



Physical Therapy (PT) Tip Sheet

or Physical Therapist Asst. being supervised by a licensed PT.

Assessments - There are 4 different IDEA assessments

MET/Evaluation (initial and 3-year): The evaluation should be reported only once, even if the evaluation is administered over several days. The date of service is the date eligibility is determined (IEP meeting). **>HT Modifier**

IEP (initial and annual): Participation in the IEP/IFSP meeting & encompasses all work done for the IEP. The date of service is the date/time of the IEP meeting. **>TM Modifier**

REED: Participation in the Reviewing of Existing Evaluation Data (REED). The date of service is the date the IEP team completes its review of the data. **>TL Modifier**

Evaluations not related to MET or IEP: Evaluations completed for purposes other than the IDEA Assessment. The date of service is the date the test is completed, even if the evaluation is administered over several days. **>No Modifier**

Procedure Code	
97161:HT:96	<p>MET Evaluation and Meeting (initial/ReEval or Other MET) Low Complexity, Habilitative - PT</p> <ul style="list-style-type: none"> * History - A history of present problems with no personal factors and/or comorbidities that impact the plan of care * Examination - An examination of body systems using standardized tests and measures in addressing 1 or 2 elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions * Clinical Presentation - A clinical presentation with stable and/or uncomplicated characteristics <p>Clinical decision making of low complexity using standardized patient assessment instrument and/or measurable assessment of functional outcomes</p> <p>NOTE: Typically, 20 minutes are spent face-to-face with the patient and/or family</p>
97161:HT:97	<p>MET Evaluation and Meeting (initial/ReEval or Other MET) Low Complexity, Rehabilitative - PT</p> <ul style="list-style-type: none"> * History - A history of present problems with no personal factors and/or comorbidities that impact the plan of care * Examination - An examination of body systems using standardized tests and measures in addressing 1 or 2 elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions * Clinical Presentation - A clinical presentation with stable and/or uncomplicated characteristics <p>Clinical decision making of low complexity using standardized patient assessment instrument and/or measurable assessment of functional outcomes</p> <p>NOTE: Typically, 20 minutes are spent face-to-face with the patient and/or family</p>
97162:HT:96	<p>MET Evaluation and Meeting (initial/ReEval or Other MET) Moderate Complexity, Habilitative - PT</p> <ul style="list-style-type: none"> * History - A history of present problems with 1-2 personal factors and/or comorbidities that impact the plan of care * Examination - An examination of body systems using standardized tests and measures in addressing the total of 3 or more elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions * Clinical Presentation - An evolving clinical presentation with changing characteristics <p>Clinical decision making of moderate complexity using standardized patient assessment instrument and/or measurable assessment of functional outcomes</p> <p>NOTE: Typically, 30 minutes are spent face-to-face with the patient and/or family</p>
97162:HT:97	<p>MET Evaluation and Meeting (initial/ReEval or Other MET) Moderate Complexity, Rehabilitative - PT</p> <ul style="list-style-type: none"> * History - A history of present problems with 1-2 personal factors and/or comorbidities that impact the plan of care * Examination - An examination of body systems using standardized tests and measures in addressing the total of 3 or more elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions * Clinical Presentation - An evolving clinical presentation with changing characteristics <p>Clinical decision making of moderate complexity using standardized patient assessment instrument and/or measurable assessment of functional outcomes</p> <p>NOTE: Typically, 30 minutes are spent face-to-face with the patient and/or family</p>
97163:HT:96	<p>MET Evaluation and Meeting (initial/ReEval or Other MET) High Complexity, Habilitative - PT</p> <ul style="list-style-type: none"> * History - A history of present problems with 3 or more personal factors and/or comorbidities that impact the plan of care * Examination - An examination of body systems using standardized tests and measures in addressing the total of 4 or more elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions * Clinical Presentation - A clinical presentation with unstable and unpredictable characteristics <p>Clinical decision making of high complexity using standardized patient assessment instrument and/or measurable assessment of functional outcomes</p> <p>NOTE: Typically, 45 minutes are spent face-to-face with the patient and/or family</p>

97163:HT:97	<p>MET Evaluation and Meeting (initial/ReEval or Other MET) High Complexity, Rehabilitative - PT</p> <p>* History - A history of present problems with 3 or more personal factors and/or comorbidities that impact the plan of care</p> <p>* Examination - An examination of body systems using standardized tests and measures in addressing the total of 4 or more elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions</p> <p>* Clinical Presentation - A clinical presentation with unstable and unpredictable characteristics</p> <p>Clinical decision making of high complexity using standardized patient assessment instrument and/or measurable assessment of functional outcomes</p> <p>NOTE: Typically, 45 minutes are spent face-to-face with the patient and/or family</p>
97161:TM:96	Participation in the Low Complexity, Habilitative IEP/IFSP Meeting - PT
97161:TM:97	Participation in the Low Complexity, Rehabilitative IEP/IFSP Meeting - PT
97162:TM:96	Participation in the Moderate Complexity, Habilitative IEP/IFSP Meeting - PT
97162:TM:97	Participation in the Moderate Complexity, Rehabilitative IEP/IFSP Meeting - PT
97163:TM:96	Participation in the High Complexity, Habilitative IEP/IFSP Meeting - PT
97163:TM:97	Participation in the High Complexity, Rehabilitative IEP/IFSP Meeting - PT
97164:TM:96	Participation in the IEP/IFSP Re-evaluation Meeting, Habilitative - PT
97164:TM:97	Participation in the IEP/IFSP Re-evaluation Meeting, Rehabilitative - PT
97161:TL:96	REED Eval/Assessment Low Complexity, Habilitative - PT
97161:TL:97	REED Eval/Assessment Low Complexity, Rehabilitative - PT
97162:TL:96	REED Eval/Assessment Moderate Complexity, Habilitative - PT
97162:TL:97	REED Eval/Assessment Moderate Complexity, Rehabilitative - PT
97163:TL:96	REED Eval/Assessment High Complexity, Habilitative - PT
97163:TL:97	REED Eval/Assessment High Complexity, Rehabilitative - PT
97164:TL:96	REED Re-evaluation of Established Plan, Habilitative - PT
97164:TL:97	REED Re-evaluation of Established Plan, Rehabilitative - PT
OTHER EVALUATIONS (NOT RELATED TO THE MET OR IEP)	
97161:96	Other Evaluation, Low Complexity, Habilitative - PT
97161:97	Other Evaluation, Low Complexity, Rehabilitative - PT
97162:96	Other Evaluation, Moderate Complexity, Habilitative - PT
97162:97	Other Evaluation, Moderate Complexity, Rehabilitative - PT
97163:96	Other Evaluation, High Complexity, Habilitative - PT
97163:97	Other Evaluation, High Complexity, Rehabilitative - PT
97164:96	Re-evaluation of Established Plan, Habilitative - PT
97164:97	Re-evaluation of Established Plan, Rehabilitative - PT
THERAPY / TREATMENT	
	<p>Physical therapy services include:</p> <ul style="list-style-type: none"> • Gait training; • Training in functional mobility skills (e.g., ambulation, transfers, wheelchair mobility); Stretching for improved flexibility; and • Modalities to allow gains (and maintenance) of function, strength or mobility.
97110:GP:96	Individual therapeutic procedure in one or more areas, Habilitative, each 15 minutes ; therapeutic exercises to develop strength and endurance, range of motion and flexibility.
97110:GP:97	Individual therapeutic procedure in one or more areas, Rehabilitative, each 15 minutes ; therapeutic exercises to develop strength and endurance, range of motion and flexibility.
97150:GP:96	Group therapeutic procedure(s), Habilitative, 2 to 8 individuals
97150:GP:97	Group therapeutic procedure(s), Rehabilitative, 2 to 8 individuals
97116	Gait training (includes stair climbing), each 15 minutes .
97530:96	Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), Habilitative, each 15 minutes . Begin time and duration of service must be documented.
97530:97	Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), Rehabilitative, each 15 minutes . Begin time and duration of service must be documented.

ASSISTIVE TECHNOLOGY DEVICE SERVICES	
97112:96	Neuromuscular re-education of movement, balance, coordination, kinesthetic sense, posture, &/or proprioception for sitting &/or standing activities: Habilitative
97112:97	Neuromuscular re-education of movement, balance, coordination, kinesthetic sense, posture, &/or proprioception for sitting &/or standing activities: Rehabilitative
97535:96	Self-care/home management training (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment). Includes selecting or providing for 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, if appropriate, the individual's parent/guardian. Training or technical assistance for professionals providing other education or rehabilitation services to the individual receiving ATD services, each 15 minutes: Habilitative
97535:97	Self-care/home management training (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment). Includes selecting or providing for 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, if appropriate, the individual's parent/guardian. Training or technical assistance for professionals providing other education or rehabilitation services to the individual receiving ATD services, each 15 minutes: Rehabilitative
97542	Wheelchair management (e.g., assessment, fitting, training), each 15 minutes. Does not pertain to assessments for durable medical equipment that are billed by a Medicaid medical supplier.
97755	Assistive technology assessment (e.g., to restore, augment or compensate for existing functional tasks and/or maximize environmental accessibility), direct one-on-one contact by providers, each 15 minutes . Do not use if assessments for durable medical equipment are billed by a Medicaid medical supplier.
97760:96	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s) and/or trunk, each 15 minutes : Habilitative
97760:97	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s) and/or trunk, each 15 minutes : Rehabilitative
97761:96	Prosthetic training, upper and/or lower extremities, each 15 minutes : Habilitative
97761:97	Prosthetic training, upper and/or lower extremities, each 15 minutes : Rehabilitative
AREAS COVERED / ASSESSED	
Must chose at least one for record to save:	<ul style="list-style-type: none"> - ATD Coordinating - ATD Services - ATD Training - Developmental - Gait Training - Other (If Other Specify): <input type="text"/> - Evaluation - Mobility Training - Strength Training - Therapeutic Exercise - Pulmonary Enhancement - Motor Planning Activities - Functional Performance - IEP Development / Review - Posture & Positioning Activities
RECORD-KEEPING ONLY	
Sometimes you only want to track what you've done, but you know it's not billable, SO...the code(s) below are your answer!	
> COMMUNICATION	Non-Billable EXAMPLES
> CONSULTATION	1) A service was rendered that was not billable (could not be classified under one of the codes listed above)
> GROUP GREATER THAN 8	2) Services were not rendered because a key participant was absent or not available.
> OTHER	3) You wish to make a record-keeping only entry into the system. Records created using any of the codes at the left will NOT be billed, even if the service is marked as complete.
> INTERN	
> NO SCHOOL DAY	4) Your service is listed on the IEP/IFSP programs & services page or supplemental page as "consultation".
> PROVIDER NOT AVAILABLE	
> PROVIDER ABSENT	
> STUDENT NOT AVAILABLE	
> STUDENT ABSENT	

GENERAL SERVICE INFORMATION

- The service record entered in PowerSchool Special Education (PSE) must be sufficiently detailed to allow reconstruction of what transpired for each service billed. The medical record must indicate the specific findings or results of diagnostic or therapeutic procedures. If an abbreviation, symbol, or other mark is used, it must be standard, widely accepted health care terminology. Symbols, marks, etc. unique to that provider MUST NOT BE USED.
- Consult services are an integral part or an extension of a direct medical service and **are not separately reimbursable**. DO NOT USE service types that show a "procedure code" at the end of the description.
- Service logs for prior month's services are due by the 15th of the following month.
- Group therapy must be provided in groups of 2-8 students. Therapy is not billable if the group is more than 8 participants.

SERVICE DOCUMENTATION

The Michigan Department of Health and Human Services (MDHHS) has emphasized the importance of thoroughly documenting all services provided to Special Education students. For direct services such as therapy or counseling, documentation must include:

- 1) A progress note for each direct service (therapy or counseling) which describes the goal of the service being rendered and the student's response to that day's service or treatment. For example, instead of "exercise class", a better note would be "Worked on improving flexibility and strength and student is making slow but steady progress".
- 2) A monthly progress summary, which is summation of the progress notes described above. For example: "Based on the five sessions held this month, we continue to work on X" or "we will adjust our focus to address Y".

Your documentation must indicate not only WHAT services are being rendered to meet the student's IEP goals, but HOW the student responded to each service.

Service Note Example:

09/12/2018: "Balance and strength activities. Slight progress on stepping over objects and maneuvering around obstacles."

Summary Note Example:

9/28/2018: "improving with mobility on even and uneven Surfaces. Able to climb stairs with handrail, using a step-to pattern without hand held assistance."

Staff Qualifications:

The services listed are reimbursable when provided by a Licensed Physical Therapist in Michigan or a Physical Therapist Assistant being supervised by a Licensed Physical Therapist in Michigan.

Annual Requirements:

Physical therapy services must be prescribed by a physician and the prescription must be updated annually. An electronic signature is acceptable, but a stamped physician signature is not acceptable.

IEP Requirements:

Therapy/treatment and assistive technology device services are reportable only if the student's IEP includes Direct or Direct/Consultation services with a time and frequency.