

**Chapter 538**  
School-Based Health Services

**Appendix 538A**

Private Duty Nursing Billing Form

# Service Record – Private Duty Nursing

<b>Medicaid Number</b>		<b>Last Name</b>			<b>First Name</b>		
<b>WVEIS #</b>		<b>Diagnosis Code</b>			<b>School</b>		
<b>County</b>	<b>Beginning Date</b>	<b>Ending Date</b>		<b>Procedure</b>	<b>Units</b>		
				<b>T1001</b>			
<b>Ind. Provider #</b>	<b>Beginning Date</b>	<b>Ending Date</b>		<b>Procedure</b>	<b>Units</b>		
				<b>T1000</b>			

Private Duty Nursing Services: *Written physician's orders with diagnosis and specialized care required. Must be identified on Service Plan (Care plan may be attached).*

Code	Procedure	Service Unit
T1001	Nursing Assessment/Evaluation	1 per year
T1000	Private duty/independent nursing services – licensed. Regarding the specialized healthcare procedures summarized below.)	15 minutes
T1017	Targeted Case Management	15 minutes per 1 unit

## Authorized Individual Nursing Services/Treatments:

Anaphylactic Reaction	Manual Resuscitator	Postural Drainage and Percussion
Catheterization: Clean-Self-Sterile	Mechanical Ventilator	Seizure Management
Long Term Medication Administration	Measurement of Blood Sugar with a Glucometer	Subcutaneous Insulin Infusion Pump/Bolus
Emergency Medication Administration	Oral Suctioning	Subcutaneous Insulin by Injection
Enteral Feeding (tube feeding)	Ostomy Care: Emptying/Changing of Ostomy Pouch	Tracheostomy Care
Epinephrine Auto-Injector	Oxygen Administration	Vagus Nerve Stimulator
Inhalation Therapy by Machine	Peak Flow Meter	Administering Medications through Gastrostomy/N-G Tube
Special Dietary Needs Medical Statement		

Date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Proc. Time															

Date	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Proc. Time																

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date