PROVIDER BULLETIN

Provider information



October 8, 2013

Change in PCA billing requirements

Blue Plus contracts with Personal Care Assistance (PCA) providers as part of our Government Programs Specialty Network. Blue Plus and participating providers are required to abide by the Minnesota Department of Human Services (DHS) requirements.

Effective for dates of service August 1, 2013, and after, DHS is no longer accepting the U1 or UD procedure modifier when billing for PCA services. In compliance with DHS requirements, Blue Plus is following the billing guidelines as published in the DHS Minnesota Health Care Programs Manual Chapter 24 - PCA Services. Due to the DHS requirements, claims received for dates of service August 1, 2013, and after that include the U1 or UD procedure modifier will be denied. Below are valid PCA codes to use for claim submission.

PCA code or	Code narrative	Procedure modifier
code/modifier		instructions
combination		
T1019	Personal care services, per 15 minutes, not for an inpatient or	1:1 ratio (one assistant to one
	resident of a hospital, nursing facility, ICF/MR or IMD, part of	patient).
	the individualized plan of treatment (code may not be used to	
	identify services provided by home health aide or certified nurse	
	assistant).	
T1019-TT	Personal care services, per 15 minutes, not for an inpatient or	The –TT modifier is submitted
	resident of a hospital, nursing facility, ICF/MR or IMD, part of	to indicate personal care
	the individualized plan of care treatment (code may not be used	assistant PCPO services at a
	to identify services provided by home health aide or certified	1:2 ratio (one assistant to two
	nursing assistant).	patients).
T1019-HQ	Personal care services, per 15 minutes, not for an inpatient or	The –HQ modifier is
	resident of a hospital, nursing facility, ICF/MR or IMD, part of	submitted to indicate personal
	the individualized plan of care treatment (code may not be used	care assistant PCPO services
	to identify services provided by home health aide or certified	at a 1:3 ratio (one assistant to
	nursing assistant).	three patients).
T1019-U6	Personal care services, per 15 minutes, not for an inpatient or	The –U6 modifier is submitted
	resident of a hospital, nursing facility, ICF/MR or IMD, part of	to indicate the service is for a
	the individualized plan of care treatment (code may not be used	PCA temporary 45-day
	to identify services provided by home health aide or certified	increase.
	nursing assistant).	
T1019-UA	Supervision of PCA services by a QP, per 15 minutes.	The –UA modifier is submitted
		to indicate the services are for
		supervision of a PCA.

Distribution: All participating PCA providers in Network 069

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Coding requirements reminder

All coding and reimbursement is subject to changes, updates or other requirements of coding rules and guidelines. All codes are subject to federal HIPAA rules, and in the case of medical code sets (for example, HCPCS, CPT, ICD-9-CM), only valid codes for the date of service may be submitted or accepted.

DHS website

Below is a link to the DHS website:

http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_137828

Questions?

If you have questions, please contact provider services at (651) 662-5200 or toll free at 1-800-262-0820.