

Quick Points



October 17, 2011

Change in PCA billing requirements

Blue Plus contracts with Personal Care Agency (PCA) providers as part of our Government Programs Specialty Network.

Effective for dates of service October 1, 2011, and after, all PCA claim lines except for QP supervision must include at least one of the relationship modifiers on each line (UD or U1). All other HCPCS code and modifier combinations still apply to PCA claims. Multiple modifiers can be submitted on one line to further identify services provided. Claims that do not include an appropriate modifier will be denied. These claims may be reconsidered when the appropriate modifier is provided to Blue Cross and Blue Shield of Minnesota, however, in order to be as efficient as possible, please make every effort to submit the claims accurately and completely during the initial submission.

PCA code or code/modifier combination	Code narrative	Modifier instructions
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.
T1019-UD	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 care treatment No relationship to the member.	1:1 ratio
T1019-U1	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 care treatment Parent/Adoptive Parent, Sibling, Adult Child, Grandparent or Grandchild of the member.	1:1 ratio
T1019-TT	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 care treatment (code may not be used to identify services provided by home health aide or certified nursing assistant)	The –TT modifier is submitted to indicate personal care assistant PCPO services at a 1:2 ratio (one assistant to two patients).
T1019-HQ	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 care treatment (code may not be used to identify services provided by home health aide or certified nursing assistant)	The –HQ modifier is submitted to indicate personal care assistant PCPO services at a 1:3 ratio (one assistant to three patients).
T1019-U6	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 care treatment (code may not be used to identify services provided by home health aide or certified nursing assistant)	PCA temporary 45-day increase

Distribution: Due to the importance of this information this Quick Points is being mailed to participating PCA providers
QP16-11

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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.

Questions?

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