

**EVV HHCS Service Bill Codes - January 13, 2023 v1.0**  
**Revision History**

<b>Version</b>	<b>Effective Date</b>	<b>Revision Description</b>
<b>1.0</b>	<b>1/13/2023</b>	First publication of proposed EVV Services for Home Health Care Services (HHCS).  These services are excluded from the Cures Act Home Health Care Services and do not require EVV: -Services delivered via Telehealth -Services performed by Early Childhood Intervention (ECI) providers -Wheelchair Seating Assessment -Speech Therapy -Nursing, Physical Therapy, and Occupational Therapy services provided outside of the member's own home or the member's family home.

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**Legend**

Column Title	Column Description
<b>837P POS; 837I TOB</b>	<p>Providers and FMSAs bill for EVV services using the ANSI ASC X12 837P or 837I 5010 electronic specifications. This field identifies the Place of Service (POS) for 837P claims or Type of Bill (TOB) for 837I claims which require the use of EVV.</p> <p>When submitting EVV claims, providers and FMSAs must follow the payer's claims submission guidelines and must input the appropriate POS or TOB based on the location of service.</p> <p>Instructions:</p> <ul style="list-style-type: none"> <li>- "837P POS 12" means only claims with POS 12 are required to use EVV.</li> <li>- "837I TOB 321" means only claims with TOB 321 are required to use EVV.</li> <li>- N/A: Follow the program billing guidelines</li> </ul>
<b>Effective Date for EVV Claim Denial for No Matching Visit</b>	<p>The begin date (based on date of service) that a claim for an EVV-relevant service will be denied when there isn't an accepted EVV visit transaction that matches the claim. The EVV visit transaction must be accepted in the EVV Portal prior to billing the claim.</p>
<b>End Date for EVV Claim Denial for No Matching Visit</b>	<p>The end date (based on date of service) that a claim for an EVV-relevant service will be denied when there isn't an accepted EVV visit transaction that matches the claim. The EVV visit transaction must be accepted in the EVV Portal prior to billing the claim.</p>
<b>EVV Modifier Match Criteria</b>	<p>The modifiers listed in the EVV Service Bill Code Tables represent the authorized service modifiers and will be the modifiers listed in the EVV systems and on EVV visit transactions.</p> <p>Some billing practices require informational pricing modifiers that must be submitted for reimbursement purposes but are not required for prior authorization. These modifiers will not be listed in the EVV systems or EVV visit transactions.</p> <p>When submitting EVV claims, providers and FMSAs must follow the program billing guidelines and use all modifiers required for reimbursement purposes.</p> <p>When submitting EVV claims, providers and FMSAs must follow the modifier position instructions in the EVV Modifier Match Criteria field for each service listed in the EVV Service Bill Code Tables.</p> <p>Instructions:</p> <ul style="list-style-type: none"> <li>- HCPCS Only – The HCPCS is required on the claim. Providers and FMSAs can also add informational modifiers in any position and the claim will be adjudicated.</li> <li>- Mod 1 in any position on claim – The HCPCS and the code listed in Mod 1 are required. The code listed in Mod 1 can be used in any modifier position. Providers and FMSAs can also add informational modifiers in any position and the claim will be adjudicated.</li> <li>- Exact Order – The HCPCS and the codes listed in Mods 1-4 are required. The codes listed in Mods 1-4 must be submitted in the exact order listed in the EVV Service Bill Code Tables for the claim to be adjudicated.</li> <li>- N/A – No EVV claims matching.</li> </ul>

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Column Title	Column Description
<b>EVV Required/Optional?</b>	<p>EVV Optional services are services which are commonly delivered in situations similar to EVV required services. HHSC allows, but does not require, these services to be documented using the EVV system.</p> <p>Visits for EVV Optional services, if verified by the program provider, FMSA, or CDS employer are transmitted to the EVV Portal. Visits for EVV Optional services can be filtered in EVV Portal searches and are excluded from EVV standard reports.</p> <p>Visits for EVV Optional services are subject to the same system requirements and edits as an EVV visit.</p> <p>EVV claims matching is not performed on claims for EVV Optional services.</p> <p>Program providers, FMSAs, and CDS employers must follow Medicaid program requirements for documenting service delivery.</p> <p>Instructions:</p> <ul style="list-style-type: none"> <li>- Required – The use of EVV is required for these services.</li> <li>- Optional – The use of EVV is optional for these services. Service providers may use the EVV system to capture EVV visits for these services. EVV claim matching is not performed on claims for EVV Optional services.</li> </ul>
<b>Healthcare Common Procedure Coding System (HCPCS)</b>	A collection of codes that represent procedures and services provided to individuals.
<b>Mod 1-4</b>	A modifier provides how the reporting physician or provider can indicate that a service or procedure has been altered by some specific circumstance but not changed in its definition or code. There can be up to 4 modifiers associated with a HCPCS code.
<b>Payer</b>	<p>The organization that processes the claim for payment or denial. Payers include:</p> <ol style="list-style-type: none"> <li>1. The Texas Health and Human Services Commission (HHSC) - Claims are for EVV Acute Care services in Fee-for-Service (FFS) and processed by the Texas Medicaid &amp; Healthcare Partnership (TMHP) Compass21 system on behalf of HHSC.</li> <li>2. Long-Term Care (LTC) - Organization that processes claims for LTC services in FFS.</li> <li>3. Managed Care Organization (MCO) - Organization that processes claims for services in Managed Care. HHSC will provide a date when all EVV claims for Managed Care services must be submitted to TMHP for claims matching. Once the claims matching result is obtained, the claim will be forwarded to the MCO with whom the individual member is enrolled at the time of service delivery for final processing.</li> </ol>
<b>Proc Code Qualifier</b>	Procedure code for the service.
<b>Procedure Effective Begin Date</b>	The date when the service billing code became available for use in the Texas Medicaid Program. The date corresponds to the service delivery date, not the claim submission date.
<b>Procedure Effective End Date</b>	The date when the service billing code is no longer to be used. The date corresponds to the service delivery date, not the claim submission date. If the date is 12/31/9999 this means that there is no effective end date.
<b>Program</b>	The name of the program which services are available.

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<b>Column Title</b>	<b>Column Description</b>
<b>Service</b>	The description of the service.
<b>Service Code</b>	A code that identifies the LTC service within the program and is only used in the FFS programs for LTC.
<b>Service Group</b>	A code that identifies the LTC program for the service and is only used in the FFS programs for LTC.
<b>Unit Type</b>	The amount of time assigned to a single unit when delivering the service to a member e.g. 15 minute increments, one hour increments.
<b>Units Matched During EVV Claims Matching?</b>	A 'Yes' or 'No' in this column indicates if the number of Units on the EVV-relevant claim is matched to the number of Units on the EVV visit transaction. Some services are not designed for this type of match.

**EVV HHCS Service Bill Codes - January 13, 2023 v1.0**

**Acronyms**

<b>Acronym</b>	<b>Description</b>
<b>837I</b>	ANSI ASC X12 5010 Institutional Claims
<b>837P</b>	ANSI ASC X12 5010 Professional Claims
<b>AC</b>	Acute Care
<b>C21</b>	Compass 21
<b>CDS</b>	Consumer Directed Services
<b>CFC</b>	Community First Choice
<b>CLASS</b>	Community Living Assistance and Support Services
<b>CMBHS</b>	Clinical Management for Behavioral Health Services
<b>CMS</b>	Claims Management System
<b>DBMD</b>	Deaf-Blind with Multiple Disabilities
<b>EVV</b>	Electronic Visit Verification
<b>FFS</b>	Fee-for-Service
<b>FMSA</b>	Financial Management Services Agencies
<b>HCBS</b>	Home and Community-Based Services
<b>HCBS-AMH</b>	Home and Community-Based Services-Adult Mental Health
<b>HCPCS</b>	Healthcare Common Procedure Coding System
<b>HCS</b>	Home and Community-Based Services 1915(c) waiver program
<b>HHCS</b>	Home Health Care Services
<b>HHS</b>	Home Health Service
<b>HHSC</b>	Health and Human Services Commission
<b>LOC</b>	Level of Care
<b>LPN</b>	Licensed Practical Nurse
<b>LTC</b>	Long-term Care
<b>LVN</b>	Licensed Vocational Nurse
<b>MCO</b>	Managed Care Organization
<b>MDCP</b>	Medically Dependent Children Program
<b>MMP</b>	Medicare-Medicaid Plan
<b>OHFH</b>	Own Home or Family Home
<b>OT</b>	Occupational Therapy
<b>PCS</b>	Personal Care Services
<b>POS</b>	Place of Service
<b>PT</b>	Physical Therapy
<b>RN</b>	Registered Nurse
<b>SRO</b>	Service Responsibility Option
<b>STAR</b>	State of Texas Access Reform
<b>TOB</b>	Type of Bill
<b>TxHmL</b>	Texas Home Living

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Managed Care**

Payer	Program	Service	Proc Code Qualifier	HCPCS	mod 1	mod 2	mod 3	mod 4	Unit Type	Units Matched During EVV Claims Matching?	837P POS; 837I TOB	Procedure Effective Begin Date	Procedure Effective End Date	EVV Required/Optional?	Effective Date for EVV Claim Denial for No Matching Visit	End Date for EVV Claim Denial for No Matching Visit	EVV Modifier Match Criteria
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	NURSING - HHS OF RN EA 15 MIN	HC	G0299					per 15 min	No	837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	HCPCS Only
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	NURSING - HHS OF LPN EA 15 MIN	HC	G0300					per 15 min	No	837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	HCPCS Only
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	NURSING - HHS OF AIDE EA 15 MIN	HC	G0156					per 15 min	No	837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	HCPCS Only
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - ELECTRIC STIMULATION THERAPY	HC	97014	GO				Per Occurrence	No	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - ELECTRIC STIMULATION THERAPY	HC	97014	GP				Per Occurrence	No	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - PHYSICAL MEDICINE PROCEDURE	HC	97799	GO				Per Occurrence	No	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - PHYSICAL MEDICINE PROCEDURE	HC	97799	GP				Per Occurrence	No	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - ELECTRICAL STIMULATION	HC	97032	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT -ELECTRICAL STIMULATION	HC	97032	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - THERAPEUTIC EXERCISES	HC	97110	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - THERAPEUTIC EXERCISES	HC	97110	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - NEUROMUSCULAR REEDUCATION	HC	97112	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - NEUROMUSCULAR REEDUCATION	HC	97112	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - GAIT TRAINING THERAPY	HC	97116	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - GAIT TRAINING THERAPY	HC	97116	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - THERAPEUTIC PROCEDURE	HC	97124	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - THERAPEUTIC PROCEDURE	HC	97124	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - MANUAL THERAPY 1/> REGIONS	HC	97140	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - MANUAL THERAPY 1/> REGIONS	HC	97140	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - THERAPEUTIC ACTIVITIES	HC	97530	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - THERAPEUTIC ACTIVITIES	HC	97530	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - SELF CARE MNGMENT TRAINING	HC	97535	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - SELF CARE MNGMENT TRAINING	HC	97535	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - COMMUNITY/WORK REINTEGRATION	HC	97537	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - COMMUNITY/WORK REINTEGRATION	HC	97537	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - WHEELCHAIR MNGMENT TRAINING	HC	97542	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - WHEELCHAIR MNGMENT TRAINING	HC	97542	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	OT - PHYSICAL PERFORMANCE TEST	HC	97750	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR, STAR Kids, Star Health, STAR+PLUS, MMP	PT - PHYSICAL PERFORMANCE TEST	HC	97750	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
MCO	STAR Health, STAR Kids	RN Assessment of delegation of PCS tasks	HC	G0162	U1				per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Kids	RN Assessment of delegation of PCS tasks (MDCP)	HC	G0162	U1	U6			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order

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MCO	STAR Health, STAR Kids	RN Assessment of delegation of CFC tasks	HC	G0162	U2				per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Kids	RN Assessment of delegation of CFC tasks (MDCP)	HC	G0162	U2	U6			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids	RN Training and Supervision of Delegated tasks	HC	G0495					per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Kids	RN Training and Supervision of Delegated tasks (MDCP)	HC	G0495	U6				per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care LVN, (Agency)	HC	T1005	TE	U1			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care LVN, Service (SRO)	HC	T1005	TE	U2			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care LVN, (CDS)	HC	T1005	TE	UC			per 15 min	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care Specialized LVN, (Agency)	HC	T1005	TE	U7	U1		per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care Specialized LVN, (SRO)	HC	T1005	TE	U7	U2		per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care Specialized LVN, (CDS)	HC	T1005	TE	U7	UC		per 15 min	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care RN, (Agency)	HC	T1005	TD	U1			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care provided by a RN, (SRO)	HC	T1005	TD	U2			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care provided by a RN, (CDS)	HC	T1005	TD	UC			per 15 min	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care Specialized RN, (Agency)	HC	T1005	TD	U7	U1		per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care Specialized RN, (SRO)	HC	T1005	TD	U7	U2		per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	Respite Care Specialized RN, (CDS)	HC	T1005	TD	U7	UC		per 15 min	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS LVN, (Agency)	HC	S9482	TE	U1			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS LVN, (SRO)	HC	S9482	TE	U2			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS LVN, (CDS)	HC	S9482	TE	UC			per 15 min	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS Specialized LVN, (Agency)	HC	S9482	TE	U7	U1		per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS Specialized LVN, (SRO)	HC	S9482	TE	U7	U2		per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS Specialized LVN, (CDS)	HC	S9482	TE	U7	UC		per 15 min	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS RN (Agency)	HC	S9482	TD	U1			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS RN (SRO)	HC	S9482	TD	U2			per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS RN (CDS)	HC	S9482	TD	UC			per 15 min	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS Specialized RN, (Agency)	HC	S9482	TD	U7	U1		per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS Specialized RN, (SRO)	HC	S9482	TD	U7	U2		per 15 min	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR Health, STAR Kids (MDCP)	FFSS Specialized RN, (CDS)	HC	S9482	TD	U7	UC		per 15 min	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Nursing Services - RN Agency	HC	S9123	U3				per hour	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Nursing Care - RN Agency (Specialized)	HC	S9123	U3	UA			per hour	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	CDS Nursing Care - RN	HC	S9123	U3	UC			per hour	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order

**EVV HHCS Service Bill Codes - January 13, 2023 v1.0  
Managed Care**

Payer	Program	Service	Proc Code Qualifier	HCPCS	mod 1	mod 2	mod 3	mod 4	Unit Type	Units Matched During EVV Claims Matching?	837P POS; 837I TOB	Procedure Effective Begin Date	Procedure Effective End Date	EVV Required/Optional?	Effective Date for EVV Claim Denial for No Matching Visit	End Date for EVV Claim Denial for No Matching Visit	EVV Modifier Match Criteria
MCO	STAR+PLUS HCBS, MMP	CDS Nursing Care - RN (Specialized)	HC	S9123	U3	UC	UA		per hour	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	SRO Nursing Care - RN	HC	S9123	U3	UD			per hour	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	SRO Nursing Care - RN (Specialized)	HC	S9123	U3	UD	UA		per hour	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Nursing Care - LVN Agency	HC	S9124	U3				per hour	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Nursing Care - LVN Agency (Specialized)	HC	S9124	U3	UA			per hour	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	CDS Nursing Care - LVN	HC	S9124	U3	UC			per hour	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	CDS Nursing Care - LVN (Specialized)	HC	S9124	U3	UC	UA		per hour	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	SRO Nursing Care - LVN	HC	S9124	U3	UD			per hour	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	SRO Nursing Care - LVN (Specialized)	HC	S9124	U3	UD	UA		per hour	Yes	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Occupational Therapy Agency	HC	S9129	U3				Per Occurrence	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Occupational Therapy / CDS	HC	S9129	U3	UC			Per Occurrence	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Occupational Therapy / SRO	HC	S9129	U3	UD			Per Occurrence	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Physical Therapy Agency	HC	S9131	U3				Per Occurrence	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Physical Therapy / CDS	HC	S9131	U3	UC			Per Occurrence	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR+PLUS HCBS, MMP	Physical Therapy / SRO	HC	S9131	U3	UD			Per Occurrence	No	837P POS 12; 837I TOB 321	12/1/2022	12/31/9999	Required	1/1/2024	12/31/9999	Exact Order
MCO	STAR, STAR Kids, Star Health, STAR+PLUS	Private Duty Nursing (PDN)	HC	T1000					per 15 min	No	N/A	9/1/2019	12/31/2199	Optional	N/A	N/A	N/A



**EVV HHCS Service Bill Codes - January 13, 2023 v1.0**  
**Acute Care Fee-for-Service**

Payer	Program	Service	Proc Code Qualifier	HCPCS	mod 1	mod 2	mod 3	mod 4	Unit Type	Units Matched During EVV Claims Matching?	837P POS; 837I TOB	Procedure Effective Begin Date	Procedure Effective End Date	EVV Required /Optional?	Effective Date for EVV Claim Denial for No Matching Visit	End Date for EVV Claim Denial for No Matching Visit	EVV Modifier Match Criteria
HHSC	HCBS AMH	NURSING - RN-Skilled Care in the Client's Home	HC	S9123	HK				per hour	Yes	837P POS 12	5/1/2020	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	HCBS AMH	NURSING - LVN-Skilled Care in the Client's Home	HC	S9124	HK				per hour	Yes	837P POS 12	5/1/2020	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Nursing	NURSING - HHS OF AIDE EA 15 MIN	HC	G0156					per 15 min	No	837I TOB 321	10/16/2003	12/31/9999	Required	1/1/2024	12/31/9999	HCPCS Only
HHSC	Nursing	NURSING - HHS OF RN EA 15 MIN	HC	G0299					per 15 min	No	837I TOB 321	1/1/2016	12/31/9999	Required	1/1/2024	12/31/9999	HCPCS Only
HHSC	Nursing	NURSING - HHS OF LPN EA 15 MIN	HC	G0300					per 15 min	No	837I TOB 321	1/1/2016	12/31/9999	Required	1/1/2024	12/31/9999	HCPCS Only
HHSC	Therapy	OT - PHYSICAL MEDICINE PROCEDURE	HC	97799	GO				Per Occurrence	No	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - PHYSICAL MEDICINE PROCEDURE	HC	97799	GP				Per Occurrence	No	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - ELECTRIC STIMULATION THERAPY - Licensed Therapist	HC	97014	GO				Per Occurrence	No	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - ELECTRIC STIMULATION THERAPY	HC	97014	GP				Per Occurrence	No	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - ELECTRICAL STIMULATION	HC	97032	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT -ELECTRICAL STIMULATION	HC	97032	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - THERAPEUTIC EXERCISES	HC	97110	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - THERAPEUTIC EXERCISES	HC	97110	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - NEUROMUSCULAR REEDUCATION	HC	97112	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - NEUROMUSCULAR REEDUCATION	HC	97112	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - GAIT TRAINING THERAPY	HC	97116	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - GAIT TRAINING THERAPY	HC	97116	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - THERAPEUTIC PROCEDURE	HC	97124	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - THERAPEUTIC PROCEDURE	HC	97124	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - MANUAL THERAPY 1/> REGIONS	HC	97140	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - MANUAL THERAPY 1/> REGIONS	HC	97140	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - THERAPEUTIC ACTIVITIES	HC	97530	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - THERAPEUTIC ACTIVITIES	HC	97530	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - SELF CARE MNGMENT TRAINING	HC	97535	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - SELF CARE MNGMENT TRAINING	HC	97535	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - COMMUNITY/WORK REINTEGRATION	HC	97537	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - COMMUNITY/WORK REINTEGRATION	HC	97537	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - WHEELCHAIR MNGMENT TRAINING	HC	97542	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim

**EVV HHCS Service Bill Codes - January 13, 2023 v1.0**  
**Acute Care Fee-for-Service**

Payer	Program	Service	Proc Code Qualifier	HCPCS	mod 1	mod 2	mod 3	mod 4	Unit Type	Units Matched During EVV Claims Matching?	837P POS; 837I TOB	Procedure Effective Begin Date	Procedure Effective End Date	EVV Required / Optional?	Effective Date for EVV Claim Denial for No Matching Visit	End Date for EVV Claim Denial for No Matching Visit	EVV Modifier Match Criteria
HHSC	Therapy	PT - WHEELCHAIR MNGMENT TRAINING	HC	97542	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	OT - PHYSICAL PERFORMANCE TEST	HC	97750	GO				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Therapy	PT - PHYSICAL PERFORMANCE TEST	HC	97750	GP				per 15 min	Yes	837P POS 12; 837I TOB 321	9/1/2019	12/31/9999	Required	1/1/2024	12/31/9999	Mod 1 in any position on claim
HHSC	Nursing	Private Duty Nursing (PDN)	HC	T1000					per 15 min	No	N/A	9/1/2019	12/31/2199	Optional	N/A	N/A	N/A

**EVV HHCS Service Bill Codes - January 13, 2023 v1.0**  
**Long-term Care Fee-for-Service**

Payer	Program	Service	Proc Code Qualifier	HCPCS	mod 1	mod 2	mod 3	mod 4	Unit Type	Units Matched During EVV Claims Matching?	Service Group	Service Code	Procedure Effective Begin Date	Procedure Effective End Date	Effective Date for EVV Claim Denial for No Matching Visit	End Date for EVV Claim Denial for No Matching Visit	EVV Modifier Match Criteria
LTC	CLASS	Occupational Therapy	HC	G0152	GO				per hour	Yes	2	7	1/1/1900	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	Physical Therapy	HC	G0151	GP				per hour	Yes	2	8	1/1/1900	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	Nursing Services by LPN/LVN	HC	T1003					per hour	Yes	2	13A	1/1/1900	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	CDS Nursing LVN	HC	T1003	UC	TE			per \$1	No	2	13AV	8/1/2009	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	Nursing Services - RN	HC	T1002					per hour	Yes	2	13B	1/1/1900	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	CDS Nursing RN	HC	T1002	UC	TD			per \$1	No	2	13BV	8/1/2009	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	Specialized Nursing RN	HC	T1002	TG	TD			per hour	Yes	2	13C	1/1/2008	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	CDS Specialized Nursing RN	HC	T1002	TG	UC	TD		per \$1	No	2	13CV	8/1/2009	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	Specialized Nursing LVN	HC	T1003	TG	TE			per hour	Yes	2	13D	1/1/2008	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	CDS Specialized Nursing LVN	HC	T1003	TG	UC	TE		per \$1	No	2	13DV	8/1/2009	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	CDS Occupational Therapy	HC	G0152	UC				per \$1	No	2	7V	8/1/2009	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	CLASS	CDS Physical Therapy	HC	G0151	UC				per \$1	No	2	8V	8/1/2009	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	DBMD	Occupational Therapy	HC	G0152	GO				per hour	Yes	16	7	1/1/1900	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	DBMD	Physical Therapy	HC	G0151	GP				per hour	Yes	16	8	1/1/1900	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	DBMD	Nursing Services - LVN	HC	T1003					per hour	Yes	16	13A	1/1/1900	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	DBMD	Nursing Services - RN	HC	T1002					per hour	Yes	16	13B	1/1/1900	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	DBMD	Specialized Nursing RN	HC	T1002	TG	TD			per hour	Yes	16	13C	1/1/2008	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	DBMD	Specialized Nursing LVN	HC	T1003	TG	TE			per hour	Yes	16	13D	1/1/2008	12/31/2199	1/1/2024	12/31/9999	Exact Order
LTC	HCS	Occupational Therapy - LC 1, 8	HC	S8990	GO				per hour	Yes	21	7	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	HCS	Physical Therapy - LC 1, 8	HC	S8990	GP				per hour	Yes	21	8	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	HCS	Nursing Services LVN - LC 1, 8	HC	T1003					per hour	No	21	13A	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	HCS	CDS Nursing Services - LVN - LOC 1, 8	HC	T1003	UC				per \$1	No	21	13AV	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	HCS	Nursing Services - RN - LC 1, 8	HC	T1002					per hour	No	21	13B	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	HCS	CDS Nursing Services - RN - LOC 1, 8	HC	T1002	UC				per \$1	No	21	13BV	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	HCS	Nursing Services Specialized RN - LC 1, 8	HC	T1002	TG				per hour	No	21	13C	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	HCS	CDS Nursing Services Specialized - RN - LOC 1, 8	HC	T1002	TG	UC			per \$1	No	21	13CV	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	HCS	Nursing Services Specialized LVN - LC 1, 8	HC	T1003	TG				per hour	No	21	13D	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	HCS	CDS Nursing Services Specialized - LVN - LOC 1, 8	HC	T1003	TG	UC			per \$1	No	21	13DV	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	Occupational therapy - LC 1	HC	S8990	GO				per hour	Yes	22	7	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	Physical therapy - LC 1	HC	S8990	GP				per hour	Yes	22	8	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	Nursing Services LVN - LC 1	HC	T1003					per hour	No	22	13A	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	CDS Nursing Services - LVN - LOC 1	HC	T1003	UC				per \$1	No	22	13AV	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	Nursing Services RN - LC 1	HC	T1002					per hour	No	22	13B	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	CDS Nursing Services - RN - LOC 1	HC	T1002	UC				per \$1	No	22	13BV	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	Nursing Services Specialized RN - LC 1	HC	T1002	TG				per hour	No	22	13C	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order

**EVV HHCS Service Bill Codes - January 13, 2023 v1.0**  
**Long-term Care Fee-for-Service**

Payer	Program	Service	Proc Code Qualifier	HCPCS	mod 1	mod 2	mod 3	mod 4	Unit Type	Units Matched During EVV Claims Matching?	Service Group	Service Code	Procedure Effective Begin Date	Procedure Effective End Date	Effective Date for EVV Claim Denial for No Matching Visit	End Date for EVV Claim Denial for No Matching Visit	EVV Modifier Match Criteria
LTC	TxHmL	CDS Nursing Services Specialized - RN - LOC 1	HC	T1002	TG	UC			per \$1	No	22	13CV	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	Nursing Services Specialized LVN - LC 1	HC	T1003	TG				per hour	No	22	13D	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	CDS Nursing Services Specialized - LVN - LOC 1	HC	T1003	TG	UC			per \$1	No	22	13DV	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	CDS Occupational Therapy - LC 1	ER	M0232					per \$1	No	22	7V	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order
LTC	TxHmL	CDS Physical Therapy - LC 1	ER	M0235					per \$1	No	22	8V	3/1/2022	12/31/9999	1/1/2024	12/31/9999	Exact Order

The current LTC nursing, occupational therapy, and physical therapy bill codes combinations will become the EVV codes used when providing service in the member's home or member's family home.  
 New bill code combinations are being created for location settings that do not require EVV.  
 When the new codes are published, the service description of the current bill code combinations will be updated to indicate EVV is required.