



CHAPTER 538 SCHOOL-BASED HEALTH SERVICES APPENDIX A

Chapter 538 School-Based Health Services

Appendix 538A

Nursing Services Billing Form

BMS Provider Manual Chapter 538 School-Based Health Services Appendix A, Nursing Services Billing Form

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DISCLAIMER: This chapter does not address all the complexities of Medicaid policies and procedures and must be supplemented with all State and Federal Laws and Regulations. Contact BMS Fiscal Agent for coverage, prior authorization requirements, service limitations, and other practitioner information.

Service Record – School-Based Nursing Services Billing Form

Medicaid Number	Last Name Fi		First Name	Date of Birth			
WVEIS Number	Provider Name/Credentials		County	School	Month/Year		
LIST ALL DIAGNOSIS CODES RELATED TO NURSING SERVICES							
1.	2.	3.	4.	5.	6.		

School Based Nursing Services: Written physician's orders with diagnosis required. School nursing services must be listed as a service on Plan of Care. Health Care Plan must be available with Service Care Plan.

Authorized Individual Nursing Services/Treatments:

Anaphylactic Reaction Assessment/Evaluation*	Seizure Management T1001 SE (2 Events/	*Diabetic Management T1001 SE (2 Events/		Manual Resuscitator 92950 (10/Calendar Year)				
T1001 SE (2 Events/	Calendar Year)	Calendar Year)						
Calendar Year)								
The following procedures use T1000 SE code and can be billed a maximum of 10 units for each procedure								
per instructional day. 1 Unit = 15 minutes								
Long Term Medication	Emergency Medication		Mechanical Ventilator		Inhalation Therapy*			
Administration	Administration							
Catheterization	Catheterization Self-		Subcutaneous Insulin		Peak Flow Meter*			
	Management*		Infusion-by Pump*					
Ostomy Care	Measurement of Blood		Subcutaneous Insulin		Oxygen			
	Sugar*		Infusion by Injection*		Administration			
Enteral Feeding (tube	Postural Drainage and		Tracheostomy Care		Oral Suctioning			
feeding)	Percussion							
Anaphylactic Reaction	*If providing services via Telehealth, use an additional modifier of GT.							
Individual								

Service Date	Diagnosis Code(s)	Procedure Code	Start Time	End Time	Units/Event

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