

Procedure Code	Service Type	Description
	REED	REED Participation. Use date of the IEP/IFSP as date of service
H0031 TL	Psych/SW Mental Health Assessment	Participation in the Review of Existing Evaluation Data (REED). The date of the IEP is recorded as the service date. Attendance is not necessary. Your written report is considered participation
96112 TL	Developmental Testing 31 to 76 minutes	Participation in the Review of Existing Evaluation Data (REED). The date of the IEP is recorded as the service date. Attendance is not necessary. Your written report is considered participation.
96112 TL; 96113 TL	Developmental Testing 77+ minutes	Participation in the Review of Existing Evaluation Data (REED). The date of the IEP is recorded as the service date. Attendance is not necessary. Your written report is considered participation
96130 TL	Psychological testing evaluation 31 to 91 minutes	Participation in the Review of Existing Evaluation Data (REED). The date of the IEP is recorded as the service date. Attendance is not necessary. Your written report is considered participation.
96130 TL; 96131TL	Psychological testing evaluation 92+ minutes	Participation in the Review of Existing Evaluation Data (REED). The date of the IEP is recorded as the service date. Attendance is not necessary. Your written report is considered participation.
96136 TL	Psychological or neuropsychological test administration and scoring 16 to 46 minutes	Participation in the Review of Existing Evaluation Data (REED). The date of the IEP is recorded as the service date. Attendance is not necessary. Your written report is considered participation.
96136 TL;96137 TL	Psychological or neuropsychological test administration and scoring 47+ minutes	Participation in the Review of Existing Evaluation Data (REED). The date of the IEP is recorded as the service date. Attendance is not necessary. Your written report is considered participation.



Evaluations and Testing for IDEA		IDEA Assessments (Results in initial certification, recertification, or change in certification). Use date of IEP/IFSP for date of service.
96127 HT	Brief Emotional/Behavioral Assessment for IDEA	Brief emotional/behavioral assessment (e.g. depression inventory, attention-deficit/hyperactivity disorder scale, with scoring and documentation, per standardized instrument).
H0031 HT	Initial/Reeval Mental Health Assessment, IDEA	Mental Health Assessment for the initial eligibility determination or 3- year re-evaluation for Special Education eligibility. Claim the service once using the date of the IEP/IFSP. The IEP/IFSP date must be documented in the assessment. This encompasses all activities related to the assessment; observations, written report, and testing.
96110 HT	IDEA Eval: Developmental Screen w/score	Developmental screening w/score (e.g., developmental milestone survey, speech and language delay screen), with interpretation and report per standardized instrument form.
96112 HT	IDEA Eval: Developmental Testing 31 to 76 minutes	Developmental Testing (includes assessment of fine and/or gross motor, language, social, memory, and/or cognitive level functioning by standardized developmental instruments) with interpretation and report.
96112 HT; 96113 HT	IDEA Eval: Developmental Testing 77+ minutes	Developmental Testing (includes assessment of fine and/or gross motor, language, social, memory, and/or cognitive level functioning by standardized developmental instruments) with interpretation and report.
96130 HT	IDEA Eval: Psychological testing evaluation 31 to 91 minutes	Psychological testing evaluation including integration of student data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the student, family member(s) or caregiver(s) when performed.
96130 HT; 96131 HT	IDEA Eval: Psychological testing 92+ minutes	Psychological testing evaluation including integration of student data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report and interactive feedback to the student, family member(s) or caregiver(s) when performed.
96136 HT	IDEA Eval: Psychological or neuropsychological test administration and scoring 16 to 46 minutes	Psychological or neuropsychological test administration and scoring (two or more tests must be administered by any method – paper, verbal, or electronic)
96136 HT; 96137 HT	IDEA Eval: Psychological or neuropsychological test administration and scoring 47+ minutes	Psychological or neuropsychological test administration and scoring (two or more tests must be administered by any method – paper, verbal, or electronic)



IEP/IFSP Participation	Development, Review, and Revision of the IEP Treatment Plan Use date of the IEP/IFSP as date of service. Provide detail about the meeting and your participation in it.
IEP/IFSP Participation – Mental Health Assessment (H0031 TM)	Development, review, and revision of IEP/IFSP treatment plan. This includes attendance at the IEP/IFSP meeting. Present results of Mental Health Assessment.
IEP/IFSP Participation -Brief Emotional/Behavioral Assessment (96127 TM)	Development, review, and revision of IEP/IFSP treatment plan. This includes attendance at the IEP/IFSP meeting. Present results of Brief Emotional/Behavioral Assessment.
IEP/IFSP Participation –Developmental Screen w/score (96110 TM)	Development, review, and revision of IEP/IFSP treatment plan. This includes attendance at the IEP/IFSP meeting. Present results of Developmental Screen.
Monthly Progress Summary – Required 1x/m services (using the last school day of the mo	onth at the end of each month in which you have documented nth is recommended practice)
<ul> <li>Service Date &amp; Time: Should be a date/time Minutes: Not required</li> <li>Group Size: 1</li> <li>Progress Report: Not Applicable Provider Notes: Detailed</li> <li>Example – Determined eligibility this month report and at the IEP team meeting held on</li> <li>Areas Covered/Assessed: Select from the d the box "Has this service been completed?"</li> <li>Save</li> </ul>	by completing a REED and needed evaluations. Shared information via (date).
Crisis	Crisis Intervention mental health services per hour
Crisis Intervention Service (S9484)	Crisis Intervention services are unscheduled activities performed for resolving an immediate crisis. Activities include crisis response, assessment, referral, and direct therapy. Since these services are unscheduled activities, they are not listed in the student's IEP/IFSP treatment plan.
Record Keeping Only	
<ul> <li>Other - Use to log any provided service th</li> <li>Provider Absent - Use to note provider a</li> <li>Provider not Available - Use to note prov</li> <li>Record Keeping - Use for any student red</li> </ul>	lay, start time = time intended to work with student at does not meet criteria of any other selection. bsence. Start time = time intended to work with student. vider not available. Start time = time intended to work with student. cord keeping purposes you want to track. Absent. Start Time = time you intended to work with the student. <b>Student</b>

• **Student Absent -** Use to report Student Absent. Start Time = time you intended to work with the student. **Student Not Available** - Use to log that student was not available. Start Time = time you intended to work with the student.



### Services: School Psychologists General Service Information

- Developmental testing is medically related testing (not performed for educational purposes) provided to
  determine if motor, speech, language, and psychological problems exist or to detect the presence of any
  developmental delays. Testing is accomplished by the combination of several testing procedures and includes
  the evaluation of the student's history and observation. Whenever possible and when age- appropriate,
  standardized objective measurements are to be used (e.g. Denver II) for students under the age of six.
  Administering the tests must generate material that is formulated into a report. Developmental testing done for
  educational purposes cannot be billed to Medicaid.
- Provider Notes must include enough detail to allow reconstruction of what transpired for each service.
- Notes are vital in determining what occurred on the date of services and the result of the service.
- Billing is due on the 15<sup>th</sup> of each month.
- If you have any questions, please contact the Medicaid Department: Shawna Dippman 734-342-8620 or Angela Dunn 734-342-8621

### Service Detail

### Daily:

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 and counseling, documentation must include a progress entry for each direct service which describes the service rendered and the student's response to that day's service or treatment. **S.O.A.P. notes are best practice!** If not using the S.O.A.P. format, ensure enough data is in your comment to support the service you are entering.

**Example of Note:** Student was tested using (list assessments that are NOT academic only) on 10/7, 10/8, and 10/10. Student was determined eligible for special education on 10/15/2019 under the disability category of Emotional Impairment. I attended the IEP meeting on 10/15/2019 where the eligibility report was reviewed and the IEP was developed to address deficit areas.

### **Record Retention**

Keep copies of all supporting documentation related to this service for a period of 8 years (FY+7) regardless of change in ownership or termination of participation in Medicaid. This requirement is also extended to any subcontracted provider with which the provider has a business relationship.

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