



# Provider Newsflash

January 2016

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## Important Communication Regarding Authorization Requests and Claims Submissions for Home Health Aide Services

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### Purpose of this communication

- To reinforce the process providers should use to request authorizations and submit claims for home health aide (HHA) services for Horizon Blue Cross Blue Shield of New Jersey members.

### What do I need to do?

- **Requesting Authorization for HHA Services**
  - Use of hourly versus per visit units is dependent on the member's benefit
  - **Confirm** whether the member's benefit allows hourly services or per visit services and request an authorization in hours or per visit accordingly.
- **Submitting a Claim for HHA Services**
  - Bill for HHA services based on the member's benefit (see above clarification for hourly versus per visit).
  - A claim for **hourly HHA services should be billed using HCPCS S9122** plus the appropriate modifier
  - A claim for a HHA **visit should be billed using HCPCS T1021** plus the appropriate modifier.
  - Failure to request an authorization and bill properly may result in a denial of payment.

**If you have any questions, please contact your Provider Management representative.**