




**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
[www.mass.gov/masshealth](http://www.mass.gov/masshealth)



MassHealth  
Transmittal Letter PCA-20  
February 2016

**TO:** Personal Care Agencies Participating in MassHealth

**FROM:** Daniel Tsai, Assistant Secretary for MassHealth 

**RE:** *Personal Care Manual* (Revised Subchapter 6)

This letter transmits revisions to the service code descriptions in the *Personal Care Manual*. The revised Subchapter 6 is effective for dates of service noted below.

The following new service code descriptions are effective on or after July 1, 2015.

- 99509 U1** 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** 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.)

The following new service codes are effective on or after January 1, 2016.

- 99509 TU** Home visit for assistance with activities of daily living and personal care, special payment rate, overtime. (Use this code and modifier to bill for overtime, per 1 minute. (Current P.A. for PCA services required for each member.)
- A0170** Transportation ancillary: parking fees, tolls, other. (Use this code to bill for same-day travel time for PCA services, per 1 minute). (Current P.A. for PCA services required for each member.)

Providers may consult the Centers for Medicare & Medicaid Services (CMS) website at [www.cms.gov](http://www.cms.gov) for a full description of the service codes.

### MassHealth Website

This transmittal letter and attached pages are available on the MassHealth website at [www.mass.gov/masshealth](http://www.mass.gov/masshealth).

### Questions

If you have any questions about this transmittal letter, please contact the MassHealth Customer Service Center at 1-800-841-2900, e-mail your inquiry to [providersupport@mahealth.net](mailto: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 vi, vii, 6-1, and 6-2

OBSOLETE MATERIAL

(The pages listed here are no longer in effect.)

Personal Care Manual

Page vi – transmitted by Transmittal Letter PCA–12

Page vii – transmitted by Transmittal Letter PCA–15

Pages 6-1 and 6-2 – transmitted by Transmittal Letter PCA–1

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The regulations and instructions governing provider participation in MassHealth are published in the Provider Manual Series. MassHealth publishes a separate manual for each provider type.

Manuals in the series contain administrative regulations, billing regulations, program regulations, service codes, administrative and billing instructions, and general information. MassHealth regulations are incorporated into the Code of Massachusetts Regulations (CMR), a collection of regulations promulgated by state agencies within the Commonwealth and by the Secretary of State. MassHealth regulations are assigned Title 130 of the Code. Pages that contain regulatory material have a CMR chapter number in the banner beneath the subchapter number and title.

Administrative regulations and billing regulations apply to all providers and are contained in 130 CMR Chapter 450.000. These regulations are reproduced as Subchapters 1, 2, and 3 in this and all other manuals.

Program regulations cover matters that apply specifically to the type of provider for which the manual was prepared. For personal care providers, those matters are covered in 130 CMR Chapter 422.000, reproduced as Subchapter 4 in the *Personal Care Manual*.

Revisions and additions to the manual are made as needed by means of transmittal letters, which furnish instructions for substituting, adding, or removing pages. Some transmittal letters will be directed to all providers; others will be addressed to providers in specific provider types. In this way, a provider will receive all those transmittal letters that affect its manual, but no others.

The Provider Manual Series is intended for the convenience of providers. Neither this nor any other manual can or should contain every federal and state law and regulation that might affect a provider's participation in MassHealth. The provider manuals represent instead MassHealth's effort to give each provider a single convenient source for the essential information providers need in their routine interaction with MassHealth and its members.

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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 three 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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- 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/weekends (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.)
- 99509      TU      Home visit for assistance with activities of daily living and personal care. (Use this code and modifier to bill for overtime, per 1 minute, special payment rate). (Current P.A. for PCA services **required** for each member.)
- 99509      U1      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      Home visit for assistance with activities of daily living and personal care. (Personal Care Services.) (Use to bill for PCA new hire orientation, per diem, per eligible PCA.)
- A0170      Transportation ancillary: parking fees, tolls, other  
 (Use this code to bill for same-day travel time for PCA services, per 1 minute).  
 (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.)