

Medicaid Provider Service Log

Last Modified on 04/01/2025 1:46 pm CDT

Tool Search: Provider Service Log Detail Report

The Provider Service Log Detail Report list the services being provided to students by each provider for each service group type and by location.

Medicaid Provider Service Log Report
This report lists the Medicaid service log for each provider.
Service Date* From To 04/30/2014 Service Group V General V Transportation V Medical V Paraprofessional
Service List Provider List
All Services Speech and Langua Transportation
Service Location
Sort By Name Number Type
All Schools
648 Adult Academic Program
6/1 Adult Academics ind Study
696 Armstrong Credit Recovery
699 Cooper Credit Recovery 904 Creative Play (non reporting)
905 ECFE (non reporting)
0 ESC (non reporting)
103 Early Childhood
401 FAIR School (non-reporting) 4 Forest Elementary
200 Highview Alternative Program
Output Format PDF 👻
Generate Report
Provider Service Log Report editor

See the Student Information Reports Tool Rights article for the tool rights needed to generate this report.

Report Logic

Information returned on the report uses saved Medicaid Service Log Entries recorded between the entered Service Dates. Based on the selected Service Groups, matching information will be



returned.

Report Editor

The following options are available for selection on the Provider Service Log Report Editor.

Field	Description
Service Date	Entered dates aid in narrowing services to the entered date range. Dates are entered in <i>mmddyy</i> format or can be selected by choosing the calendar icon and picking a date. Both the From date and the To date are required in order to generate the report.
Service Group	Four options based on the Service Groups assigned to the services as entered in System Administration. At least one option needs to be selected to generate the report. If an option is not selected, that group does not display in the Service List. Options are: • General • Transportation • Medical • Paraprofessional
Service List	Lists the services as entered in Medicaid Services. These are not necessarily services that are assigned to students, just services that are available within the district.
Service Provider	Lists all active Providers who are currently providing services to students. At least one provider or All Providers must be selected in order to generate the report.
Service Location	Lists the locations (school names) where Medicaid services are provided. Choose at least one option by either the Name of the location, the Number of the location or the Type of location.
Report Format	The report can be generated in either PDF, DOCX, or HTML format.

Generate the Provider Service Log Report

- 1. Enter the **Service Dates** of the report.
- 2. Select the appropriate **Service Groups** to include on the report.
- 3. Select the services to include on the report from the **Services List.**
- 4. Select the **Providers** to include on the report.
- 5. Select the Service Location.
- 6. Determine the **Report Format**.
- 7. Click the Generate Report button. The report will generate and appear in a new window in



the selected format.

Report Example

Minnesota Generated on 09/11/2012 10:1	1 of 1	Medicaid Provider Service Log Date: 01/01/2011 - 09/11/2012 Providers: 3 Services: 3 Students: 3 Logs: 7								
Provider: Provider, Ann A					Other and	unsne	cified di	isorde	rs of	
eating Logs: 3 Students: Student (#Student Number)			Location		End Loc			Miles	Note	
Student, Devin(#123456789111111)	11/11/2011	Start	Location		End EUC	uuoli		mes	Note	
Student, Devin(#123456789111111)	11/12/2011									
	12/12/2011									
Student, Devin(#123456789111111) Provider: Provider, Bernade	• •									
Devin(#12345678911111) Provider: Provider. Bernade 2.1 Service: #555 Transpor hyperactivity Logs: 2 Stud	tation Group: lents: 1	: Transportatio	on ICD9 Code: 3		ADHD/At					•<
Devin(#12345678911111) Provider: Provider. Bernade 2.1 Service: #555 Transpor	tation Group:	: Transportatio						lisorde Miles	r with Note	15
Devin(#12345678911111) Provider: Provider. Bernade 2.1 Service: #555 Transpor hyperactivity Logs: 2 Stuc Student (#Student Number)	rtation Group: Jents: 1 Date	: Transportatio	on ICD9 Code: 3		ADHD/At					15
Devin#12345678911111) Provider: Provider, Bernade 2.1 Service: #555 Transpor hyperactivity Logs: 2 Stuc Student (#Student Number) Student, Ana (#234567)	tation Group: lents: 1 Date 09/11/2011 09/04/2012 mations Group	: Transportatio Start I	Don ICD9 Code: 3	314.01:	ADHD/Att	ation		Miles		15
Devin(#12345678911111) Provider. Provider. Bernade 2.1 Service: #555 Transpor hyperactivity Logs: 2 Stud Student (#Student Number) Student, Ana (#234567) Student, Ana (#234567) 2.2 Service: #3 Eye Examin hyperactivity Logs: 1 Stud Student (#Student Number)	tation Group: lents: 1 Date 09/11/2011 09/04/2012 mations Group	: Transportatio Start I	Don ICD9 Code: 3	314.01:	ADHD/Att	ation		Miles er with		
Devin(#12345678911111) Provider: Provider: Bernade 2.1 service: #555 Transport byperactivity Logs: 2 Stuc Student (#Student Number) Student, Ana (#234567) Student, Ana (#234567) 2.2 Service: #3 Eye Examin hyperactivity Logs: 1 Stuc	tation Group: lents: 1 Date 09/11/2011 09/04/2012 hations Group lents: 1	: Transportatio Start I	DD ICD9 Code: 3	314.01:	ADHD/Att End Loc	ation	disorde	Miles er with	Note	
Devin(#12345678911111) Provider. Provider. Bernade 2.1 Service: #555 Transpor hyperactivity Logs: 2 Stud Student (#Student Number) Student, Ana (#234567) Student, Ana (#234567) 2.2 Service: #3 Eye Examin hyperactivity Logs: 1 Stud Student (#Student Number)	tation Group: Jents: 1 Date 09/11/2011 09/04/2012 Jents: 1 Date 10/15/2011	: Transportatio Start I o: Medical IC Medication	CD9 Code: 314.01	314.01: ADHE	ADHD/Att End Loc D/Attentior Time 7 PM-03:0	ation deficit 7 PM	disorde	Miles er with	Note	
Devin(#2345678911111) Provider: Provider: Bernade 2.1 service: #555 Transport hyperactivity Logs: 2 Stuc Student, Ana (#234567) Student, Ana (#234567) 2.2 service: #3 Eye Examin hyperactivity Logs: 1 Stuc Student (Xaudent Number) Student (Xaudent Number) Student, Ana (#234567)	tation Group: Jents: 1 Date 09/11/2011 09/04/2012 nations Group Jents: 1 Date 10/15/2011 Agency: Agency	: Transportatio Start I b: Medical IC Medication cy for Health	ICD9 Code: 3 Location CD9 Code: 314.01 Name - Form - Service: 1 Loc	314.01: ADHI 02:07	ADHD/Att End Loc D/Attention Time 7 PM-03:0 Student:	ation a deficit 7 PM s: 1	disorde Dose: 3.0	Miles er with	Note	
Devin(#2345678911111) Provider: Provider: Bernade 21. service: #555 Transport hyperactivity Logs: 2 Stuc Student, Ana (#234567) Student, Ana (#234567) 2.2 Service: #3 Eye Examin hyperactivity Logs: 1 Stuc Student Number) Student Number) Student Number) Student Number) Student, Ana (#234567) Provider: Provider, Stan &	tation Group: Jents: 1 Date 09/11/2011 09/04/2012 nations Group Jents: 1 Date 10/15/2011 Agency: Agency	: Transportatio Start I b: Medical IC Medication cy for Health	ICD9 Code: 3 Location CD9 Code: 314.01 Name - Form - Service: 1 Loc	314.01: ADHI 02:07	ADHD/Att End Loc D/Attention Time 7 PM-03:0 Student:	ation deficit 7 PM s: 1 , unspe	disorde Dose: 3.0	Miles er with	Note	

Provider Service Log Report - PDF Example

Minnesota State Generated on 09/11/2012 10:18:57 AM Page • of •			dicaid Provider Service Log Date: 01.01.2011 - 09/11/2012 viders: 3 Services: 3 Students: 3 Logs: 7								
1. Provider: Provider, Ann Agency: Service	e: 1 Loc	is: 3 Stud	ents: 1								
1.1 Service: #555 Transportation Group	p: Trans	portation	ICD9 Code	: 307.50: Other and	d unspe	cifie	d disorders of eating	Logs	3 Stu	dents: 1	
Student (#Student Number)			Date	Start Locati	on		End Location	Mil	es	Notes	
Student, Devin (#12345678911111)		11/	11/2011								
Student, Devin (#123456789111111)			12/2011								
Student, Devin (#123456789111111)			12/2011								
2. Provider: Provider, Bernadette Agency:							1 J			0. 64uda	-
2.1 Service: #555 Transportation Group Student (#Student Number)	p: Trans		ate			detic	End Location	activity	Logs	1	nts: 1 tes
Student (#student Number)		_	1/2011	Start Location			End Location		Miles		les
Student, Ana (#234567)			4/2012					— ¦			_
, letterest)		03/0-	4/2012								
2.2 Service: #3 Eye Examinations Grou	p: Medic	al ICD9	Code: 314.0)1: ADHD/Attention	deficit	disor	der with hyperactivity	Log	s:1 Sti	udents: 1	
Student (#Student Number) Date			Medication Name - Form				Time	D	oses	Notes	
Student, Ana (#234567) 10/1		011	-			02:07 PM-03:07 PM			3.0		İ
3. Provider: Provider, Stan Agency: Agenc											
3.1 Service: #123545 bn Servic Medicaid			ICD9 Cod			utes		_			
Student (#Student Number) Student, Melissa (#567891)	of Malazza							s			
(#36/037)	05/1	3/2011	09:30	AM-03:30 PM	3	60	360.0				
Prov	ider	Ser	vice L	og Repo	rt -	Н	TML Exan	npl	е		