ACTION: Original

AMENDED
Appendix
5160-12-05

DATE: 07/15/2016 9:24 AM

Appendix B Home Health Service Visit Modifiers Effective October 1, 2016

| Billing Modifier | Description | Requirement |
|---------------------|------------------|---|
| U1 | Infusion Therapy | Must be used with code G0299 for the purpose of identifying home infusion therapy provided in accordance with rule 5160-12-01 of the Administrative Code. |
| U2 | Second Visit | Must be used to identify the second visit for the same type of service made by a provider on a date of service per individual in accordance to rule 5160-12-04 of the Administrative Code. |
| U3 | Third Visit | Must be used to identify the third or more visit for the same type of service made by a provider on a date of service per individual in accordance to rule 5160-12-04 of the Administrative Code. |
| U5 | Healthchek | Must be used to identify the individual receiving Healthchek services in accordance to rule 5160-12-01 of the Administrative Code. |
| HQ | Group Visit | Must be used to identify individual receiving services in accordance to rule 5160-12-04 of the Administrative. |