

**Home Health Services**  
**July 1, 2009**

**Description** – Revenue code short description. You must refer to the appropriate official CPT-4 or HCPCS coding manual for complete definitions in order to assure correct coding.

**Effective** – This is the first date of service for which the listed fee is applicable.

**Method** – Source of fee determination

**Fee Sched:** Medicaid fee for listed code

**By Report (BR):** Equals 90 percent of billed charges

**PA** – Prior Authorization

**Y:** Prior authorization is required

**Space:** Prior authorization is not required

**The 2% provider rate increase was allocated in House Bill 645 as a one-time appropriation. A one-time appropriation means that it will not be included in the Department's base budget after SFY 2011. If the next legislature does not take specific action to continue this provider rate increase, rates will be decreased to SFY 2009 levels.**

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<b>Rev</b>	<b>Description</b>	<b>Effective</b>	<b>Method</b>	<b>Fee</b>	<b>PA</b>
421	Physical Therapy - Vist Charge	7/1/2009	FEE SCHED	\$71.81	Y
431	Occupational Therapy - Visit Charge	7/1/2009	FEE SCHED	\$71.81	Y
441	Speech Therapy - Visit Charge	7/1/2009	FEE SCHED	\$71.81	Y
551	Skilled Nursing - Visit Charge	7/1/2009	FEE SCHED	\$71.81	Y
571	Home Health Aide - Visit Charge	7/1/2009	FEE SCHED	\$32.06	Y
270	General Class Medical/Surgical Supplies	7/1/2009	BY REPORT	90% of billed	