

### **Procedure Codes**

When completing the Health Insurance Claim Form (sample in Figure I-2) or PayerPath electronic claim form (sample in Figure I-3), personal care agencies must use the procedure codes shown in Table I-3. All consumer directed PCA services **must** include U3 as the procedure code modifier.

#### **Table I-3. Procedure Codes: Agency-Based and Consumer-Directed Personal Care Agency Services**

(This table replaces Table I-3. Procedure Codes: Personal Care Agency Services **and** Table I-4. Procedure Codes: Consumer-Directed Personal Care Agency Services of their respective billing manuals.)

<b>Code</b>	<b>Modifier</b>	<b>Description</b>	<b>Maximum Allowable</b>
T1019	U3*	Personal care services, <b>per 15 minutes</b> , not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant)	\$5.57 (1 unit = 15 minutes)

**\*U3 modifier is required for Consumer-Directed Personal Care Agency Services ONLY.**

**Prior Authorization is required** for Agency-Based and Consumer-Directed Personal Care Agency Services.

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