

Documenting Nursing Services

UNDERSTANDING MODIFIERS

HA: General Education: Caring 4 Students Program (C4S)

<u>HT:</u> Special Education: ELIGIBILITY RECOMMENDATION (IDEA Eval) —An evaluation must have been done, but it also encompasses all observations, meetings (except the IEP/IFSP, which has a separate code below) and reports which culminate in a determination or re-determination of eligibility for Special Education or Early On services. The service date is the date of the eligibility meeting.

<u>TM:</u> Special Education: IEP/IFSP MEETING – Participation in the IEP/IFSP meeting. Attendance is not necessary; participation includes written input submitted prior to the meeting. Date of service is the IEP meeting date.

<u>No Modifier:</u> Special Education: OTHER EVAL – Other evaluation completed for purposes other than the IDEA Assessment. The service date is the date the test was completed.

1 SBS: SPECIAL EDUCATION STUDENTS	
T1001 HT	1] SBS: IDEA Eval: Assessment, IDEA [T1001 HT]. Nursing Assessment/Evaluation, report and eligibility recommendation. Date of service is the date of eligibility determination.
T1001 TM	1] SBS: IEP/IFSP Participation [T1001 TM] Participation in the IEP/IFSP meeting. Attendance is not necessary, but participation includes written input submitted prior to the meeting. Date of service is date IEP meeting was held.
G0108	1] SBS: Diabetic Management Training Individual
G0109	1] SBS: Diabetic Management Training Group
H0034	1] SBS: Mental Health Medication Training and Support [H0034] – Use only for Mental Health Medication training and support.
T1001	1] SBS: Nursing Assessment, Not related to MET or IEP [T1001] - Use date evaluation was completed.
T1002	1] SBS: RN Service [T1002] Direct service interventions must be medically based services provided during a face-to-face encounter, and provided on a one-to-one basis. Such services include: Catheterizations or catheter care; maintenance of tracheotomies; medication administration; oxygen administration; tube feeding; suctioning; and ventilator care. Services considered observation or stand-by in nature are not covered.

2| NON-BILLABLE DOCUMENTATION

- 2] IEP: Consult-Use for logging students with Consult service listed in the Program & Services section of their IEP.
- 2] IEP: Monitoring-Use for logging students with Monitor service listed in the Accommodation section of their IEP.
- 2] Non-Billable: Behavior Plan Meeting use to log for students with a behavior plan.
- 2] Non-Billable: Communication- Use to log communication with parent, other providers, staff etc
- 2] Non-Billable: Early On Family Training: Group- Use to log family training provided in a group setting.
- 2] Non-Billable: Educational Accommodations Delivered Use to document the student received an accommodation.
- 2] Non-Billable: Educational Group Accommodations Delivered Use to document the group received an accommodation.
- 2] Non-Billable: Home Visit-Use to record Home Visits at the student's home.
- 2] Non-Billable: Manifestation Determination Review Meeting determining if the behavior is related to the student's disability.
- 2] Non-Billable: No School Day use to note no school day. Start time = time intended to work with student
- 2] Non-Billable: Other-Use to log any provided service that does not meet criteria of any other selection.
- 2] Non-Billable: Parent and/or Staff Meeting Do not use for IEP/IFSP meetings.
- 2] Non-Billable: Provider Absent -Use to note provider absence. Start time = time intended to work with student.
- 2] Non-Billable: Provider not Available -Use to note provider not available. Start time = time intended to work with student.
- 2] Non-Billable: Record Keeping-Use for any student record keeping purposes you want to track.
- 2] Non-Billable: REED-Use to document REED service.
- 2] Non-Billable: Related Service Case Management Use to track Case Management for students that you are the case manager.
- 2] Non-Billable: Report Writing- Use to document the time it takes to write evaluation/report
- 2] Non-Billable: Student Absent-Use to report Student Absent. Start Time = time you intended to work with the student.
- 2] Non-Billable: Student Not Available-Use to log that student was not available. Start Time = time you intended to work with the

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student.

- 2] Non-Billable: Student Observation— Use to document time observing students for evaluation purposes.
- 2] Non-Billable: Student Refused Service— Use to document student refusing service.
- 2] Program 270 Early On Work on Goals ONLY use this option if you are delivering services under Program 270.
- 2] Program 270 Early On Work on Goals Group- ONLY use this option if you are delivering services under Program 270.

3] C4S: GENERAL EDUCATION STUDENTS	
T1001 HA	3] C4S: Nursing Assessment [T1001 HA]. Nursing Assessment/Evaluation and report.
G0108	3] C4S: Diabetic Management Training Individual
G0109	3] C4S: Diabetic Management Training Group
H0034 HA	3] C4S: Mental Health Medication Training and Support [H0034 HA] - Use only for Mental Health Medication training and support
T1002 HA	3] C4S: RN Service [T1002 HA] Direct service interventions must be medically based services provided during a face-to-face encounter, and provided on a one-to-one basis. Such services include: Catheterizations or catheter care; maintenance of tracheotomies; medication administration; oxygen administration; tube feeding; suctioning; and ventilator care. Services considered observation or stand-by in nature are not covered.

GENERAL SERVICE INFORMATION

- Consult services are an integral part or an extension of a direct medical service but are not separately reimbursable.
- SBS treatment services are reportable only if the student's IEP/IFSP includes Direct services with a time and frequency.
- Nursing services should be documented in a School Healthcare Plan
- Billing is due the 15th of the month.

Service Documentation:

The Michigan Department of Health & Human Services (MDHHS) has emphasized the importance of thoroughly documenting all services provided to Special Education students.

For direct services such as therapy, service documentation must include:

- The activity/method of treatment
- Level of assistance needed (i.e. visual cue, modeling, etc.)
- Specific findings or results of each therapy session
- Next steps (if any)

Provider Note Example: RN Service (T1002): "Administered breathing treatment per nebulizer per doctor's orders without difficulty."

Monthly Progress Summaries are REQUIRED for each month that services are reported for Medicaid eligible students. A monthly progress summary must include:

- Evaluation of progress toward IEP goals for the month.
- Include any changes in medical/mental status & changes in treatment plans with rational for change.

Monthly Progress Summary Example: "Breathing treatments ordered due to history of asthma and abnormal trachea. Treatment delivered via nebulizer without difficulty."

Annual Requirements:

Nursing services must be prescribed by a physician and updated annually. Please follow your district's procedure for uploading Prescriptions, Doctor Orders and Medication Consents in MiPSE.

Staff Qualifications:

The services listed are reimbursable when provided by a licensed registered nurse (RN), a qualified school nurse (as defined by Public Act 269 of 1955 as amended), a certified nurse practitioner (NP), or a certified nurse specialist (CNS).

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Supervision & Under the Direction Of:

Michigan Department of Health and Human Services Provider Manual dated October 2017 1.4 UNDER THE DIRECTION OF AND SUPERVISION

Certain specified services may be provided under the direction of or under the supervision of another clinician. For the supervising clinician, "under the direction of" means that the clinician is supervising the individual's care, which at a minimum, includes seeing the individual initially, prescribing the type of care to be provided, reviewing the need for continued services throughout treatment, assuring professional responsibility for services provided, and ensuring that all services are medically necessary. "Under the direction of" requires face-to-face contact by the clinician at least at the beginning of treatment and periodically thereafter.

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