

STAR+PLUS Long-Term Services and Supports (LTSS) Billing Matrix

Reference Guide



The Texas Health and Human Services Commission (HHSC) has updated the Long-Term Services and Supports (LTSS) Billing Matrix for the STAR+PLUS program to reflect changes related to billing unit increments and new procedure codes. These changes will be effective September 1, 2019.

As a result of this change, Superior HealthPlan providers will see a change to LTSS authorizations for STAR+PLUS and STAR+PLUS Medicare-Medicaid Plan (MMP). For any current authorization that spans dates of service from September 1, 2019 or after, using the procedure codes indicated above, Superior will create a new authorization to reflect the billing unit increment change and new procedure codes.

The Electronic Visit Verification (EVV) service authorizations that will be impacted by changes to the units and/or procedure code are outlined below.

STAR+PLUS and MMP Services	Unit Change to 15 Minutes=1 Unit	Procedure Code Change
Personal Assistance Services (PAS)	X	
Community First Choice Personal Assistance Services (CFC PAS)	X	
Community First Choice Habilitation Services (CFC HAB)	X	X
Protective Supervision (PS)	X	
In-Home Respite Services	X	X

What can I expect to see?

For existing authorizations for the services listed above, a new authorization will be processed reflecting an updated date span, updated total number of units authorized for that date span and, in some cases a new procedure code.

- Your existing authorization will end August 31, 2019.
- You will receive a new authorization number reflecting applicable changes with a start date of September 1, 2019.
 - o The end date will match your original authorization service end date.
- In the new authorization, the approved weekly hours will not change. The total units for the authorization date span will be changed by calculating the approved hours using an interval of 15 minutes.
- If the service has a new procedure code, the new code will be reflected on the new authorization.
- For new authorizations with a September 1, 2019 start date or later, you will receive one authorization with the total units calculated at the 15 minute equals 1 unit increment.
- See below for an example of authorization changes:
 - o **Current authorization:**
 - PAS Authorization OPTX1234567
 - Current service start date of 11/01/18 and service end date of 10/31/19
 - 20 hours per week on a 7 day service plan
 - Total units entered on authorization 1043
 - 1 hour=1 unit
 - This authorization number does not change and can be used for billing for dates of service up to 08/31/19
 - This authorization end date will be changed to 08/31/19
 - o **New Authorization:**
 - New PAS Authorization OPTX4567890
 - **New service start date of 09/01/19 and service end date will match the original authorization of 10/31/19**
 - 20 hours per week on a 7 day service plan
 - Total number of units 698
 - 15 minutes=1 unit
 - This authorization will have a new authorization number that can be used for billing for dates of service 09/01/19 to 10/31/19 (as per example outlined above).

For any questions, please contact your Superior Account Manager at Statewide.AM@SuperiorHealthPlan.com.