



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

## INFORMATIONAL LETTER NO.1765-MC-FFS

**DATE:** February 14, 2017

**TO:** Iowa Medicaid Home Health Agencies and Home- and Community-Based Services (HCBS) Waiver Service Providers

**APPLIES TO:** Managed Care (MC) and Fee for Service (FFS)

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** Billing Nursing and Home Health Aide (HHA) Services by Medicare Certified Home Health Agencies

**EFFECTIVE:** Immediately

**\*\*\*This letter replaces Informational Letter No. 1763-MC-FFS issued February 7, 2017\*\*\***

There are three Medicaid programs through which a home health agency may bill for two basic services; Nursing and HHA. The service definition for these two basic home health agency services may vary slightly among the three programs, Home Health Services (HHS), Private Duty Nursing and Personal Cares or HCBS Waiver as described in the charts below.

**Important Note:** Regardless of the funding program through which any Nursing or HHA service is provided to any Medicaid member, the service(s) must be included in a physician-approved and comprehensive plan of care/care plan/service plan prior to the service delivery.

### HOME HEALTH SERVICES (HHS) PROGRAM:

- The HHS program is a Medicaid State Plan benefit for IA Health Link and FFS members.
- The maximum units allowed of Skilled Nursing and HHA services covered under the HHS program must be evaluated first as necessary to meet each Medicaid member's needs before any other home health agency programs are accessed.
- Skilled Nursing and HHA services covered under the HHS program **do not require** prior authorization for FFS members. An Iowa Health Link MCO **may** require prior authorization for its members. Guidelines on prior authorization for MCOs can be found on the MCO websites.
- A Medicaid member receiving Skilled Nursing for Home Health Agency Care for Maternity Patients and Children may not receive the maximum five skilled nursing visits weekly. (Line one service in the chart below): and or Skilled Nursing for Wound Care or Insulin (Line three service in the chart below).
- Reimbursement for HHS (listed below) is based on an approved Low Utilization Payment Adjustment (LUPA) fee schedule.

SERVICE	UNIT	BILLING CODE	MAXIMUM UNITS
Skilled Nursing	Visit	Rev. Code 551	Five visits per week
Skilled Nursing for Home Health Agency Care for Maternity Patients and Children	Visit	Rev. Code 551	According to the frequency of visits approved in the plan of care
Skilled Nursing (For Wound care or Insulin injections ONLY)	Visit	Rev. Code 551	Daily or multiple daily visits according to the approved plan of care
Home Health Aide	Visit	Rev. Code 571	The number of visits multiplied by the hours per visit cannot exceed 28 hours per week.

**PRIVATE DUTY NURSING (PDN) AND PERSONAL CARES (PC) SERVICES  
EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT (EPSDT) Care for Kids program:**

- The PDN and PC services under the EPSDT Care for Kids program cover:
  - Children through the age of 21; **and**
  - Whose medical needs **exceed the maximum units** covered through the Skilled Nursing and HHA services through the HHS program (listed in the table above).
- The PDN and PC services are **not** HCBS Waiver services.
- The maximum units of PDN and PC services must be used prior to accessing any HCBS Waiver Skilled Nursing or HHA services.
- The PDN and PC services **require** prior authorization for FFS. An MCO may require prior authorization for its members.
- Reimbursement for PDN and PC services (listed below) is based on a cost settlement methodology for FFS providers. Rate floors for these two services are established for MCO providers.

SERVICE	BILLING UNIT	BILLING CODES	MAXIMUM UNITS
PDN Private duty independent nursing services provided by a registered nurse (RN) or licensed practical nurse (LPN)	15 min	T1000 Rev. Code 559	The combined total of PDN and PC services cannot exceed 16 hours per day.
PC Personal cares provided by a HHA or a certified nurse assistant (CNA)	Hour	S9122 Rev. Code 572	The combined total of PDN and PC services cannot exceed 16 hours per day. This code can also be used for required supervisory visits if included in a physician-approved plan of care.

**HCBS WAIVER PROGRAM:**

- Nursing and HHA services covered under the HCBS Waiver program are covered through the AIDS/HIV, Elderly, Health and Disability, and the Intellectual Disability (ID) Waivers only.
- Nursing and HHA services covered through the FFS HCBS program in the AIDS/HIV, Elderly, Health and Disability and the ID Waivers do not require prior authorization. An Iowa Health Link MCO **may** require prior authorization for its members. Guidelines on prior authorization for MCOs can be found on the MCO websites.
- The maximums of Nursing and HHA services included in the HHS program; or PDN and PC through the EPSDT Care for Kids program must be utilized before accessing Nursing and HHA included in the HCBS Waiver programs.
- HCBS services (listed below) are based on a fee schedule.

SERVICE	BILLING UNIT	BILLING CODE	MAXIMUM UNITS
Skilled Nursing (RN) (AIDS, EW & H&D)	Visit	T1030	As medically necessary and within the monthly cap for each of the three waivers.
Skilled Nursing (LPN) (AIDS, EW & H&D)	Visit	T1031	As medically necessary and within the monthly cap for each of the three waivers.
Home Health Aide (AIDS, EW & H&D)	Visit	T1021	As medically necessary and within the monthly cap for each of the three waivers.
Skilled Nursing (RN) (ID Waiver)	Hour	S9123	10 hours per week
Skilled Nursing (LPN) (ID Waiver)	Hour	S9124	10 hours per week
Home Health Aide (ID Waiver)	Hour	S9122	14 hours per week

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909 or email at [IMEproviderservices@dhs.state.ia.us](mailto:IMEproviderservices@dhs.state.ia.us).