

COMMERCIAL REIMBURSEMENT POLICY

Skilled Nursing Services in the Home

Active

Section: General Coding
Policy Number: 80
Effective Date: 03/01/24

Description

This policy addresses the coding and reimbursement of skilled nursing services provided in a patient's home. These services are reported on an institutional electronic claim format (837I).

Policy Statement

Skilled nursing services in the home are provided by a Registered Nurse (RN) or a Licensed Practical Nurse (LPN) working under the supervision of an RN. Services include, but are not limited to, managing the patient's medical conditions, preventing complications, and teaching the patient and/or patient's family or caregiver(s) how to manage the patient's treatment regimen.

Blue Cross and Blue Shield of Minnesota (Blue Cross) recommends use of the following "T" codes to bill for skilled nursing services in the home:

Intermittent Skilled Nursing Services (T1030, T1031)

Blue Cross considers intermittent skilled nursing services in the home, reported with HCPCS codes T1030 or T1031, to include up to 2 consecutive hours of skilled nursing services per date of service.

Extended Hours Skilled Nursing Services (also known as private duty nursing) (T1002, T1003)

Skilled nursing services in the home greater than 2 hours per date of service may be necessary in limited situations. Examples include:

- Transition of a member from an inpatient setting to home; or
- When a member experiences an acute change in condition and additional skilled nursing care will prevent a hospital admission; or
- When transition to a skilled nursing facility (SNF) is indicated, but no SNF bed is available.

The frequency of the nursing tasks is continuous and temporary in nature and is not intended to be provided on a permanent, ongoing basis. When extended hours skilled nursing services are provided, charges for the additional time should be submitted with the following HCPCS codes and modifiers as appropriate:

T1002, T1002-TG, T1002-TT, T1003, T1003-TG, T1003-TT

Per Hour Nursing Services (S9123 and S9124)



Per hour home care nursing codes S9123 and S9124 will be accepted, however, they will only be reimbursed up to 1 unit per day.

NOTE: This policy does not apply to FEP.

Documentation Submission

Documentation must identify and describe the services performed. If a denial is appealed, this documentation must be submitted with the appeal.

Coverage

Eligible services will be subject to the subscriber benefits, applicable fee schedule amount and any coding edits.

The following applies to all claim submissions.

All coding and reimbursement is subject to all terms of the Provider Service Agreement and 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 (HCPCS, CPT, ICD), only codes valid for the date of service may be submitted or accepted. Reimbursement for all Health Services is subject to current Blue Cross Medical Policy criteria, policies found in the Provider Policy and Procedure Manual sections, Reimbursement Policies and all other provisions of the Provider Service Agreement (Agreement).

In the event that any new codes are developed during the course of Provider's Agreement, such new codes will be paid according to the standard or applicable Blue Cross fee schedule until such time as a new agreement is reached and supersedes the Provider's current Agreement.

All payment for codes based on Relative Value Units (RVU) will include a site of service differential and will be calculated using the appropriate facility or non-facility components, based on the site of service identified, as submitted by Provider.

Coding

The following codes are included below for informational purposes only and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply subscriber coverage or provider reimbursement.

CPT/HCPCS Modifier:	TG	TT				
ICD-10 Diagnosis:	N/A					
ICD-10 Procedure:	N/A					
CPT/HCPCS:	S9123	S9124	T1002	T1003	T1030	T1031
Revenue Codes:	N/A					

Resources

Current Procedural Terminology (CPT®)
Healthcare Common Procedure Coding System (HCPCS)



Policy History

02/28/2023	Initial Committee Approval
08/22/2023	Revised
02/27/2024	Annual Policy Review

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