

**UPDATE: Provider Financial Stabilization Program for Child MH/SUD Residential and PRTF Services** (initial Provider News posting on April 7).

Due to the COVID outbreak, Alliance Health is committed to providing financial support for our Medicaid funded Child Residential Services. The rates are specifically to support direct care staff and families, increased expenses to meet children’s’ education and nutrition needs during extended school closure and COVID related supplies. Each level of service has a Scope of Work to clarify those expectations.

**Alliance is extending the date of the rate enhancement thru June 30, 2020 for the Child MH/SUD Residential and PRTF services.** The table below outlines the rate increase per level of care along with the associated procedure codes.

| CODE TABLE   |                |                             |
|--|----------------|-----------------------------|
| Level of Care  | Procedure Code | COVID 90 Day Rate Increase  |
| <b>PRTF</b>  | RC 911         | 15%(based on provider rate) |
|  |                | \$109.49                    |
|  | S5145          | \$218.28                    |
|  | S5145 22 HA    | \$131.75                    |
|  | S5145 22 Z1    | \$222.00                    |
| <b>Therapeutic Foster Care, IAFT, Enhanced TFC, IDD/MH TFC</b> | S5145 22 Z2    |                             |
|  |                |                             |
|  |                |                             |
| <b>Level II</b>  | H2020          | \$151.57                    |
| <b>Level III &amp; IV</b>                                      | H0019 HK       | \$378.85                    |
|  | H0019 HQ       | \$279.46                    |
|  | H0019 TJ       | \$227.70                    |
| <b>Rapid Response</b>  | S5145 22 Z3    | \$260.00                    |

## Important Information regarding State Funded Residential providers

Due to the COVID outbreak, Alliance Health is committed to providing financial support for our State Funded Residential Services. The rates are specifically to support direct care staff and increased facility related costs due to COVID. These rates are in effect from June 1-June 30, 2020.

There are some State Funded specialized residential services that are not included in the grid below, but will be notified individually for their program specific enhanced rate. Individual agencies impacted by those exceptions will be notified by their Provider Network Development Specialist.

| CODE TABLE            |                |           |
|-----------------------|----------------|-----------|
| Level of Care         | Procedure Code | June Rate |
| Group Living High     | YP780          | \$162.74  |
| Group Living Moderate | YP770          | \$86.80   |
| Group Living Low      | YP760          | \$63.58   |
| Family Living Low     | YP740          | \$57.50   |
| Supervised Living Low | YP710          | \$33.26   |
| Supervised Living-2   | YM812          | \$186.29  |

## UPDATE ON TELEPHONIC CODES

The below telephonic codes will be extended through the conclusion of the State of Emergency related to COVID-19. Please note, Alliance is currently working through the setup of extending the below COVID-19 related codes and we will issue further guidance thru Provider News on when you can successfully submit billing, please continue to hold billing until this notice is issued.

| <b>Procedure Code</b> | <b>Description</b>                                  |
|-----------------------|---|
| 99441 CR              | PHONE E/M PHYS/QHP 5-10 MI                          |
| 99442 CR              | PHONE E/M PHYS/QHP 11-20 MIN                        |
| 99443 CR              | PHONE E/M PHYS/QHP 21-30 MIN                        |
| 98966 CR              | PHONE E/M NON-PHYS QHP 5-10 MIN                     |
| 98967 CR              | PHONE E/M NON-PHYS QHP 11-20 MI                     |
| 98968 CR              | PHONE E/M NON-PHYS QHP 21-30 MIN                    |
| 99446 CR              | INTERPROFESSIONAL CONSULTATIONS QHP TO MD 5-10 MIN  |
| 99447 CR              | INTERPROFESSIONAL CONSULTATIONS QHP TO MD 11-20 MIN |
| 99448 CR              | INTERPROFESSIONAL CONSULTATIONS QHP TO MD 21-30 MIN |
| 99449 CR              | INTERPROFESSIONAL CONSULTATIONS QHP TO MD 31 + MIN  |

## IMPORTANT INFORMATION FOR INNOVATION, TBI AND IDD PROVIDERS

The Division of Health Benefits (NC Medicaid) issued **Special Bulletins COVID-19 #75 & 76 Behavioral Health Service Flexibilities**- Innovations and TBI Waivers' Appendix K and Developmental Disability State Funded Benefit Plans. Please note, Alliance is currently working through the setup of using COVID-19 related GT and CR modifiers and we will issue further clarification and guidance by the end of next week to identify effective date to submit billing using these modifiers.

<https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-75-telehealth-and-virtual-patient-communications-clinical>

<https://medicaid.ncdhhs.gov/blog/2020/05/01/special-bulletin-covid-19-76-telehealth-and-virtual-patient-communications-clinical>