

## Home and Community-Based Services (HCBS) Waiver Service Code Updates - Effective January 1, 2026 Implementation Guide

Iowa Medicaid is making the following changes to HCBS Waiver services effective January 1, 2026. MCOs, Case Managers, Money Follows the Person (MFP) and providers should make the necessary changes.

Code	Modifier	Current Service Name	New Service Name	New Code and Service Name	Traditional Waiver Services or Consumer Choices Option (CCO)	Waiver/Program Applicable	What This Means
T1019		Personal Care Services - CDAC individual non-skilled	Attendant Care Self-directed	T1019 Attendant Care Self-directed 15 min unit of service	CCO Only	AIDS/HIV, BI, Elderly, HD, ID, PD & MFP.	Update service name. The service is only available to self-direct. For those with service plans with individual CDAC, the service end date is 12/31/2025. Beginning 01/01/26 members choosing to self-direct Attendant Care are authorized for Attendant Care self-

							directed T1019. The service name is updated in the service systems, service plan and service authorization.
T1019	U3	Personal Care Services - CDAC individual skilled	Attendant Care Skilled Self-directed	T1019 U3 Skilled Self-directed 15 min unit of service	CCO Only	AIDS/HIV, BI, Elderly, HD, ID, PD & MFP.	Update service name. The service is only available to self-direct. For those with service plans with individual CDAC skilled, the service end date is 12/31/2025. Beginning 01/01/26 members choosing to self-direct Attendant Care Skilled are authorized for Attendant Care Skilled self-directed T1019 U3. The service name is updated in the service systems, service plans and service authorizations.

S5125		Attendant Care Services - Agency non-skilled	Attendant Care	S5125 Attendant Care 15 min unit of service	Traditional & CCO	AIDS/HIV, BI, Elderly, HD, ID, PD & MFP	Update service name. For those with service plans with Agency CDAC, the service end date is 12/31/2025. Beginning 01/01/26 the service name is Attendant Care, and members are authorized for Attendant Care S5125. The service name is updated in the service systems, service plans and service authorizations.
S5125	U3	Attendant Care Services - Agency skilled	Skilled Attendant Care	S5125 U3 Skilled Attendant Care 15 min unit of service	Traditional & CCO	AIDS/HIV, BI, Elderly, HD, ID, PD & MFP	Update service name. For those with service plans with Agency CDAC Skilled, the service end date is 12/31/2025. Beginning 01/01/26 the service name is Attendant Care, and members are authorized for Attendant Care S5125 U3. The

							service name is updated in the service systems, service plans and service authorizations.
S5135		Companion Care Adult - Senior Companion	Companion Care	S5135 Companion Care 15 min unit of service	Traditional & CCO	Elderly Waiver only	Update service name. For those with service plans with Senior Companion S5135 authorized, beginning 01/01/26 the service name changes to Companion Care in the service systems, service plans and service authorizations.
S5130		Homemaker Service	Home Maintenance Support	S5130 Home Maintenance Support 15 min unit of service	Traditional & CCO	AIDS/HIV, Elderly, and HD waivers only	Update service name. For those with service plans with Homemaker S5130 authorized, beginning 01/01/2026 the service name changes to Home Maintenance Support in the service systems, service plans and service authorizations.

S5120		Chore Services	Home Maintenance Support	S5130 Home Maintenance Support 15 min unit of service	Traditional & CCO	S5120 is Elderly Waiver only.	Retire S5120 and replace it with S5130. For those with service plans with Chore authorized, beginning 01/01/2026 change the service name to Home Maintenance Support and service code to S5130. Update in the service systems, service plan and service authorization.
T2018		Self-Directed Community Support and Employment	Supported Employment	T2018 UC Supported Employment; individual, Per hour	CCO only	ID, BI Waiver, and MFP.	Ending the Self-Directed Community Support and Employment Service as this is duplicative. Members will continue to choose the appropriate Supported Employment service to be self-directed as is the current practice. Update Service Name.

H2021		Family Counseling and Training	Family Training	H2021 UC Family Training Services, 15-minute unit	Traditional	BI Waiver and MFP Only. BI needs to be ended.	Update service name. Add new modifier H2021 UC and replace H2021 for BI Waiver and MFP. For those with service plans with Family Counseling and Training authorized, change the service name to Family Training, and add the UC modifier to the authorization. Update the name and code in the service systems, service plan and service authorization.
96158 96159		Behavioral Programming - Mental Health Assessment and Plan Development	Positive Behavioral Support and Consultation	H0004 UC Positive Behavioral Support and Consultation, 15-minute unit	Traditional Only	BI Waiver and MFP Only	Update Service Name and replace 96158 & 96159 for BI and MFP with H0004 UC. For those with service plans with 96158 or 96159 Behavioral Programming - Mental

							Health Assessment and Plan Development authorized, change the service name to Positive Behavioral Support and Consultation and change the procedure code to H0004 UC to the authorization. Update the name and code in the service systems, service plan and service authorization.
H0032 H0031		Behavioral Programming - Mental Health Assessment and Plan Development	Positive Behavioral Support and Consultation	H0004 UC Positive Behavioral Support and Consultation, 15-minute unit	Traditional & CCO	BI Waiver and MFP Only	Add new modifier H0004 UC and replace H0031 & H0032 for BI and MFP. For those with service plans with H0031 or H0032 Behavioral Programming - Mental Health Assessment and Plan Development authorized, change the service name to Positive

							Behavioral Support and Consultation and change the procedure code to H0004 UC to the authorization. Update the name and code in the service systems, service plan and service authorization.
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### System Changes

- FFS service plans in IoWANS will automatically update on January 2, 2026. Provider service enrollments will update automatically with service name and code changes as applicable on January 2, 2026. All service plan service spans that are authorized and valid on December 31, 2025, will automatically update in IoWANS to the new procedure code/modifier as applicable. Updated services spans will have an effective date of January 1, 2026.
- Plans that do not receive an automatic update will need to be manually entered into IoWANS by the case manager. Any corrections to the updated service plans must be authorized and valid by January 31, 2026, to be effective January 1, 2026.

### Electronic Visit Verification (EVV)

- For MCO enrollees transitioning from Chore services S5120 to Home Maintenance Support services S5130, the former Chore providers must be fully compliant with entering Home Maintenance services into the applicable EVV system by April 1, 2026.



## **FFS Person-Centered Service Plan Updates**

Services with a name change only:

- Case Managers may update the applicable services in the member's service plan during the next planned update.
- Services with both a name change and procedure code/modifier change, Case Managers must ensure proper payment by:
  - Updating the service plan and the CCO budget, as applicable.
  - Reflecting the new service name and updated procedure code/modifier.
  - Using a begin date of 01/01/2026 for these updates.

All updates must be completed no later than January 31, 2026.

## **Notices of Decision (NODs)**

For the service changes effective January 1, 2026, a notice of decision (NOD) issuance is only necessary for those services with a service code/modifier change needing authorization. Services with a name change only do not require the issuance of an updated NOD. If a provider wishes to receive a new NOD from the CM/CBCM, for service name changes, they may request one from the CM/CBCM.

Iowa Medicaid is aware that there are individual situations that do not fall into one of the categories mentioned above. Providers, CMs, CBCMs and Iowa Medicaid staff will coordinate efforts to address these situations as they arise.

Iowa Medicaid appreciates your partnership as we work together to serve the needs of Iowa Medicaid members.

If you have questions, please contact Iowa Medicaid Provider Services or the appropriate MCO:

## **Iowa Medicaid Provider Services:**

- Phone: 1-800-338-7909
- Email: [imeproviderservices@hhs.iowa.gov](mailto:imeproviderservices@hhs.iowa.gov)

## **Managed Care Organizations (MCOs):**

### **Iowa Total Care:**

- Phone: 1-833-404-1061
- Email: [providerrelations@iowatotalcare.com](mailto:providerrelations@iowatotalcare.com)
- Website: <https://www.iowatotalcare.com>

### **Molina Healthcare of Iowa:**

- Phone: 1-844-236-1464
- Email: [iaproviderrelations@molinahealthcare.com](mailto:iaproviderrelations@molinahealthcare.com)
- Website: <https://www.molinahealthcare.com/providers/ia/medicaid/home.aspx>
- Provider Portal: <https://www.availity.com/molinahealthcare>

### **Wellpoint Iowa, Inc.:**

- Phone: 1-833-731-2143
- Email: [ProviderSolutionsIA@wellpoint.com](mailto:ProviderSolutionsIA@wellpoint.com)
- Website: <https://www.provider.wellpoint.com/iowa-provider/home>