



CHOICESM
Health Plans

The purpose of this guide is to assist providers in understanding and complying with VNSNY CHOICE's billing requirements for Licensed Home Care Services Agencies (LHCSA) and Consumer Directed Personal Assistance Program (CDPAP).

This guide is applicable if you choose to submit claims to VNSNY CHOICE directly, if you choose to participate with HHAX please refer to your HHAX Portal and training materials located here <https://hhaexchange.com/vnsny/>.

MLTC/ MAP / FIDA Billing Tips

- Prior Authorization is required for all Services covered by MLTC, all long term care benefits require Prior Authorization for MAP and FIDA.
- Please bill services that match the authorization.
- Unless otherwise described by your VNSNY CHOICE provider contract. VNSNY CHOICE will require submission on Form CMS1450 (**UB-04**) Institutional for all PCA/HHA Claims. **837(I)** for electronic billing.
- As of 4/1/2018 VNSNY CHOICE Is compliant with Universal Billing Code guidance as outlined by New York State and The Department of Health, please refer to [DOH website](#) for additional details.
- If you choose to submit claims to VNSNY CHOICE directly, electronic billing is preferred, will facilitate payment, and will allow you to track your claims online.
 - Our clearinghouse is **Change Healthcare**.
 - VNSNY CHOICE Payer ID Number is **77073**
 - For step-by-step instructions on how to sign up for electronic claim submissions with Change Healthcare, please click on this link for the [Enrollment Guide](#).
 - Enroll <https://www.changehealthcare.com/support/customer-resources/enrollment-services>
- Otherwise paper claims can be mailed to
 - **MLTC and Medicare Claims** PO Box 4498 ,Scranton,PA 08505
 - **FIDA Claims** PO Box 3715 ,Scranton,PA 08505
- It is important to be aware of the unit of measure when billing, for example **T1019 U1** has a unit of measure of "Per 15 minutes" one hour of service is 4 billed units. S5126 A "Per diem" code is one billed unit per day.
- Revenue Code is required for UB04 Billing, take care to apply a Revenue code family that is appropriate to the procedure code description. Note that **Personal Care Assistance (PCS)** Procedure codes may **not** be used to identify services provided by **Home Health Aide (HHA)** or **Certified Nurse Assistant**.

- Bill Type (i.e. **032X** - Home Health Services under a Plan of Treatment) for PCSA/HHA Claims
 - Examples:
 - 0321 – Admit through discharge
 - 0327 – Corrected Claim
- Revenue Code **058X Family** for PCA/CDPAP codes
 - **058X** - Home Health Other Visits
 - **0580** - General
 - **0581** - Visit charge
 - **0582** - Hourly charge
 - **0583** - Assessment
 - **0589** - Other
- Revenue Code **057X Family** for HHA codes
 - **057X** - Home Health Aide
 - **0580** - General
 - **0581** - Visit charge
 - **0582** - Hourly charge
 - **0583** - Assessment
 - **0589** - Other
- Please match the appropriate revenue code frequency to the procedure code frequency.
 - Example:
 - **S9122** = **Hourly** Procedure Code & **0572** = **Hourly** Revenue Code
- Please see link for [CMS Revenue Code Guidance](#)
- If you have any further questions please Reach out to the Provider Call Center at **1-866-783-0222**
- Or visit the VNSNY CHOICE Provider Website at <https://www.vnsnychoice.org/health-professionals> for additional Reference materials.

Attachment A

Examples of Procedure code / Revenue Code Billing combinations			
Procedure Code	Revenue Code	Bill Type	Comment
T1019U1 - PCS Level II Basic – 15 Minutes - Per 15 minutes	0580 - Home Health Other Visits - General	0321 - Home Health Services under a Plan of Treatment	Example of PCA Submission
T1020U6 - CDPA Live in - Per diem (13 hours)	0581 - Home Health Other Visits - Visit charge	0327 - Home Health Services under a Plan of Treatment	Example Of corrected claim for Live In CDPAP
S9122 – HHA - Per hour	0572 - Home Health Aide - Hourly charge	0321 - Home Health Services under a Plan of Treatment	Example of HHA Submission

Attachment B

HOME CARE BILLING CODES AND MODIFIERS

Service Type	Unit of Measurement	Procedure Code	Procedure Code Description	Modifier	Special Note
Personal Care Aide Level I (Homemaker/Housekeeper) - Rev Code Family 058X					
PCS Level I – 15 Minutes	Per 15 minutes	S5130	Homemaker service, NOS; per 15 minutes	U1	
PCS Level I Two Client	Per 15 minutes	S5130	Homemaker service, NOS; per 15 minutes	U2	
Personal Care Aide Level II - Rev Code Family 058X					
PCS Level II Basic – 15 Minutes	Per 15 minutes	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)	U1	
PCS Level II Basic Two Client	Per 15 minutes	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)	U2	
PCS Level II Live in	Per diem {13 hours)	T1020*	Personal care services, per diem, not for an inpatient or resident of a hospital, nursing facility, JCF/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)	NONE	
PCS Level II Live in Two Client	Per diem {13 hours)	T1020*	Personal care services, per diem, not for an inpatient or resident of a hospital, nursing facility, JCF/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}	U2	
*T1020 Per diem rate code may not be used if a personal care aide or personal assistant is not able to meet the sleep requirements required in Fair Labor Standards Act (FLSA).					
Consumer Directed Personal Assistant - Rev Code Family 058X					
CDPA Basic – 15 Minutes	Per 15 minutes	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)	U6	
CDPA Two Consumer	Per 15 minutes	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	U7	

Service Type	Unit of Measurement	Procedure Code	Procedure Code Description	Modifier	Special Note
			treatment (code may not be used to identify services provided by home health aide or certified nurse assistant)		
CDPA Live in	Per diem (13 hours)	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)	U6	
CDPA Live in Two Consumer	Per diem (13 hours)	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)	U7	
*T1020 Per diem rate code may not be used if a personal care aide or personal assistant is not able to meet the sleep requirements required in Fair Labor Standards Act (FLSA).					
Home Health Aide - Rev Code Family 057X					
HHA – 15 minutes	Per 15 minutes	S5125	Attendant care services; per 15 minutes	NONE	
HHA	Per hour	S9122	Home health aide or certified nurse assistant, providing care in the home; per hour	NONE	
HHA Two Client	Per 15 minutes	S5125	Attendant care services; per 15 minutes	U2	
HHA – Live in	Per diem (13 hours)	S5126	Attendant care services; per diem	NONE	
HHA Live in Two Client	Per diem (13 hours)	S5126	Attendant care services; per diem	U2	