




Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
www.mass.gov/masshealth



MassHealth
Transmittal Letter DH-30
July 2023

TO: Day Habilitation Providers Participating in MassHealth

FROM: Mike Levine, Assistant Secretary for MassHealth 

RE: *Day Habilitation Manual* (Revised Service Codes and Descriptions)

MassHealth has revised Subchapter 6 of the *Day Habilitation Manual* to conform to the amended regulations 101 CMR 348.00.

Subchapter 6 contains the service codes and modifiers that day habilitation (DH) providers must use to bill for DH services provided to members. The revisions add two service codes: (1) an admissions service code to be used once per member enrolling in DH services for the first time and (2) a re-engagement code to be used once per member who has not received site-based services between March 24, 2020, and June 30, 2023, and is returning to site-based services on or after July 1, 2023.

The service codes and modifiers cannot be interchanged. MassHealth DH providers are authorized to use the quarter per diem service code for services provided for up to 1.5 hours per day, the half per diem service code for services provided for fewer than three hours but more than 1.5 hours per day, and the per diem service code for services provided for more than three hours per day.

MassHealth Website

This transmittal letter and attached pages are available on the MassHealth website at www.mass.gov/masshealth-transmittal-letters.

The amended regulations and service codes and descriptions for 101 CMR 348.00 (July 5, 2023) are available on the MassHealth web site at mass.gov/regulations/101-CMR-34800-rates-for-day-habilitation-services.

[Sign up](#) to receive email alerts when MassHealth issues new transmittal letters and provider bulletins.

Questions

If you have any questions about the information in this transmittal letter, please contact MassHealth's LTSS Provider Service Center at (844) 368-5184 or email your inquiry to support@masshealthltss.com.

NEW MATERIAL

(The pages listed here contain new or revised language.)

Day Habilitation Manual

Pages vi, 6-1, and 6-2

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Day Habilitation Manual

Page vi—transmitted by Transmittal Letter DH-27

Pages 6-1 and 6-2—transmitted by Transmittal Letter DH-29

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601 Explanation of Definitions

A day habilitation member is rated as a “low-need,” “moderate-need,” or “high-need” member based on their score on the Day Hab Leveling Tool.

- (A) Low-Need Member — scores between one and 41.
- (B) Moderate-Need Member — scores between 42 and 71.
- (C) High-Need Member — scores 72 or higher.

Day Habilitation Admission Services: provided to ensure safe and appropriate care planning for day habilitation members enrolling in day habilitation services for the first time. One-time-only claim per MassHealth ID.

Day Habilitation Re-engagement Services: Services provided to ensure successful re-engagement of members who have not received site-based services during the period of March 24, 2020, through June 30, 2023. One-time-only claim per MassHealth ID on or after the 45th day of service with sustainable re-engagement in site-based services.

Community-Based Services

Codes S5012, S5101, and S5100 (including use with all modifiers) are billable in per diem, half per diem, and quarter per diem units. The maximum allowable unit(s) for day habilitation services is one unit per claim date of service. The per diem unit must be used for service greater than three hours per day. The half per diem unit is used for service between 1.5 hours and three hours per day, and the quarter per diem is used for service under 1.5 hours per day. The maximum allowable units apply to day habilitation service codes only. See Service Code T2003 for minimum/maximum units allowed for in-facility transportation services.

Codes T1019 (including use with all modifiers), which are effective October 1, 2022, are denoted for Individualized Support Services (ISS). Certain qualifying individuals may need supplemental one-to-one care to enable their participation in the day habilitation program. **The approved supplemental rates are listed in 101 CMR 348.03(6) and require prior authorization.**

602 Service Codes and Descriptions: Day Habilitation Services

MassHealth pays for the services represented by the codes listed in Subchapter 6 in effect at the time of service, subject to all conditions and limitations in MassHealth regulations at 130 CMR 419.000 and 450.000. A day habilitation provider may request prior authorization for any medically necessary service reimbursable under the federal Medicaid Act in accordance with 130 CMR 450.144, 42 U.S.C. 1396d(a), and 42 U.S.C. 1396d(r)(5) for a MassHealth Standard or CommonHealth member younger than 21 years of age, even if it is not designated as covered or payable in Subchapter 6 of the *Day Habilitation Manual*.

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Service

<u>Code</u>	<u>Modifier</u>	<u>Service Description</u>
S5102		Skills training and development, per diem (day habilitation, low need)
S5102	TF	Skills training and development, per diem, intermediate level of care (day habilitation, moderate need)
S5102	TG	Skills training and development, per diem, complex/high tech level of care (day habilitation, high need)
S5102	22	Skills training and development, per diem, unusual procedural services (supplemental staffing for members who reside in a nursing facility and attend a community-based day habilitation program)
S5101		Skills training and development, half per diem (day habilitation, low need)
S5101	TF	Skills training and development, half per diem, intermediate level of care (day habilitation, moderate need)
S5101	TG	Skills training and development, half per diem, complex/high tech level of care (day habilitation, high need)
S5101	22	Skills training and development, half per diem, unusual procedural services (supplemental staffing for members who reside in a nursing facility and attend a community-based day habilitation program)
S5100	U5	Skills training and development, quarter per diem (day habilitation, low need)
S5100	U5 TF	Skills training and development, quarter per diem, intermediate level of care (day habilitation, moderate need)
S5100	U5 TG	Skills training and development, quarter per diem, complex/high tech level of care (day habilitation, high need)
S5105		Day care services, center-based, services not included in program fee. (Use for admission services: one-time lifetime payment per member enrolling in day habilitation services for the first time, paid on or after the 45 th day of service. One-time-only claim per MassHealth ID.)
S5105	KZ	Day care services, center-based, services not included in program fee. (Use for re-engagement services: returning day habilitation members who have not received center-based services during the period of March 24, 2020, through June 30, 2023. One-time-only claim per MassHealth ID on or after the 45 th day of service with sustainable re-engagement in center-based services.)
T1019		ISS – Direct care/program staff, per 15 minutes
T1019	TE	ISS – Licensed Practical Nurse (LPN), per 15 minutes
T1019	TD	ISS – Registered Nurse (RN), per 15 minutes
T1019	CG	Interim PA: ISS – Direct care/program staff, per 15 minutes
T1019	TE CG	Interim PA: ISS – Licensed Practical Nurse (LPN), per 15 minutes
T1019	TD CG	Interim PA: ISS – Registered Nurse (RN), per 15 minutes

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In-Facility Services

S5102	U1	Skills training and development, per 15 minutes (Use modifier U1 to denote day habilitation in a nursing facility with a staff-to-participant ratio of 1:2 or 1:3.)
S5102	U2	Skills training and development, per diem (Use modifier U2 to denote day habilitation in a nursing facility with a staff-to-participant ratio of 1:1.)
S5101	U1	Skills training and development, half per 15 minutes (Use modifier U1 to denote day habilitation in a nursing facility with a staff-to-participant ratio of 1:2 or 1:3.)
S5101	U2	Skills training and development, half per diem (Use modifier U2 to denote day habilitation in a nursing facility with a staff-to-participant ratio of 1:1.)
T2003		Nonemergency transportation; encounter/trip (Staff transportation to nursing facility, bill per one-way trip up to a maximum of two trips. Use this in conjunction with H2014 TG and TF only when services occur in a nursing facility.)

This publication contains codes that are copyrighted by Ingenix, Inc. Certain terms used in the service descriptions for HCPCS codes are defined in the Ingenix HCPCS Level II code book.