

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



600 Washington Street Boston, MA 02111 www.mass.gov/dma

> MassHealth Home Health Agency Bulletin 42 February 2004

**TO:** Home Health Agencies Participating in MassHealth

FROM: Beth Waldman, Medicaid Director

RE: Correction to Transmittal Letter HHA-35

### Correction

MassHealth recently mailed Transmittal Letter HHA-35, dated December 2003, which contained incorrect information in two places:

- the table on page two of the letter; and
- the crosswalk attachment.

Revenue codes for "speech/language pathology" and "occupational therapy" were inadvertently transposed in both of these locations.

The following electronic billing table and attached crosswalk correct these errors. Please discard the previous crosswalk, and use the attached one.

Please note that the Subchapter 6 transmitted with Transmittal Letter HHA-35 is correct, and does not need to be replaced.

## Corrected Table for Electronic Billing

Revenue Code	Service Code	Service Description		
0551	G0154	Services of a skilled nurse in a home health setting		
0551	99058	Office services provided on an emergency basis		
0570	G0156	Services of a home health aide in a home health setting		
0421	G0151	Services of a physical therapist in a home health setting		
0431	G0152	Services of an occupational therapist in a home health setting		
0441	G0153	Services of a speech therapist in a home health setting		

### Questions

If you have any questions about this bulletin, please contact MassHealth Provider Services at 617-628-4141 or 1-800-325-5231.

# Home Health Agency Provider Service Code Crosswalk

Effective for dates of service beginning January 1, 2004

Service Type	Obsolete Code	Description	Billing Instructions					Billing Guidelines
			Paper Claim 09/EMC		837-Institutional (837I) Claim Transaction			Please Note: All home health visits must
			New Service Code – Modifier	Description		nue Code (four digits) 2400; Field SV201	New Service Code – Modifier	be reported on separate claim lines in order to receive correct reimbursement. This applies to all skilled nursing, physical therapy, occupational therapy, and speech therapy visits.
lome He	alth Agency	<u>y Visits</u>						
	X0031	Nursing care visit	G0154	Services of skilled nurse in home health setting, each 15 minutes	0551	Skilled nursing, visit charge	G0154	Actual time spent for each visit must be reported in 15-minute increments using G0154. Reimbursement remains at a pervisit rate.
	X0032	Nursing visit, office	99058	Office services provided on an emergency basis	0551	Skilled nursing, visit charge	99058	
	X0037	Home health aide services (per six-minute unit)	G0156	Services of home health aide in home health setting, each 15 minutes	0570	Home health aide, general	G0156	Home health aide services are reimbursed in 15-minute increments.
	X0038	Physical therapy visit	G0151	Services of physical therapist in home health setting, each 15 minutes	0421	Physical therapy, visit charge	G0151	Actual time spent for each visit must be reported in 15-minute increments using G0151. Reimbursement remains at a pervisit rate.
	X0039	Speech/language therapy visit	G0153	Services of speech and language pathologist in home health setting, each 15 minutes	0441	Speech/language pathology, visit charge	G0153	Actual time spent for each visit must be reported in 15-minute increments using G0153. Reimbursement remains at a pervisit rate.
	X0040	Occupational therapy visit	G0152	Services of occupational therapist in home health setting, each 15 minutes	0431	Occupational therapy, visit charge	G0152	Actual time spent for each visit must be reported in 15-minute increments using G0152. Reimbursement remains at a pervisit rate.
emporar	ry Emergen	cy Personal Care Attendant (P	CA) Services P	rovided by Home Health Agency				
	X0021	Nursing care visit for PCA services	G0154	Services of skilled nurse in home health setting, each 15 minutes	0551	Skilled nursing, visit charge	G0154	Reimbursement at the per-visit rate for nursing supervision of home health aide providing emergency PCA services.  Actual time spent during the visit must be
								reported in 15-minute increments using G0154.
	X0022	Home health aide services for PCA services	99509	Home visit for assistance with activities of daily living and personal care	0579	Other home health aide	99509	Do <b>not</b> use a modifier for PCA services provided by a home health aide.