

LOUISIANA MEDICAID HOME HEALTH REVENUE AND PROCEDURE CODES

REV Code Options ***	Standard Code	Description
550 551 580 581	G0299*	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
550 551 580 581	G0299* plus Modifier of U2^	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
550 551 580 581	G0299* plus Modifier of U3^	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
550 551 580 581	G0299 * plus Modifier of TT~	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit. Per LA Medicaid guidelines, one (1) unit equals one (1) visit regardless of the length of time the visit takes. Note#2: TD modifier must be appended first.
550 551 580 581	G0299* plus Modifier of TT and U2^	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
550 551 580 581	G0299 * plus Modifier of TT and U3^	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
550 551 580 581	G0300*	Direct skilled nursing services of a licensed practical nurse (LPN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
550 551 580 581	G0300* plus Modifier of U2^	Direct skilled nursing services of a licensed practical nurse (LPN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.

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REV Code Options ***	Standard Code	Description
550 551 580 581	G0300 * plus Modifier of U3^	Direct skilled nursing services of a licensed practical nurse (LPN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
550 551 580 581	G0300* plus Modifier of TT~	Direct skilled nursing services of a licensed practical nurse (LPN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
550 551 580 581	G0300* plus Modifier of TT and U2^	Direct skilled nursing services of a licensed practical nurse (LPN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
550 551 580 581	G0300* plus Modifier of TT and U3^	Direct skilled nursing services of a licensed practical nurse (LPN) in the home health or hospice setting, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
570 571	G0156*	Services of home health aide/hospice aide in home health or hospice settings, each 15 minutes. Note: CMS HCPCS description indicates 15 min. is equal to one (1) unit.
552 582	S9123* S9124*	Nursing care, in the home by registered nurse, per hour (Only code to be used when reporting extended hours) Nursing care, in the home by licensed practical nurse, per hour (Only code to be used when reporting extended hours.)
552	S9123* plus Modifier of TG	Nursing care, in the home by registered nurse, per hour (Only code to be used when reporting extended hours)
552 582	S9123* plus Modifier of TN S9124* Plus Modifier of TN	Nursing care, in the home; by registered nurse, per hour (Only code to be used when reporting extended hours) Nursing care, in the home by licensed practical nurse, per hour (Only code to be used when reporting extended hours)

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REV Code Options ***	Standard Code	Description
552	S9123* plus Modifier of TT	Nursing care, in the home by registered nurse, per hour (Only code to be used when reporting extended hours for multiple recipients in the same home)
582	S9124* plus Modifier of TT	Nursing care, in the home by licensed practical nurse, per hour (Only code to be used when reporting extended hours for multiple recipients in the same home)
552	S9123* plus Modifier of TV	Nursing care, in the home by registered nurse, per hour (Only code to be used when reporting extended hours)
582	S9124* Plus Modifier of TV	Nursing care, in the home by licensed practical nurse, per hour (Only code to be used when reporting extended hours)
552	S9123* plus Modifier of UH	Nursing care, in the home by registered nurse, per hour (Only code to be used when reporting extended hours)
582	S9124* plus Modifier of UH	Nursing care, in the home by licensed practical nurse, per hour. (Only code to be used when reporting extended hours)
552	S9123* plus Modifier of UJ	Nursing care, in the home by registered nurse, per hour (Only code to be used when reporting extended hours)
582	S9124* plus Modifier of UJ	Nursing care, in the home by licensed practical nurse, per hour (Only code to be used when reporting extended hours)

Valid Home Health Procedure Modifiers for Nurse and Aide Services:

- TG = High Complexity
- TN = Rural, Outside Area
- TT = Multiple Recipients
- TV = Holiday/Weekend
- U2 = 2nd (second) Daily Visit
- U3 = 3rd (third) Daily Visit

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UH = Evening

U J = Night

* Requires Prior Authorization

** Prior Authorization is only required for more than one service per day.

*** When multiple revenue codes are listed, please choose the most appropriate revenue code from the options listed.

HOME HEALTH REHABILITATION

REV Code Options **	Standard Code	Description
444	92521- 92524	Evaluation of Speech, Language, Voice, Communication, Auditory Processing and/or Aural Rehabilitation Status
440 441	G0153*	Services of Speech and Language Pathologist in Home Health Setting, each 15 min.
420 421	G0151*	Services of Physical Therapist in Home Health Setting, each 15 min.
424	97161 low 97162 mod 97163 high	Physical Therapy Evaluation: low, moderate or high complexity
430 431	G0152*	Services of Occupational Therapist in Home Health Setting, each 15 min.
434	97165 low 97166 mod 97167 high	Occupational Therapy Evaluation: low, moderate or high complexity
424	97161- 97163 plus Modifier of UD	Physical Therapy Evaluation: low, moderate or high complexity
434	97165- 97167 plus Modifier of UD	Occupational Therapy Evaluation: low, moderate or high complexity

* Requires Prior Authorization

** When multiple revenue codes are listed, choose the most appropriate revenue code from the options listed.

UD =Wheelchair Seating Evaluation (State Assigned)

Providers should refer to the appropriate fee schedule for the reimbursement amounts associated with covered Home Health services on www.lamedicaid.com, under the Fee Schedule link.