


ISSUE DATE April 18, 2022	EFFECTIVE DATE May 1, 2022	NUMBER 05-22-01, 07-22-01
SUBJECT Additions to the Medical Assistance Fee Schedule for Personal Care Services Provided to Beneficiaries Under the Age of 21.		BY  Sally A. Kozak, Deputy Secretary Office of Medical Assistance Programs

IMPORTANT REMINDER: All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years. Providers should log into PROMISE to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the revalidation dates. Enrollment (revalidation) applications may be found at: <https://www.dhs.pa.gov/providers/Providers/Pages/PROMISE-Enrollment.aspx>.

PURPOSE:

The purpose of this bulletin is to announce the addition of procedure codes T1019 and S9122 to the Medical Assistance (MA) Program Fee Schedule for the provision of personal care services (PCS), which are provided through home health agencies (HHAs) to MA beneficiaries under 21 years of age.

SCOPE:

This bulletin applies to MA enrolled HHAs that render PCS to beneficiaries under 21 years of age in the MA fee-for-service (FFS) delivery system.

BACKGROUND:

The MA Program pays HHAs to provide PCS to beneficiaries under 21 years of age. PCS are provided in the beneficiary's home and community settings, in accordance with a plan of treatment and provided by a home health aide or certified nurse assistant under the supervision of a registered nurse. PCS consist of services that support activities of daily living such as ambulation, bathing, toileting, beneficiary transfers (e.g. transfer from bed to chair/chair to bed), and personal hygiene.

As set forth in MA Bulletin 05-2-003, 07-20-02 titled "Implementation of Electronic Visit Verification in the FFS and Physical Health Managed Care Delivery Systems," Section 12006(a) of the 21st Century Cures Act, P.L. 114-255, added section 1903(l) to the Social

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Provider Assistance Center: (800) 248-2152

Physical and Community HealthChoices providers should address any questions regarding EVV to the applicable MCO.

Visit the DHS EVV site at: <https://www.dhs.pa.gov/providers/Billing-Info/Pages/EVV.aspx>

Security Act, 42 U.S.C. §1396(b)(l), and requires states to implement Electronic Visit Verification (EVV) for Medicaid-funded PCS for in-home and community visits by a provider.

Although the Department has used procedure code S9122, defined as “home health aide or certified nurse assistant, providing care in the home; per hour” for home health aide services, the procedure code is not on the MA Program Fee Schedule and has been available only through the program exception process. In addition, the unit of service for procedure code S9122 is one hour. HHAs and other stakeholders expressed concerns that they are not able to bill for services provided in smaller time increments

DISCUSSION:

The Department is adding procedure code S9122 to the MA Program Fee Schedule. In addition, the Department is adding procedure code T1019, to allow providers to seek authorization of, and bill for, PCS for MA beneficiaries under 21 years of age in 15-minute increments. These procedure codes are available for Provider Type/Specialty combination 05/050 (Home Health/Home Health Services) in Place of Service 12 (Home) with no modifiers. These procedure codes can be used by HHAs for personal care services provided by home health aides and certified nurse assistants.

Procedure Code	Code Description	Fee	Unit Limit	Age Limit	Prior Authorization Required
T1019	Personal Care Services, Per 15 Minutes, Not For An Inpatient Or Resident Of A Hospital, Nursing Facility, ICF/MR or IMD, Part Of The Individualized Plan Of Treatment	\$6.84 per unit	96 per day	Age 0-20	Yes
S9122	Home Health Aide Or Certified Nurse Assistant, Providing Care In The Home; Per Hour	\$27.36 per unit	24 per day	Age 0-20	Yes

PROCEDURE:

Prior authorization is required for personal care services provided by HHAs. When seeking prior authorization of PCS rendered to MA beneficiaries under 21 years of age, HHAs must identify either procedure codes T019 or S9122 on the MA97 form. Only one of the codes can be used in a calendar month, although HHAs may seek prior authorization for a different procedure code beginning on the first day of a subsequent calendar month.

PCS services rendered by HHAs with a provider specialty of 050 are subject to EVV. Procedure codes T019 and S9122 will both be accepted by EVV systems.

Information related to EVV may be viewed by accessing the Department's website at the following link: <https://www.dhs.pa.gov/providers/Billing-Info/Pages/EVV.aspx>.

Providers may access the on-line version of the MA Program Fee Schedule, which reflects these changes, at the Department's website at: <https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/MA-Fee-Schedule.aspx>.