services Director
(978) 779-0539 x3013

Brooke Clenchy
Superintendent of Schools
(978) 779-0539 x3002

Notification of Parental Consent Rights

Dear Parent/Guardian:

Enclosed is a MassHealth (Medicaid) Parental Consent form which allows Nashoba Regional to seek reimbursement for allowable claims. The State has expanded and updated their claiming process and have updated the attached form which will only need to be signed once.

Granting consent to the District to submit claims to MassHealth does not change the amount, frequency, or duration of MassHealth services that MassHealth member can receive inside or outside of school. As the cost of educating children with special needs continues to increase, we continue to seek sources of funding to help offset the cost to local tax payers of health related services that are provided, in many cases, to children with special needs pursuant to their Individualized Education Program (IEP). One source of funding in this regard is through Medicaid. This consent does not affect your child's Special Education services or Medicaid services in any way.

Please sign and return the attached form in the stamped return envelope. If you have questions, please call me at 978-779-0539 x3012 or email me at lmilton@nrsd.net.

Thank you.

Linda Milton
Special Education