

NETWORK DEVELOPMENT & ADMINISTRATION

HOME HEALTH RECOMMENDED CODES

SERVICE	REV CODE	CPT or HCPCS CODE	ACTUAL CODE DESCRIPTION	CONTRACT INTENT	ND&A COMMENTS
RN Evaluation	551	T1001	Nursing assessment/Evaluation	To identify evaluation service performed by an RN.	
RN Follow Up Visit	551	T1030	Nursing Care, in the home, by Registered Nurse, Per Diem	To identify any follow up visit, including Specialty services, unless there is a separate RN Specialty service identified in the contract.	
RN Specialty	559	T1002	RN service, up to 15 minutes	This HCPCS code is used as coding criteria to identify the RN Specialty services.	The coding description, "time description of up to 15 minutes", <u>should be ignored</u> and the contract intent overrides this description. The intent is to use this code as criteria that represent the contracted service and payment description per contract.
RN per Hour	552	S9123	Nursing Care, in the home, by Registered Nurse, Per Hour		
LVN per Visit	551	T1031	Nursing Care, in the home, by Licensed Practical Nurse, Per Diem	To identify LVN service that was intended to be paid at a Per Visit rate.	
LVN per Hour	552	S9124	Nursing Care, in the home, by Licensed Practical Nurse, Per Hour	To identify LVN service that was intended to be paid at a Per Hour rate.	
PT Evaluation	424	97163	Physical Therapy evaluation: high complexity, 45 min	This CPT code is used as coding criteria to identify PT Evaluation service only.	To eliminate confusion on multiple options, ND&A has chosen only one code to represent the PT Evaluation. The coding description, "time description of up to 45 minutes", <u>should be ignored</u> and the contract intent overrides this description. The intent is to use this code as criteria that represent the contracted service and payment description per contract
PT Re-evaluation	424	97164	Re-evaluation of physical therapy established plan of care		This code is used to identify the Re-evaluation service and <u>not intended to represent any follow up services</u> . If the contract does not have contracted Re-evaluation service and if this service is needed, CM should be notified of the request to avoid any confusion.
PT per Visit	421	S9131	Physical Therapy, in the home, Per Diem		This HCPCS code is used as coding criteria to identify Follow Up services if there is a separate PT Evaluation service in the contract. Otherwise, this code represent any PT services in general in the absence of specific PT services (Evaluation, Re-evaluation Follow Up, etc>)
PTA	421/429	G0157	Services performed by qualified PTA in home health or hospice setting, each 15 minutes (4 units = 1 hour)	This HCPCS code is used as coding criteria to identify PTA services.	For Billing and Claims payment purposes ONLY , the coding description, "time description of up to 15 minutes", <u>should be ignored</u> and the contract intent overrides this description. The intent is to use this code as criteria that represent the contracted service and payment description per contract to avoid underpayment or overpayment based on billed units.
OT Evaluation	434	97167	Occupational Therapy evaluation, high complexity, 60 min		
OT Re-evaluation	434	97168	Re-evaluation of occupational therapy established plan of care		This code is used to identify the Re-evaluation service and <u>not intended to represent any follow up services</u> . If the contract does not have contracted Re-evaluation service and if this service is needed, CM should be notified of the request to avoid any confusion.
OT per Visit	431	S9129	Occupational Therapy, in the home, Per Diem		
COTA	431	G0158	Services performed by qualified Occupational Therapist Assistant in home health or hospice setting, each 15 minutes (4 units = 1 hour)		
ST Evaluation	444	92521	Evaluation of speech fluency (eg: stuttering, cluttering)		
		92522	Evaluation of speech sound production (eg: articulation, phonological process, apraxia, dysarthria)		
		92523	Evaluation of speech sound production (eg: articulation, phonological process, apraxia, dysarthria) with evaluation of language comprehension and expression		
ST per Visit	441	S9128	Speech Therapy, in the home, Per Diem		
MSW per visit	561	S9127	Social Work visit, in the home, Per Diem		
MSW Evaluation	569	G0155	Services of clinical social worker in home health or hospice settings, each 15 minutes (4 units = 1 hour)		
HHA per visit	571	T1021	Home Health Aide or Certified Nurse Assistant, per visit		
Sitter	580	S5136	Companion Care Adult, Per Diem		
Nursing Assistant (CNA)	581	T1021	Home Health Aide or Certified Nurse Assistant, per visit		
WOCN	582	S9097	Home Visit Wound Care		
HHA per Hour	572	S9122	Home Health Aide or Certified Nurse Assistant, providing care in the home, per hour		
Nursing Assistant per Hou	582	S9122	Home Health Aide or Certified Nurse Assistant, providing care in the home, per hour		
Dietitian	589	S9470	Nutrition Counseling Dietitian visit		
Homemaker	581	S5131	Homemaker Service, NOS, Per Diem		

REMINDER:

*The above listed codes are recommendation codes for Contracts with non-codified services or for hard-coded contracts that may have codes replaced or terminated.

**In the event that these Home Health Recommended Codes may be replaced or terminated, the list will be updated/ revised as needed. 10/2022

NETWORK DEVELOPMENT & ADMINISTRATION

SHIFT CARE RECOMMENDED CODES - Age under 21 Y/O Effective 01.01.2019

OLD HCPCS CODE	NEW HCPCS CODE	ACTUAL CODE DESCRIPTION	ND&A COMMENTS
Z5836	G0162	RN (only) for management and evaluation of POC	MEDI-CAL ONLY , Rev code 551
Z5832	G0299	Direct skilled services of a licensed nurse (RN)	MEDI-CAL ONLY , Rev code 551
Z5834	G0300	Direct skilled services of a licensed nurse (LPN)	MEDI-CAL ONLY , Rev code 551

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RN Specialty	559	T1002	RN service, up to 15 minutes
RN per Hour	552	S9123	Nursing Care, in the home, by Registered Nurse, Per Hour
LVN per Visit	551	T1031	Nursing Care, in the home, by Licensed Practical Nurse, Per Diem
LVN per Hour	552	S9124	Nursing Care, in the home, by Licensed Practical Nurse, Per Hour
PT Evaluation	424	97163	Physical Therapy evaluation: high complexity, 45 min
PT Re-evaluation	424	97164	Re-evaluation of physical therapy established plan of care
PT per Visit	421	S9131	Physical Therapy, in the home, Per Diem
PTA	429	G0157	Services performed by qualified PTA in home health or hospice setting, each 15 minutes (4 units = 1 hour)
OT Evaluation	434	97167	Occupational Therapy evaluation, high complexity, 60 min
OT Re-evaluation	434	97168	Re-evaluation of occupational therapy established plan of care
OT per Visit	431	S9129	Occupational Therapy, in the home, Per Diem
COTA	431	G0158	Services performed by qualified Occupational Therapist Assistant in home health or hospice setting, each 15 minutes (4 units = 1 hour)
ST Evaluation	444	92521	Evaluation of speech fluency (eg: stuttering, cluttering)
		92522	Evaluation of speech sound production (eg: articulation, phonological process, apraxia, dysarthria)
		92523	Evaluation of speech sound production (eg: articulation, phonological process, apraxia, dysarthria) with evaluation of language comprehension and expression
		92524	Behavioral and qualitative analysis of voice and resonance
ST per Visit	441	S9128	Speech Therapy, in the home, Per Diem
MSW per visit	561	S9127	Social Work visit, in the home, Per Diem
MSW Evaluation	569	G0155	Services of clinical social worker in home health or hospice settings, each 15 minutes (4 units = 1 hour)
HHA per visit	571	T1021	Home Health Aide or Certified Nurse Assistant, per visit
Sitter	580	S5136	Companion Care Adult, Per Diem
Nursing Assistant (CN A)	581	T1021	Home Health Aide or Certified Nurse Assistant, per visit
WOCN	582	S9097	Home Visit Wound Care
HHA per Hour	572	S9122	Home Health Aide or Certified Nurse Assistant, providing care in the home, per hour
Nursing Assistant per Hour	582	S9122	Home Health Aide or Certified Nurse Assistant, providing care in the home, per hour
Dietitian	589	S9470	Nutrition Counseling Dietitian visit
Homemaker	581	S5131	Homemaker Service, NOS, Per Diem

NEW HCPCS CODE	ACTUAL CODE DESCRIPTION
G0162	RN (only) for management and evaluation of POC
G0299	Direct skilled services of a licensed nurse (RN)
G0300	Direct skilled services of a licensed nurse (LPN)

HCPCS Codes for Hospice Services	HCPCS Codes	DESCRIPTION
	S9125**	Respite Care, in the home, Per Diem
	S9126**	Hospice Care, in the home, Per Diem
	T2042*	Hospice Routine Home Care; Per Diem
	T2043*	Hospice Coutinuous Home Care; Per Hour
	T2044*	Hospice Inpatient Respite Care; Per Diem
	T2045*	Hospice General Inpatient Care; Per diem
	T2046*	Hospice Long Term Care, Room and Board only; Per Diem

NOTES:

*HCPCS National Codes established for State Medicaid Agencies

** HCPCS Temporary National Codes (Non-Medicare)