

School Based Services Tip Sheet School Social Worker



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Psychological, Counseling, and Social Work Services - Provider notes must include enough detail to allow reconstruction of what transpired for each service. **Document delivery of service per the IEP service times.**

Requires Monthly Progress Summary - Must include evaluation of progress and summarize the services reported during the month & must be dated in the month the services were provided - *using the last school day of the month is recommended.*

Evals, Assessments, and Meeting Modifiers -

HT: ELIGIBILITY RECOMMENDATION (IDEA: Eval) – An evaluation must have been done, but it also encompasses all observations, meetings (except the REED & IEP/IFSP, which have separate codes 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.

TM: 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.

TL: REED MEETING – Participation in the Review of Existing Evaluation Data (REED). Date of service is the date the REED form was completed. Attendance is not necessary; participation includes written input submitted prior to the meeting. **GT: TELEHEALTH** - MSA Policy Bulletin 20-15 permanently establishes telehealth for behavioral health and includes a temporary COVID-19 provision allowing for telephone only services. The effective date of this policy is March 1, 2020. Please remember that all teleservices must be billed with the GT modifier and a place of service of 02-telehealth. Please document the place of service in your provider notes.

No Modifier: OTHER EVAL – Other evaluation completed for purposes other than the IDEA Assessment. The service date is the date the test was completed.

Procedure Code	Service Type	Description
90832	Psychotherapy, 16 to 37 minutes with student and/or family member (90832)	Treatment of a mental or emotional disorder with student and/or family (if student is present for part of the session).
90834	Psychotherapy, 38 to 52 minutes with student and/or family member (90834)	Treatment of a mental or emotional disorder with student and/or family (if student is present for part of the session).
90785: 90832	Interactive Complexity- Psychotherapy, 16 to 37 minutes w/student and/or family (90785: 90832)	Interactive complexity is used in conjunction with psychotherapy when factors complicate the delivery of service. Common issues that exist: <ol style="list-style-type: none"> 1. Maladaptive Communication (i.e., high anxiety, reactivity or disagreement) 2. Caregiver's emotions or behaviors interfere with implementation of treatment plan 3. Mandated reporting such as in situations of abuse or neglect 4. Use of play equipment devices or an interpreter due to lack of fluency or undeveloped verbal skills.
90785: 90834	Interactive Complexity- Psychotherapy, 38 to 52 minutes w/student and/or family (90785: 90834)	Interactive complexity is used in conjunction with psychotherapy when factors complicate the delivery of service. Common issues that exist: <ol style="list-style-type: none"> 1. Maladaptive Communication (i.e., high anxiety, reactivity or disagreement) 2. Caregiver's emotions or behaviors interfere with implementation of treatment plan 3. Mandated reporting such as in situations of abuse or neglect 4. Use of play equipment devices or an interpreter due to lack of fluency or undeveloped verbal skills.

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90846	Family Psychotherapy (conjoint) w/o student present; must be in IEP/IFSP	Family psychotherapy (conjoint psychotherapy) without the student present. Limit one session per day
90847	Family Psychotherapy (conjoint) with student	Family psychotherapy (conjoint psychotherapy) with student present. Limit one session per day
90853	Group Therapy, 2-8 students	Two to eight students present in therapy group. Limit one session per day
H0004	Individual Behavioral Health Counseling	Behavioral counseling per 15 minutes - addresses mental health and substance use disorders.
Crisis Intervention can be provided to any student. Service is not listed in IEP/IFSP, 504, or Health Plan		
S9484	Crisis Intervention Service	Crisis Intervention mental health services, per hour; unscheduled activities provided for the purpose of resolving an immediate crisis situation. Activities include crisis. response, assessment, referral, and direct therapy.
Social Work Evaluation (Initial and Three-Year Redetermination) - Date of Service is Date of IEP/IFSP		
H0031 HT	Initial/Reeval Mental Health Assessment, IDEA	Evaluation of the student's overall mental health functioning; used for initial and recertification of special education eligibility.
96127 HT	Brief Emotional/Behavioral Assessment for IDEA	Brief emotional/behavior assessment (e.g., depression inventory, attention-deficit/hyperactivity disorder (ADHD) scale, with scoring and documentation, per standardized instrument used for initial and recertification of special education eligibility.
96110 HT	IDEA Eval: Developmental Screen w/score	Developmental screen with scoring and documentation, per standardized instrument used for initial and recertification of special education eligibility.
96112 HT	IDEA Eval: Developmental Testing 31 to 76 minutes	Developmental testing (including assessment of fine and/or gross motor, language, cognitive level, social, memory, and/or executive functions by standardized developmental instruments when performed).
96112 HT; 96113 HT	IDEA Eval: Developmental Testing +77 minutes	Same as above with added time. Select the above procedure until you reach 76 minutes. Select this procedure to record the time of testing at 77 minutes and beyond. These are recorded on the same date of service – the date student becomes certified for special education.
Social Work Evaluation – Not for Certification - Date of Service is Date the Evaluation is completed		
H0031	Mental Health Assessment, Not related to MET or IEP/IFSP	Mental health assessment which is not used for special education certification.
96127	Brief Emotional/Behavioral Assessment, Not related to MET or IEP/IFSP	Brief emotional/behavior assessment (e.g., depression inventory, attention-deficit/hyperactivity disorder (ADHD) scale, with scoring and documentation, per standardized instrument; not used for special education certification.
96110	Other Eval: Developmental Screen w/score – Not for IDEA	Developmental screen with scoring and documentation, per standardized instrument; not used for special education certification.

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96112	Other Eval: Developmental Testing 31 to 76 minutes – Not for IDEA	Developmental testing (including assessment of fine and/or gross motor, language, cognitive level, social, memory, and/or executive functions by standardized developmental instruments when performed); not used for special education certification.
96112; 96113	Other Eval: Developmental Testing 77+ minutes – Not for IDEA	Same as above with added time. Select the above procedure until you reach 76 minutes. Select this procedure to record the time of testing at 77 minutes and beyond. These are recorded on the same date of service – the date you complete the evaluation.
IEP/IFSP Participation		
H0031 TM	IEP/IFSP Participation – Mental Health Assessment	Participation in the IEP/IFSP meeting. Completed evaluation = mental health assessment
96127 TM	IEP/IFSP Participation – Brief Emotional/Behavioral Assessment	Participation in the IEP/IFSP meeting. Completed evaluation = brief emotional/behavioral assessment
96110 TM	IEP/IFSP Participation- Developmental Screen w/score	Participation in the IEP/IFSP meeting. Completed evaluation = developmental screen
REED		
H0031 TL	REED –Psych/SW Mental Health Assessment	Participation in the reevaluation of existing data (REED) in the determination of the student’s eligibility for special education services. Completed mental health assessment.
96112 TL	REED; Developmental Testing 31 to 76 minutes	Participation in the reevaluation of existing data (REED) in the determination of the student’s eligibility for special education services. Completed Developmental Testing.
96112 TL; 96113TL	REED; Developmental Testing 77+ minutes	Participation in the reevaluation of existing data (REED) in the determination of the student’s eligibility for special education services. Completed Developmental Testing with added time.
Record Keeping Only		
Other	-	
Communication	-	
No School Day	-	
Consultation	-	
Student Absent/Unavailable	-	
Provider Absent/Unavailable	-	
Non-billable Group (size 9+)		Record services for groups larger than 8 or when therapy is a part of the classroom activity.

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Services: School Social Workers 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:**
 - Intervention/Strategies Used + Therapist Action (level of assist/focus/feedback) + Student Response + Next Steps
- Notes are vital in deciding what occurred on the date of services and the result of the service.
- Monthly progress notes are REQUIRED for all months for which, therapy services are reported:
- Must include evaluation of progress and summarize the services reported during the month
- Must be dated in the month the services were provided - *using the last school day of the month is recommended*
- Group therapy must be provided in groups of 2-8 students.
 - If the group is larger than 8, use the procedure "Non-billable Group" to document the service.
- Services provided as part of a regular classroom activity are not reimbursable.
 - When regularly scheduled attention is provided to one student who is part of the class currently in session the service is not reimbursable.
- Consult services **are not separately reimbursable.**
 - If you are providing consult services, use the service type "Consultation" to document the service
- Billing is due on the 15th of each month.
 - If you have any questions, please contact the Medicaid Department:
 - Shawna Dippman 734-342-8620 or Angela Dunn 734-342-8621

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