

Occupational Therapist 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.) 	97003HT	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 	97003TM	No	Yes
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 	97003	No	Yes
Individual Therapy	97110	Yes	Yes
Group Therapy (2-8 individuals)	97150	Yes	Yes
ATD - Neuromuscular <ul style="list-style-type: none"> • Reeducation of movement balance, coordination, kinesthetic sense, posture and /or proprioception for sitting and/or standing activities 	97112	Yes	Yes
ATD - Orthotics <ul style="list-style-type: none"> • Fitting and training, upper and lower extremity(ies), and/or trunk, each 15 minutes 	97760	Yes	Yes
ATD - Prosthetics Training upper and/or lower extremity(ies), each 15 minutes	97761	Yes	Yes
ATD - Self-care/Home Mgmt. Training <ul style="list-style-type: none"> • Activities of daily living and compensatory training, meal prep, safety procedures and instructions in the use of assistive technology/adaptive equipment, direct 1:1 	97535	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"> • Evaluation • IEP Development/Review • Activities of Daily Living • Developmental • Feeding/Oral Motor Training • Fine Motor Skills • Neuromuscular Development 	<ul style="list-style-type: none"> • Prevocational • Sensorimotor • Visual Motor • Visual Perceptual • ATD Services • ATD Coordinating • ATD Training

General Service Information

- Consult services are an integral part or an extension of a direct medical service and are not separately reimbursable.
- 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:
 - 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.*
- 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.
- If you have any questions, please contact the Medicaid Department:

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