

	<b>MEDICAL ASSISTANCE BULLETIN</b> <b>COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE</b>		
	<b>NUMBER:</b> 23-02-03	<b>ISSUE DATE:</b> December 20, 2002	<b>EFFECTIVE DATE:</b> January 1, 2003
<b>SUBJECT:</b> Home Health Agency Services Fee Increase and Medical Assistance Program Fee Schedule Revisions		<b>BY:</b>   <b>Peg J. Dierkers, Ph.D.</b> <b>Deputy Secretary for Medical Assistance Programs</b>	

**PURPOSE:**

The purpose of this bulletin is to notify Home Health Agencies of a fee increase, provided in accordance with services provided under 55 Pa.Code Chapter 1249, effective for dates of service on and after January 1, 2003.

**SCOPE:**

This bulletin applies to all Home Health Agencies enrolled in the Medical Assistance (MA) Program and providing service to MA recipients, eligible for home health service, in the Fee-For-Service delivery system.

**BACKGROUND:**

The Department of Public Welfare (Department), working in cooperation with the Pennsylvania Homecare Association, has reviewed the reimbursement rates for Home Health Agency services. As a result, the Department has agreed to increase Home Health Agency visit fees to continue to ensure access to medically necessary home health care services.

**DISCUSSION:**

For dates of service on and after January 1, 2003, the Department's maximum fee for the following procedure codes is increased as indicated:

<b><u>Procedure Code</u></b>	<b><u>Description of Service</u></b>	<b><u>Limits</u></b>	<b><u>New MA Fee</u></b>
W0520	Physical Therapy (days 1-28) by a Physical Therapist		\$77.00
W0521	Physical Therapy (29th day and beyond) by a Physical Therapist		\$77.00
W0522	Occupational Therapy (days 1-28) by an Occupational Therapist		\$77.00
W0523	Occupational Therapy (29th day and beyond) by an Occupational Therapist		\$77.00
W0524	Speech Therapy (days 1-28) by a Speech Therapist		\$77.00
W0526	Audiological Therapy (days 1-28) by an Audiologist		\$77.00
W0527	Audiological Therapy (29th day and beyond) by an Audiologist		\$77.00
W0529	Home Health Agency visit to patient's home (days 1-28) by a		\$77.00

	Registered Nurse/Licensed Practical Nurse		
W0530	Home Health Agency visit to patient's home (29th day and beyond) by a Registered Nurse/ Licensed Practical Nurse		\$77.00
W0531	Home Health Agency visit to patient's home for prenatal care by a Registered Nurse/Licensed Practical Nurse	One per month	\$77.00
W0532	Home Health Agency visit to patient's home to provide assistance in planning for hospital or home delivery by a Registered Nurse/Licensed Practical Nurse	One per month	\$77.00
W0533	Home Health Agency visit to patient's home for postpartum instruction and demonstration by a Registered Nurse/Licensed Practical Nurse	Two visits	\$77.00
W0534	Home Health Agency visit to patient's home for the purpose of giving instructions on special procedures, including the administration of medications and the use of prescribed appliances and equipment by a Registered Nurse/Licensed Practical Nurse	Three per benefit period	\$77.00
W0938	Home Health Agency visit to patient's home (days 1-28) by a Home Health Aide		40.00
W0939	Home Health Agency visit to patient's home (29th day and beyond) by a Home Health Aide		40.00
W0965	Speech Therapy (29th day and beyond) by a Speech Therapist		\$77.00

**COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:**

The Appropriate toll-free number for your provider type  
 Visit the Office of Medical Assistance Programs website at [www.dpw.state.pa.us/omap](http://www.dpw.state.pa.us/omap).