## AmeriHealth Caritas North Carolina (ACNC)

Claims and Billing Guidance for Home Health EVV - REV/HCPC/CPT Codes

## Instructions:

Input PA requirements and valid/invalid codes for each Rev Code. Please list codes and common descriptors (ex. G0152, G0299 (RN)) only, separated by commas or new lines to make the file more easily machine readable. If more than one PA policy exists for a Rev Code, enter the associated codes for each on a seperate line.

				Codes in green require prior authorization		EVV Visit Data	Claims Fields		
Program	Service Type	Revenue Code	Service Description	Prior Auth Required?	Use These Codes for PA requests and claims	Do NOT use these Codes	Code Combos for EVV Visit Data	Box 42 (Rev Code):	Box 44 (HCPCS/CPT):
Home Health	Therapies	RC420	Physical Therapy	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.		G0151 RC420 G0157 RC420 G0159 RC420 G0283 RC420 G2168 RC420 S9131 RC420	0420	G0151 G0157 G0159 G0283 G2168 S9131
Home Health	Therapies	RC424	Physical Therapy EVALUATION	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.		97161 RC424 97162 RC424 97163 RC424 97164 RC424	0424	97161 97162 97163 97164
Home Health	Therapies	RC430	Occupational Therapy	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.		G0152 RC430 G0158 RC430 G0160 RC430 G2169 RC430 S9129 RC430	0430	G0152 G0158 G0160 G2169 S9129

Home Health	Therapies	RC434	Occupational Therapy EVALUATION	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.	97165 RC434 97166 RC434 97167 RC434 97168 RC434 G0160 RC434	0434	97165 97166 97167 97168 G0160
Home Health	Therapies	RC440	Speech Therapy	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.	G0153 RC440 G0161 RC440 S9128 RC440	0440	G0153 G0161 S9128
Home Health	Therapies	RC444	Speech Therapy EVALUATION	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.	92521 RC444 92522 RC444 92533 RC444	0444	92521 92522 92533
Home Health	Skilled Nursing Visit	RC550	Skilled nursing assessment or re- assessment	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.	G0162 RC550 G0493 RC550 G0494 RC550	0550	G0162 G0493 G0494

Home Health	Skilled Nursing Visit	RC551	Skilled nursing treatment, teaching/training, observation/evaluation	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.	G0299 RC551 G0300 RC551 G0495 RC551 S9123 RC551 T1002 RC551	0551	G0299 G0300 G0495 S9123 T1002
Home Health	Skilled Nursing Visit	RC580	Skilled Nursing Venipuncture	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.	G0299 RC580 G0300 RC580	0580	G0299 G0300
Home Health	Skilled Nursing Visit	RC581	Skilled Nursing Prefilling insulin syringes/medi planners	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.	G0299 RC581 G0300 RC581	0581	G0299 G0300
Home Health	Home Health Aide	RC570	Home Health Aide Visit	Yes	All non-participating providers require PA. All participating providers require PA after the first 18 visits.	G0156 RC570 S9122 RC570 T1021 RC570	0570	G0156 S9122 T1021