



District Roster

The district roster information is used for the processing of Medicaid claims for hearing and vision screenings and other services provided by allied health care practitioners. The roster is to include ALL students in the district—regular education and special education students. The information needs to be provided in a “delimited fixed column format” or an Excel file. Please provide the following information:

- Student **last name** (20 characters maximum)
- Student **first name** (15 characters maximum)
- Student **date of birth** (in MM/DD/YYYY format)
- Student **gender** (1 character) M or F
- Name of the **attending school**
- Student **grade**: -2 for EC, -1 for PK, 0 for K, and 01 through 12

Attach the file to an e-mail to bjohnson@tameshrs.com

Questions about providing roster data should be directed to Branden Johnson at (800) 848-0157.

For more information and instructions, please visit http://www.tameshrs.com/roster_instructions.php