



Administrative Policy

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Coverage Policy Number..... A012

Custodial, Non-Skilled Services

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Related Coverage Resources

[Hospice Care](#)

PURPOSE

Administrative Policies are intended to provide further information about the administration of **standard** Cigna benefit plans. In the event of a conflict, a customer's benefit plan document **always supersedes** the information in an Administrative Policy. Coverage determinations require consideration of 1) the terms of the applicable benefit plan document; 2) any applicable laws/regulations; 3) any relevant collateral source materials including Administrative Policies and; 4) the specific facts of the particular situation. Administrative Policies relate exclusively to the administration of health benefit plans. Administrative Policies are not recommendations for treatment and should never be used as treatment guidelines.

Overview

This policy describes custodial, non-skilled services. The primary goal of custodial, non-skilled services is to maintain a safe living environment without active treatment of medical conditions. These services may be performed in an individual's home, nursing home or assisted living facility.

Administrative Policy

Custodial, non-skilled services are specifically excluded under most benefit plans.

When provided in the home, coverage for custodial, non-skilled services is subject to the terms, conditions and limitations of the applicable benefit plan's Home Health Services benefit. Under some benefit plans, limited coverage for non-skilled services may be available for home health aides when in direct support of skilled services.

Custodial, non-skilled services include:

- Services related to watching or protecting a person

- Services related to performing or assisting a person in performing any activities of daily living
- Services that are not required to be performed by trained or skilled medical or paramedical personnel
- Services that do not require supervision by trained or licensed healthcare professionals and can be performed by a family member, other layperson*, or the patient themselves.

***Note:** Cigna defines prudent layperson as one who possesses an average knowledge of health and medicine.

The following are considered custodial, non-skilled services and are not covered or reimbursable under the standard benefit plan (this list may not be all-inclusive):

- Assistance with activities of daily living:
 - Bathing
 - Dressing
 - Getting in and out of bed
 - Preparing foods
 - Walking
- Other custodial services for providing supportive non-medical care:
 - Administration of long-term oxygen therapy
 - Administration of nebulizer and intermittent positive pressure breathing (IPPB) treatments
 - Bowel training or management
 - Care of the incontinent individual
 - Changing a non-infected postoperative dressing
 - Changing a non-sterile dressing
 - General maintenance care of a stable colostomy or ileostomy
 - Preparing and administration of oral medications, eye drops, ointments or suppositories
 - Services to maintain satisfactory functioning of an indwelling bladder catheter
 - Stable/routine uncomplicated (e.g., without aspiration risks, residuals) feeding by gastric, percutaneous endoscopic gastrostomy (PEG), jejunostomy feeding
 - Supportive foot and nail care

Background

Custodial services are services that are of a sheltering, protective, or safeguarding nature, primarily to help the person in activities of daily living. These services may be provided in an institutional setting or at-home care and may include services to care for someone because of age or mental or physical condition. Custodial care may also include clinical services provided mainly to maintain the person's current state of health.

An individual's diagnosis, prognosis and medical condition as well as the services required should all be considered in determining whether services are skilled, non-skilled or custodial. While these should be considered, they are not the sole factors in determining whether the service is skilled, non-skilled or custodial. The fact that a skilled professional is performing a particular service does not render it a skilled service. The fact that there is an absence of caregiver assistance in the home to assist with activities of daily living (ADL's) or other non-skilled services, does not cause an otherwise custodial service to be considered skilled. These services may still be considered non-skilled or custodial.

Coding Information

Notes:

1. This list of codes may not be all-inclusive since the American Medical Association (AMA) and Centers for Medicare & Medicaid Services (CMS) code updates may occur more frequently than policy updates.
2. Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement.

Not Covered Under the Benefit Plan

CPT®* Codes	Description
T1019	Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant)
T1020	Personal care services, per diem, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant)

***Current Procedural Terminology (CPT®) © 2024 American Medical Association: Chicago, IL.**

References

1. Centers for Medicare and Medicaid Services. Medicare Benefit Policy Manual. Chapter 7. Home Health Services. Rev. 12382, 11/28/2023; Rev. 12425, 12/21/2023. Accessed January 13, 2025. Available at URL address: <https://www.cms.gov/regulations-and-guidance/guidance/manuals/internet-only-manuals-ioms-items/cms012673>
2. Centers for Medicare and Medicaid Services. Medicare Benefit Policy Manual. Chapter 8. Coverage of Extended Care (SNF) Services Under Hospital Insurance. Rev. 12283, 10/05/2023. Accessed January 13, 2025. Available at URL address: <https://www.cms.gov/regulations-and-guidance/guidance/manuals/internet-only-manuals-ioms-items/cms012673>
3. Centers for Medicare and Medicaid Services. Medicare Benefit Policy Manual. Chapter 15. Covered Medical and Other Health Services. Rev. 13108; Issued 04-11-25. Accessed August 5, 2025. Available at URL address: <https://www.cms.gov/regulations-and-guidance/guidance/manuals/internet-only-manuals-ioms-items/cms012673>
4. Centers for Medicare and Medicaid Services. Medicare Benefit Policy Manual. Chapter 16. General Exclusions from Coverage. Rev.1311; Issued 12-20-24. Accessed August 5, 2025. Available at URL address: <https://www.cms.gov/regulations-and-guidance/guidance/manuals/internet-only-manuals-ioms-items/cms012673>

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