

Nurse – RN Tip Sheet

Service Type	Procedure Code	Start/End Time	Medical Areas
MET/Eval (Initial and 3-Year Redetermination) <ul style="list-style-type: none"> Includes meetings, reports and eval(s) Date of service is date of determination of eligibility (IEP Mtg.) 	T1001HT	No	Yes
IEP (Annual and Initial) <ul style="list-style-type: none"> Includes meetings, reports and eval(s) Date of service is date of IEP Meeting 	T1001TM	No	Yes
Nursing Assessments/Evals not related to MET of IEP <ul style="list-style-type: none"> Do not select this if testing is part of IEP or MET Date of service is date test is completed 	T1001	No	Yes
RN Services	T1002	Yes	Yes
Monthly Progress Note	-	No	No
Student Absent	-	No	No
Student Unavailable	-	No	No
Provider Absent	-	No	No
Provider Unavailable	-	No	No
Nonbillable Entry	-	No	No

Medical Areas		
<ul style="list-style-type: none"> IEP Development/Review Nursing Assessment/Evaluation Medication Administration Diabetes Management/Training Catheterizations or Catheter Care 	<ul style="list-style-type: none"> Oxygen Administration/Level Check Ventilator Care Tube Feeding G-Tube Reinsertion Maintenance of Tracheotomies 	<ul style="list-style-type: none"> Percussion and Postural Drainage Blood Pressure Check Weight Check Temperature Check Pulse Check Nebulizer (Breathing) Treatment

General Service Information
<ul style="list-style-type: none"> Direct service interventions must be provided during a face-to-face encounter and provided on a one-to-one basis. Services considered observation or stand-by in nature are not covered. Nursing services must be included in the IEP (i.e. medication, suctioning, tube feeding, etc.). These services should be on a scheduled basis rather than first aid or illness checks that occur on occasion. Service comments must include enough detail to allow reconstruction of what transpired for each service. Monthly progress notes are REQUIRED for all months for which services are reported: <ul style="list-style-type: none"> Must include evaluation of progress and summarize the services reported during the month Must be dated in the month the services were provided - <i>using the last school day of the month is recommended.</i> All logging for the month must be completed by the 5th of the following month. All student information contained in Illuminate is private and confidential – do not share your username or password with anyone or write it down where it can be seen by others. <p>If you have any questions, please contact the Medicaid Department: Heidi Cuthbert Medicaid Coordinator 269-471-7725 ext. 1143 Heidi.Cuthbert@berrienresa.org</p>

