

## Activity Codes

For the following services, at least one Activity Code must be entered

Procedure Code	AuthentiCare Code	Service	Activity Name	Activity Code
<b>T1019</b>	PCSPT1019	PERSONAL CARE SERVICE	Bathing	10
			Dressing	11
			Grooming	12
			Toileting	13
			Transferring	14
			Mobility/Ambulation	15
			Eating	16
			Light Housekeeping	17
			Laundry	18
			Essential Shopping	19
			Meal preparation	20
<b>T1019</b> <b>T1019TF</b>	PSDST1019 PSDST1019TF	SELF DIRECTED PERSONAL CARE SELF DIRECTED SKILLED CARE	Bathing	10
			Dressing	11
			Grooming	12
			Toileting	13
			Transferring	14
			Mobility/Ambulation	15
			Eating	16
			Light Housekeeping	17
			Laundry	18
			Essential Shopping	19
			Meal preparation	20
<b>T1019TF</b>	PSDST1019TF	SELF DIRECTED SKILLED CARE	Self-Directed Skilled (SDS)	22
<b>S5120</b>	HCFES5120	FE CHORE SERVICE	Chore	30
<b>S5130</b>	HCFES5130	FE HOMEMAKER SERVICE	Homemaker	31
<b>S5135</b>	HCFES5135	FE ADULT COMPANION CARE	Companion Care	32
<b>S5150</b>	HCFES5150	FE UNSKILLED RESPITE CARE	Respite	33
<b>S5120</b>	HCPDS5120	PD CHORE SERVICE	Chore	30
<b>S5130</b>	HCPDS5130	PD HOMEMAKER SERVICE	Homemaker	31
<b>S5150</b>	HCPDS5150	PD UNSKILLED RESPITE CARE	Respite	33
<b>S5125</b>	HCPDS5125	PD ATTENDANT CARE	Bathing	10
			Dressing	11
			Grooming	12
			Toileting	13
			Transferring	14
			Mobility/Ambulation	15
			Eating	16
Skilled Service (must specify)	21			

## Observation Codes

If a service requires an Activity Code, at least one Observation Code must be entered.

Observation Name	Observation Code
No observations to report	70
Plan of care does not meet client needs	71
Difficulty with walking, balance, or transferring	72
Difficulty getting in or out of bed	73
Difficulty grooming or bathing self	74
Difficulty with dressing self	75
Difficulty managing toileting hygiene	76
Difficulty with feeding self	77
Difficulty with fixing or reheating meals or snacks	78
Difficulty with taking medication by mouth	79
Recent emergency treatment due to improper medication administration or side effects	80
Shortness of breath when walking	81
Skin breakdown, open areas, bedsores, or rash	82
Weight loss	83
Decreased appetite	84
Weight gain	85
Swelling of legs or feet	86
Difficulty speaking clearly or being understood	87
Difficulty using the telephone	88
Increased Level of Pain	89
Increased Anxiety Level	90
Behavioral problem such as yelling, spitting, or getting lost	91
Difficulty sleeping	92
New problems with vision	93
New problems with forgetfulness	94
Recent falls	95
Recently admitted to hospital	96
Recently in emergency room	97
Upcoming surgeries	98
Emergency preparedness—Evacuation	99
Other concern(s) not otherwise specified	100

The following services do NOT require Activity or Observation Codes:

SILVER SUMMIT -- SSNV PERSONAL CARE (SSNVT1019)  
 HPN -- HPNV PERSONAL CARE (HPNVT1019)  
 ANTHEM -- ANTH PERSONAL CARE (ANTHT1019)