



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
600 Washington Street
Boston, MA 02111
www.mass.gov/masshealth



MASSHEALTH
TRANSMITTAL LETTER PCA-16
November 2006

TO: Personal Care Providers Participating in MassHealth
FROM: Beth Waldman, Medicaid Director *BW*
RE: *Personal Care Manual* (Revisions to Service Codes in Subchapter 6)

This letter transmits revisions to the *Personal Care Manual* in Subchapter 6 of the service codes and descriptions.

Service Code 99054 has been deleted from the 2006 Current Procedural Terminology (CPT) manual. This code is being replaced with the following HCPCS service code and modifier to maintain HIPAA compliance:

T1019TV 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 (Code may not be used to identify services provided by home health aide or certified nurse assistant.), special payment rate, holidays (P.A.)

These changes take effect for prior authorization (PA) requests for PCA services that are received by MassHealth on or after December 1, 2006. Personal care management agencies may begin to request prior authorization for PCA services using this new holiday code upon receipt of this transmittal letter, but **must** include the new holiday code and modifier on any PA MassHealth receives on or after December 1, 2006.

MassHealth will process claims for either the new (T1019 TV) code and modifier or the old (99054) code for dates of service through November 30, 2007. For dates of service on or after December 1, 2007, fiscal intermediaries must use only the new code for reimbursement of PCA holiday time.

If you have any questions about the information in this transmittal letter please contact MassHealth Customer Service at 1-800-841-2900, e-mail your inquiry to providersupport@mahealth.net, or fax your inquiry to 617-988-8974.

NEW MATERIAL

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

Personal Care Manual

Pages 6-1 and 6-2

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Personal Care Manual

Pages 6-1 and 6-2 — transmitted by Transmittal Letter PCA-14

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601 Service Codes and Descriptions

Service

Code Modifier Service Description

Personal Care Management (PCM) Services

- 99456 Work related or medical disability examination by other than the treating physician that includes:
- completion of a medical history commensurate with the patient’s condition;
 - performance of an examination commensurate with the patient’s condition;
 - formulation of a diagnosis, assessment of capabilities and stability, and calculation of impairment;
 - development of future medical treatment plan; and
 - completion of necessary documentation/certificates and report.
(Use this code when billing for initial evaluation of a member to determine the need and extent of the need for personal care services.) (per evaluation)
- 99456 TS Work related or medical disability examination by other than the treating physician that includes:
- completion of a medical history commensurate with the patient’s condition;
 - performance of an examination commensurate with the patient’s condition;
 - formulation of a diagnosis, assessment of capabilities and stability, and calculation of impairment;
 - development of future medical treatment plan; and
 - completion of necessary documentation/certificates and report.
(follow-up service) (Use this code and modifier when billing for reevaluation of a member to determine the need and extent of the need for personal care services.) (per evaluation)
- T2022 Case management, per month (current PA for PCA services required for each member) (Use this code to bill for functional skills training.) (per member per month)
- T1023 Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project, or treatment protocol, per encounter (Use this code to bill a single per member per month charge for intake and orientation services provided to a member who does not yet have a PA for PCA services.) (maximum 3 consecutive months)

Fiscal Intermediary (FI) Services

- 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 (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 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 (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.)

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601 Service Codes and Descriptions (cont.)

Service

Code Modifier Service Description

T1019TV 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 (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.)**

T1020 Personal care services, per diem, not for an inpatient or resident of a hospital, nursing facility, ICF/MR 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.) (Use to bill for fiscal intermediary administrative charge; 1 unit per diem.) (Current P.A. for PCA services required for each member.)

Transitional Living Services

T1020 U1 Personal care services, per diem, not for an inpatient or resident of a hospital, nursing facility, ICF/MR 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.) (Medicaid level of care 1) (P.A.) (Use this code and modifier to bill for transitional living services.)

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