

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid



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MassHealth Transmittal Letter HHA-56 April 2023

TO: Home Health Agencies Participating in MassHealth

FROM: Mike Levine, Acting Assistant Secretary for MassHealth Who Levine

RE: Home Health Agency Manual (Revised Subchapter 6: Service Codes and Descriptions)

This letter transmits revisions to the service code descriptions in Subchapter 6 of the *Home Health Agency Manual*. Providers may bill with the service codes and service code/modifier combinations listed in this transmittal letter for any date of service within the billing deadlines described in 130 CMR 450.309: *Time Limitation on Submission of Claims: General Requirements* through 130 CMR 450.314: *Final Deadline for Submission of Claims*.

A. New Codes

G0493 Skilled services of a registered nurse (RN) for the observation and assessment of

the patient's condition (PA required prior to start of care; Use only concurrently

with G0156 UD)

G0156 UD Services of home health aide in the home health setting (ADL support) (per 15

minute unit) (PA required prior to start of care)

B. Deleted Codes

MassHealth deleted the following code/modifier combinations.

G0299 TT Direct skilled nursing services of a registered nurse (RN) in home health setting.

(per visit for MassHealth members; 1-30 calendar days; use when billing for each subsequent member – not for the first member- when two or more members in the

same household are receiving a nursing visit during the same time period)

G0300 TT Direct skilled nursing services of a licensed practical nurse (LPN) in home health

setting, (per visit for MassHealth members; 1-30 calendar days; use when billing for each subsequent member – not for the first member- when two or more members in the same household are receiving a nursing visit during the same

time period)

G0299 TT UD Direct skilled nursing services of a registered nurse (RN) in home health setting

(per visit for MassHealth members. Use when billing for each subsequent member—not for the first member—when two or more members in the same household are receiving a nursing visit during the same time period; 31 or more

consecutive calendar days)

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G0300 UD TT Direct skilled nursing services of a licensed practical nurse (LPN) in the home health setting (per visit for MassHealth members. Use when billing for each subsequent member—not for the first member- when two or more members in the same household are receiving a nursing visit during the same time period, for members in home health services; 31 or more consecutive calendar days)

C. Removal of Continuous Skilled Nursing Codes

MassHealth has established a separate provider manual for Continuous Skilled Nursing (CSN) Agencies. All CSN code/modifier combinations have been transitioned into a new *Continuous Skilled Nursing Agency* Manual. Separate transmittal letters were issued for the new CSN manual and Subchapter 6.

D. Changes to Prior Authorization Requirements

MassHealth has made conforming changes to update references to a procedure code's prior authorization requirements to align with updates made at 130 CMR 403.000.

E. Fee Schedule

If you want to obtain a fee schedule, you may download the Executive Office of Health and Human Services regulations at no cost at www.mass.gov/service-details/eohhs-regulations. The rates for Home Health Services.

F. MassHealth Website

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

<u>Sign up</u> to receive email alerts when MassHealth issues new transmittal letters and provider bulletins.

G. Questions

The MassHealth LTSS Provider Service Center is open, 8 a.m. to 6 p.m. ET, Monday through Friday, excluding holidays. LTSS Providers should direct their questions about this letter or other MassHealth LTSS Provider questions to the LTSS Third Party Administrator (TPA) as follows:

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Method	Contact Information for MassHealth LTSS Provider Service Center
Phone	Toll-free (844) 368-5184
Email	support@masshealthltss.com
Portal	MassHealthLTSS.com
Mail	MassHealth LTSS PO Box 159108 Boston, MA 02215
Fax	(888) 832-3006
LTSS Provider Portal	Trainings, general Information, and future enhancements will be available at www.MassHealthLTSS.com .

NEW MATERIAL

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

Home Health Agency Manual

Pages vi, 6-1 through 6-2

OBSOLETE MATERIAL

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

Home Health Agency Manual

Page vi — transmitted by Transmittal Letter HHA-53

Pages 6-1 through 6-4 — transmitted by Transmittal Letter HHA-54

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601 Explanation of Abbreviation

The abbreviation "PA" indicates that MassHealth prior authorization is required (see program regulations in Subchapter 4 of the *Home Health Agency Manual*).

602 Service Codes and Descriptions: Home Health Aide, Therapy, and Nursing Services

Prior authorization for all nursing services, including RN, LPN, and medication administration service codes, is 30 visits in a calendar year, unless otherwise indicated below.

Revenue Code	Service Code-Modifier	Service Description
<u> </u>	<u> </u>	Nursing (for a Visit of Two Hours or Less) and Home Health Aide
0551	G0299	Direct skilled nursing services of a registered nurse (RN) in home health setting (per visit for MassHealth members; 1-30 calendar days)
0551	G0300	Direct skilled nursing services of a licensed practical nurse (LPN) in home health setting, (per visit for MassHealth members; 1-30 calendar days)
0551	G0299 UD	Direct skilled nursing services of a registered nurse (RN) in home health setting (per visit for MassHealth members; 31 or more consecutive calendar days)
0551	G0300 UD	Direct skilled nursing services of a licensed practical nurse (LPN) in home health setting, (per visit for MassHealth members; 31 or more consecutive calendar days)
0551	G0493	Skilled services of a registered nurse (RN) for the observation and assessment of the patient's condition (PA required prior to start of care; Use only concurrently with G0156 UD)
0551	T1502	Administration of oral, intramuscular, and/or subcutaneous medication by health care agency/professional (RN or LPN only; per visit for MassHealth members; Use only for Medication Administration visit)
0551	T1503	Administration of medication other than oral and/or injectable, by a health care agency/professional, per visit (RN or LPN only; per visit for MassHealth members; Use only for Medication Administration visit)
0551	99058	Service(s) provided on an emergency basis in the office, which disrupts other scheduled office services, in addition to basic service (use for emergency office services)
0572	G0156	Services of home health aide in home health setting, (per 15 minute unit; PA required after 240 units in a calendar year)
0572	G0156 UD	Services of home health aide in the home health setting (ADL support) (per 15 minute unit) (PA required prior to start of care)

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602 Service Codes and Descriptions (cont.)

_	Revenue	<u>Service</u>	
<u>(</u>	Code Code	Code-Modifier	Service Description
			Therapy
(0421	G0151	Services of physical therapist in home health setting, (per visit for MassHealth members; PA required after 20 visits in a calendar year)
(0431	G0152	Services of occupational therapist in home health setting (per visit for MassHealth members; PA required after 20 visits in a calendar year)
(0441	G0153	Services of speech and language pathologist in home health setting (per visit for MassHealth members; PA required after 35 visits in a calendar year)
()579	99509	A home visit for assistance with activities of daily living and personal care (to be used for emergency temporary personal care attendant services provided by a home health aide).