

Home Health/Electronic Visit Verification Crosswalk

Program	Service Type	Revenue Code	Service Description	Box 42 (Rev. Code):	Vaya Health	Prior Authorization Required?
Home Health	Therapy	RC420	Physical Therapy	0420	97161 97162 97163 97164	Yes
Home Health	Therapy	RC424	Physical Therapy - Evaluation	0424	97161 97162 97163 97164	No
Home Health	Therapy	RC430	Occupational Therapy	0430		Yes
Home Health	Therapy	RC434	Occupational Therapy - Evaluation	0434	97165 97166 97167 97168	No
Home Health	Therapy	RC440	Speech Therapy	0440		Yes
Home Health	Therapy	RC444	Speech Therapy - Evaluation	0444	92521 92522 92523	No
Home Health	Skilled Nursing	RC550	Skilled Nursing Home Health	0550		Yes
Home Health	Skilled Nursing	RC551	Skilled Nursing Visit	0551	T1030 RN T1031 LPN	Yes
Home Health	Skilled Nursing	RC559	Skilled Nursing - Other Visit	0559		Yes
Home Health	Home Health Aide Visit	RC570	Home Health Aide Visit	0570	T1021	Yes
Home Health	Skilled Nursing	RC580	Home Health - Other Visit	0580	T1030 RN T1031 LPN*	Yes
Home Health	Skilled Nursing	RC581	Home Health Visit Charge	0581	T1030 RN T1031 LPN*	Yes
Home Health	Home Health Aide Visit	RC589	Home Health Visit - Other	0589		Yes

***NC Medicaid Home Infusion Therapy Fee Schedule - for Nursing Visit**