School Based Services Tip Sheet for Physical Therapists



Procedure Code	Description	Date of Service/ Minimum Time Requirement
IDEA Assessment	IDEA Assessments (Results in initial certification,recertification, or change in certification)	The date of the IEP/IFSP Meeting
97001 HT	Initial or 3-year re-evaluation to determine a student'sneed for services and recommend a course of treatment.	The date of determination of eligibility for special education or early on services, i.e. the date of the IEP/IFSP. The evaluation should be reported only once, even if the evaluation is administered over several days. Physical Therapy does not need to be on the IEP/IFSP to report this evaluation as long as the student becomes special education certified.
Evaluation-PT	Evaluation and Testing which is for other than certification, recertification, and change in certification	Date the service is completed. (Do notuse the IEP/IFSP meeting date)
97001	Other Evaluations. Choose this procedure for administering evaluations for purposes other than theIDEA Assessment. Use this for evaluations to decertify students from special education.	Record the date the evaluation is completed. Do not report this on the same date as the IEP/IFSP meeting.
IEP/IFSP Participation	Development, Review, and Revision of the IEP Treatment Plan	Date of IEP/IFSP
97001 TM	Development, review, and revision of IEP/IFSP treatment plan. This includes attendance at the IEP/IFSP meeting. Use this for initial, annual, and 3-year IEP participation.	The date of special education certification, i.e., the IEP/IFSP meeting date.
Therapeutic Procedures	Individual & Group Therapy	Date of Service
97110	Individual therapeutic procedure in one or more areas. Therapeutic exercises to develop strength andendurance, range of motion, and flexibility.	Date of therapy. Each unit is 15minutes. Limit 60 minutes per day
97116	Gait training (includes stair climbing)	Date of therapy. Each unit is 15minutes. Limit 60 minutes per day.
97150	Group Therapeutic procedure (2 to 8 students)	Date of therapy. One unit can be reported per day, per student.
97530	Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities toimprove functional performance).	Date of therapy. Each unit is 15minutes. Limit 60 minutes per day
ATD	Assistive Technology Device Services	Date of Service
97112	Neuromuscular re-education of movement, balance,coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities	Date of service. One unit can be reported per day.

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97535	Self-care/home management training (e.g., activities of daily living and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment). Includes selecting or supporting the acquisition of an ATD, designing, fitting, customizing, adapting, applying, retaining, or replacing the ATD. Coordinating and using other therapies, interventions, or services with the ATD.Training or technical assistance for the individual, or, ifappropriate, the individual's parent/guardian. Training or technical assistance for professionals providing othereducation or rehabilitation services to the individual receiving ATD services. Direct one-on-one contact.	Date of service. One unit is 15 minutes. Limit 60 minutes per day
97542	Wheelchair management (e.g., assessment, fitting, training). If wheelchair management services are supplied for equipment that is covered under the Medicaid Durable Medical Equipment (DME) program, all policies and procedures applicable to that program must be adhered to.	Date of service. Each unit is 15minutes. Limit 60 minutes per day
97755	Assistive technology assessment (e.g., to restore, augment, or compensate for existing function, perfect functional tasks and/or maximize environmental accessibility), direct one-on-one contact by provider, with written report. (If assessments are done for equipment that is coveredunder the Medicaid Durable Medical Equipment (DME) program, all policies, and procedures applicable to that program must be adhered to.	Date of service. Each unit is 15minutes. Limit 60 minutes per day
97760	Orthotic(s) management and training, (including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s), and/or trunk.	Date of service. Each unit is 15 minutes. Limit 60 minutes per day
97761	Prosthetic training, upper and/or lower extremity(s)	Date of service. Each unit is 15 minutes. Limit 60 minutes per day

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- IDEA Assessment (HT Modifier): A formal evaluation that includes assessments, evaluations, tests, and related activities performed to determine if a student is eligible under provisions of the IDEA of 1990 as amended in 1997 and is related to the evaluation and functioning of the student. The IDEA Assessment is reimbursable only after it results in the implementation of an IEP/IFSP.
- A three-year re-evaluation that results in decertification can still be billed as the student is special education certified at the time the evaluation is being administered. Use the procedure code without the HT modifier for an evaluation that results in decertification (In Excent Tera this is "Evaluation PT").

Evaluations are formalized testing and reports to determine a student's need for services and recommend a course of treatment. An evaluation includes:

- The treatment diagnosis and the medical diagnosis, if different from the treatment diagnosis
- Current therapy being provided to the student in this and other settings
- Medical history as it relates to the current course of therapy
- The student's current functional status (functional baseline)
- The standardized and other evaluation tools used to establish the baseline and to document progress
- Assessment of the student's performance components (e.g., strength, dexterity, range of motion) directly
 affecting the student'sability to function
- Assessment of the student's cognitive skill level (e.g., ability to follow directions, including auditory and visual, comprehension)
- Evaluation of the needs related to assistive technology device services, including a functional evaluation of the student

Physical therapy services include:

- Group therapy provided in a group of two to eight students
- Gait training
- Training in functional mobility skills (e.g., ambulation, transfers, and wheelchair mobility)
- Modalities to allow gains of function, strength, or mobility

Assistive Technology Device Services (ATD)

- Coordinating and using other therapies, interventions, or services with the ATD
- Training or technical assistance for the student, or, if appropriate, the student's parent/guardian
- Training or technical assistance for professionals providing other education or rehabilitation services to the beneficiary receiving ATD services
- Neuromuscular reduction of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/orstanding activities
- Evaluating the needs of the student, including a functional evaluation. ATD services are intended to directly
 assist a beneficiary with a disability in the selection, coordination of acquisition, or use of an ATD
- Selecting, providing for the acquisition of the device, designing, fitting customizing, adapting, applying, retaining or replacing the ATD, including orthotics
- Wheelchair assessment, fitting, training

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