## Home Health Care Services subject to Electronic Visit Verification in the Fee-for-service delivery system

DHS EVV Mobile App Drop-Down Menu Service	PROCEDURE CODE	MOD 1	MOD 2	MOD 3	MOD 4	PROVIDER TYPE	SPECIALTY	OFFICE	FFS PROGRAM(S)	FFS Authorization Required	FFS Unit of Service	FFS Unit Rule	FFS MMIS Unit Rule	FFS Group Service Indicator
Nursing - (1:1) LPN-15 Mins	T2025	TE				16	161	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Nursing - (1:1) LPN-15 Mins	T2025	TE				05	051	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Nursing - (1:1) LPN-15 Mins	T2025	TE	U1			05	051	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Nursing - (1:1) LPN-15 Mins	T2025	TE	U1			16	161	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Nursing - (1:1) RN-15 Mins	T2025	TD				16	160	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Nursing - (1:1) RN-15 Mins	T2025	TD				05	051	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Nursing - (1:1) RN-15 Mins	T2025	TD	U1			05	051	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Nursing - (1:1) RN-15 Mins	T2025	TD	U1			16	160	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Υ	15 Minutes	Rule 1	Add Time	N
Nursing (1:2) LPN	T2025	TE	UN			16	161	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	Y (1:2)
Nursing (1:2) LPN	T2025	TE	UN			05	051	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	Y (1:2)
Nursing (1:2) LPN	T2025	TE	UN	U1		16	161	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	Y (1:2)
Nursing (1:2) LPN	T2025	TE	UN	U1		05	051	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	Y (1:2)
Nursing (1:2) RN	T2025	TD	UN			16	160	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	Y (1:2)
Nursing (1:2) RN	T2025	TD	UN			05	051	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	Y (1:2)
Nursing (1:2) RN	T2025	TD	UN	U1		16	160	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	Y (1:2)
Nursing (1:2) RN	T2025	TD	UN	U1		05	051	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	Y (1:2)
Occupational Therapy-15 Mins	T2025	GO				17	171	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N

Occupational Therapy-15 Mins	T2025	GO	U1	17	171	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Physical Therapy-15 Mins	T2025	GP		17	170	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Physical Therapy-15 Mins	T2025	GP	U1	17	170	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Speech/Language Therapy-15 Mins	T2025	GN		17	173	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Speech/Language Therapy-15 Mins	T2025	GN	U1	17	173	ODP	Consolidated Waiver, Person/Family Directed Support Waiver, Community Living Waiver, Base Funds	Y	15 Minutes	Rule 1	Add Time	N
Speech/Language Therapy - 15 mins - AAW	T2025	GN	U2	17	173	ODP	Adult Autism Waiver	Υ	15 Minutes	Rule 1	Add Time	N
Occupational Therapy-15 Mins	T2025	GO		59	171	OLTL	OBRA Waiver	Y	15 Minutes	Rule 4	Add Unit	N
Occupational Therapy-15 Mins	T2025	GO	U4	59	171	OLTL	OBRA Waiver	Y	15 Minutes	Rule 4	Add Unit	N
Physical Therapy-15 Mins	T2025	GP		59	170	OLTL	OBRA Waiver	Υ	15 Minutes	Rule 4	Add Unit	N
Physical Therapy-15 Mins	T2025	GP	U4	59	170	OLTL	OBRA Waiver	Υ	15 Minutes	Rule 4	Add Unit	N
Speech/Language Therapy-15 Mins	T2025	GN		59	173	OLTL	OBRA Waiver	Υ	15 Minutes	Rule 4	Add Unit	N
Home Health - Nursing (LPN)	T1003	SE		59	161	OLTL	OBRA Waiver	Υ	15 Minutes	Rule 4	Add Unit	N
Home Health - Nursing (RN)	T1002	SE		59	160	OLTL	OBRA Waiver	Υ	15 Minutes	Rule 4	Add Unit	N
Diabetes Outpatient Training Service, individual	G0108			05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	N	30 Minutes	Rule 10 (New)	Add Time	N
Diabetes Outpatient Training, group	G0109			05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	N	30 Minutes	Rule 10 (New)	Add Time	Y (1:many
Physical Therapy (Day 1-28) by a PT	G0151			05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
Physical Therapy (Day 29 and beyond) by a PT	G0151	UD		05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
Occupational Therapy (Day 1-28) by a OT	G0152			05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
Occupational Therapy (Day 29 and beyond) by a OT	G0152	UD		05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
Speech Therapy (Day 1-28) by a ST	G0153			05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
Speech Therapy (Day 29 and beyond) by a ST	G0153	UD		05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
HHA visit to patient's home (Day 1-28) by a HH Aide	G0156	U8		05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N

HHA visit to patient's home (Day 29 and beyond) by a HH Aide	G0156	U8	UD		05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
HHA visit to a patient's home (day 1-28) by a RN	G0299	U8			05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
HHA visit to patient's home (Day 29 and beyond) by a RN	G0299	U8	UD		05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
HHA visit to a patient's home (Day 1-28) by a LPN	G0300	U8			05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
HHA visit to patient's home (Day 29 and beyond) by a LPN	G0300	U8	UD		05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Per Visit	Rule 12 (New)	Add Unit	N
EPSDT - Registered Nurse (Pediatric Shift Care)	S9123				05	050	OMAP	Childrens Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Hour	Rule 2	Add Time	N
EPSDT - Licensed Practical Nurse PDN (Pediatric Shift Care)	S9124				05	050	OMAP	Childrens Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	Y	Hour	Rule 2	Add Time	N
Screening Test, Pure Tone, Air Only	92551				05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	N	Per Visit	Rule 12 (New)	Add Unit	N
Pure tone audiometry (threshold); Air Only	92552				05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	N	Per Visit	Rule 12 (New)	Add Unit	N
Home Visit Prenatal (Non HBP) Assessment	99500	AT			05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women HealthcareBenefit Package	N	Per Visit	Rule 12 (New)	Add Unit	N
Home Visit Postnatal (Non HBP) Follow-up Care	99501	AT			05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	N	Per Visit	Rule 12 (New)	Add Unit	N
Home Visit Postnatal (Non HBP) Follow-up Care Audio/Video	99501	AT	GT		05	050	OMAP	Childrens Healthcare Benefit Package, Adult Healthcare Benefit Package, Presumptive Eligibility for Pregnant Women Healthcare Benefit Package	N	Per Visit	Rule 12 (New)	Add Unit	N