Student's name:			Provider's Name	:		
Student's date of birth:	PA Secure II)	Provider's Title:			
School:	Date:		Provider's Signat	ture:		
Diagnosis/symptom(s):	·				Early Intervention	School Age

Service	Treatment			Refer to the keys below for an explanation of the treatment codes and progress indicators		
Date	Start Time	End Time	Treatment Key (see Pg 2)	Service Type	Progress Indicator Key	Description of Service (daily notes on activity, location, and outcome)

Service Type:			
DFTF = Direct: Face-to-Face			
DIRT = Direct: Telemedicine			

Progress Indicator Type					
Mn = Maintaining	Pr = Progressing	In = Inconsistent			
Rg = Regressing	Ms = Mastering				

Treatment Key:

1	Direct	An encounter with student for completion of Medical Practitioner Authorization Forms; prescriptions; referral reports and documentation; relative to the SBAP.
2	Direct	An encounter with student for review of IEP document and additional documents to determine medical necessity for the medical/mental health-related services designated by the IEP team.
3	Direct	Other Direct Service

Notes:

- Services rendered via telemedicine must be provided according to the same standard of care as if delivered in person.
- Physician Services must be provided one-to-one with the student in order to be compensable through the School-Based ACCESS Program.
- The Treatment Key should not be considered an all-inclusive list. Providers may use "Other Direct Service" but must provide a clear description of the service in their comments.

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