

Procedure code change for Electronic Visit Verification (EVV) personal care services starts Oct. 1, 2023.

You'll need to use procedure code **G0156** and applicable modifiers for EVV personal care services (PCS) beginning with dates of service Oct. 1, 2023, and after.

T1019 will no longer be accepted after Oct. 1, 2023.

G0156 replaces T1019 for GHP Family claims Oct. 1, 2023

As of Oct. 1, 2023, use **G0156** for EVV PCS services in addition to HHCS services. PCS claims with **T1019** billed for dates of service Oct. 1, 2023, and after will not match with EVV data and will be denied. For dates of service Oct. 1, 2023, and after, use procedure code **G0156**.

G0156 is defined as services of home health/hospice aide in home health or hospice settings, each 15 minutes. When billing GHP Family for EVV PCS services, use **G0156** with the appropriate **U7** or **U7 and SC** modifier(s).

Procedure code	Modifiers	Code description	EVV mobile app drop down menu description
G0156	U7	Services of home health/hospice aide in home health or hospice settings, each 15 minutes	Home health aide services (pediatric aide services by non-LRR)
G0156	U7 and SC	Services of home health/hospice aide in home health or hospice settings, each 15 minutes	Home health aide services (pediatric aide services by LRR)

Prior authorization

Prior authorization is required for personal care services billed with G0156 for GHP Family members.

There's no need to worry about your existing authorizations. All approved existing authorizations for services billed with T1019 will be updated accordingly.

Bill GHP Family using the CMS 1500

We'd like to remind you to bill claims for GHP Family patients on a CMS1500 form. Be sure to designate the appropriate place of service on the claim.

We understand you're required to use the UB04 claim form for commercial and Geisinger Gold Medicare Advantage plans. However, to align with Medicaid requirements and expectations around encounter data reporting, we ask that you use the CMS1500 claim form for your GHP Family patients.

EVV requirement

EVV for personal care services provided to your GHP Family patients 21 and under is required in accordance with the 21st Century Cures Act. EVV is required when PCS are provided to any Pennsylvania Medical Assistance beneficiary age 21 and under. The Cures Act requires that EVV systems must collect and verify the following six items:

- PCS performed;
- Name of Medical Assistance beneficiary who receives PCS;
- Date of PCS;
- Location of PCS;
- Individual who provides the PCS; and
- Time the PCS begins and ends.

Who to call

If you have questions or want to check on the status of an existing claim, dial **800-447-4000**. Say “provider”, then “claims” to connect with our Provider Care team.

Thank you for your patience and the care you provide for your GHP Family patients!