

## UPDATE - Billing for H0005 and H0006

This MITS Bits is an update to the February 8, 2019 communication regarding MUEs for H0005 and H0006.

Effective April 26, 2019, MITS has been updated to remove the MUEs for H0005 and H0006 for substance use disorder agencies (provider type 95). Claims can now be submitted for these codes with multiple units per detail line for services rendered back to January 1, 2019. Keep in mind services prior to January 1, 2019 could always be reported with several units per line, so no change was needed for time periods prior to 1-1-2019.

### Next steps:

#### **Claims that have been denied due to MUE edit:**

- Fee for service claims that have been denied must be resubmitted to MITS.

#### **Claims not yet submitted:**

- Fee for service claims can now be submitted to MITS.

### Prior February 8th MITS Bits:

Effective January 1, 2019, CMS implemented new Medically Unlikely Edits (MUEs) for three (3) HCPCS codes that are currently being used by substance use disorder providers (MITS provider type 95).

### New MUEs:

- H0005 SUD group counseling
- H0006 SUD case management
- H0015 SUD intensive outpatient (IOP) and partial hospitalization (PH)

### H0015

Ohio Medicaid utilizes this code for both IOP and PH as a per diem. Therefore, the MUE will have no effect and providers can continue to bill for these services as they have been under BH Redesign.

### H0005 and H0006

Ohio Medicaid has these codes set up to bill in 15-minute units. These codes are typically rendered more than 15 minutes at a time, so ODM has instructed the managed care plans not to apply these MUEs to their claims system. Ohio Medicaid will continue to have these codes set up as 15-minute units and is making necessary changes in MITS to allow providers to bill multiple units without applying a MUE.

### Next steps:

#### **Claims that have been denied due to MUE edit:**

- **Managed care claims** - If a claim for January/February 2019 date of service has been denied due to the MUE, the managed care plans will re-process the affected claims. **There is no action needed on behalf of the provider.**

- **Fee for service** - If the denial was for a MITS fee-for-service claim, please continue to hold these claims as MITS automatically added the MUEs and has not yet been re-configured to remove the MUE. Once configuration is complete, these claims can be re-submitted with multiple units as they were prior to implementation of this MUE.

**Claims not yet submitted:**

- **Managed care claims** - Any new claims for these services can now be submitted to the managed care plans and the MUEs will not cause the claims to deny.
- **Fee for service** - MITS is not yet ready to process these claims, so please continue to hold these claims until you receive further notification from ODM.