

June 26, 2020 Web Announcement 2232

Attention Personal Care Services Providers:

Update Regarding Claims for Procedure Code T1019

Update to <u>Web Announcement 2112</u>: Claims for procedure code T1019 (Personal Care Services, per 15 min) and T1019-TF (with modifier) submitted by provider types 30 (Personal Care Services - Provider Agency) and 83 (Personal Care Services - Intermediary Service Organization) that denied in error with duplicate error codes 4021 (No coverage rule for procedure) and/or 5056 (Same procedure different modifier, same day) have been automatically reprocessed. The impacted claims had dates of service on or after October 1, 2018, through claims processed prior to November 4, 2019.

Results of the reprocessed claims appear on the remittance advice dated July 3, 2020. Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to <u>Medicaid Services Manual Chapter 100</u> and the <u>Billing Manual</u> for information concerning the claim appeal process and time frames.