



## TEXAS HEALTH AND HUMAN SERVICES COMMISSION

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EXECUTIVE COMMISSIONER

### Memorandum

To: Managed Care Organizations  
Program Management  
Health Plan Management

From: Emily Zalkovsky  
Director for Program Management  
Medicaid/CHIP Division

Subject: Appendix XX, STAR+PLUS Nursing Facility Billing Matrix

Issuance Date: March 23, 2015  
Effective Date: See below

HHSC: 15-03-003

This memorandum applies to the STAR+PLUS Program.

The purpose of this memorandum is to notify the managed care organizations (MCOs) that the Health and Human Services Commission (HHSC) has changed the attached Appendix XX, STAR+PLUS Nursing Facility Billing Matrix, for the MCOs to use for processing nursing facility (NF) claims and for the NF to use when submitting claims.

Update 1: Effective March 23, 2015

Customized power wheelchair services (CPWC) (procedure codes 0294 CPWC modifications, 0299 CPWC adjustments) have been moved from the ended service list to carved-in list. They were previously placed on the ended service list in error. See current Department of Aging and Disability Services (DADS) Bill Code Crosswalk, Version 1.11 as of March 16, 2015, for reference dates <http://www.dads.state.tx.us/providers/hipaa/billcodes/index.html#lrc>.

Update 2: Effective April 1, 2015

There are two durable medical equipment (DME) services removed (codes E1031 Rollabout Chair, E1130 Standard Wheelchair) on the carved-in list, since these services are being ended by DADS effective March 31, 2015. DADS has clarified that per 40 TAC 19.2601, the daily rate includes costs for equipment that can be used by more than one person, such as wheelchairs,

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adjustable chairs, walkers, etc. If a recipient desires equipment for exclusive use, its purchase is the responsibility of the recipient.

If you have any questions regarding this memorandum, you may contact Betsy Johnson at 512-462-6286 or at [betsy.johnson@hhsc.state.tx.us](mailto:betsy.johnson@hhsc.state.tx.us).