



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
One Ashburton Place, Room 1109
Boston, Massachusetts 02108

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary

Tel.: (617) 573-1600
Fax: (617) 573-1891
www.mass.gov/eohhs

Administrative Bulletin 15-11

114.3 CMR 9.00: Independent Living Services for the Personal Care Attendant Program
Effective July 1, 2015

Update to the Personal Care Attendant (PCA) Wage and Employer Expense Component Rates

The Executive Office of Health and Human Services is issuing this Administrative Bulletin under the authority of 114.3 CMR 9.01(5) to clarify the substantive provisions of 114.3 CMR 9.00 and to notify interested parties of payment updates pursuant to 114.3 CMR 9.01(4).

Included below are three new payment rates for PCA services for service codes T1019, T1019-TU, and T1019-TV; a new service code 99509-U1 for PCA earned sick time; and a new service code 99509-U3 for new hire orientation, replacing service code T1020-U3. These changes are all based on the PCA Wage and Employer Expense Components.

PCA Wage Component and Employer Expense Component Effective July 1, 2015

Code	Modifier	Rate	Unit	Description
T1019		\$ 3.88	15 minutes	Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/ID or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) (P.A.) (Use this code to bill for PCA services provided during day or night.)
T1019	TU	\$ 1.94	15 minutes	Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/ID or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) Special payment rate, overtime. (P.A.) (Use this code and modifier to bill for premium pay for overtime.)
T1019	TV	\$ 1.94	15 minutes	Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/ID, or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) Special payment rate, holidays. (P.A.) (Use this code and modifier to bill for premium pay for holidays.)
99509	U1	\$3.88	15 minutes	Home visit for assistance with activities of daily living and personal care. (per 15 minutes) (Use to bill for PCA earned sick time.) (Current PA for PCA services required for each member.)
99509	U3	\$46.56	Per diem	Home visit for assistance with activities of daily living and personal care. (Use to bill for PCA new hire orientation, per diem, per eligible PCA.)



Explanation of PCA Rates effective July 1, 2015

Wage Component	PCA Rate (Hourly)	Premium Pay Rate for Overtime and Holidays (Hourly)
PCA Gross Wage Component	\$13.68	\$20.52
Employer Expense Component	\$ 1.84	\$ 2.76
Total Class Rate	\$15.52	\$23.28