

Mental Health/Substance Use Disorder (MH/SUD) Residential/Community Based/Enhanced Services

Frequently Asked Questions

Q: Do we actually bill the higher rate or the normal rate without the CR modifier?

A: The rate does not change for outpatient therapy, E & M (medication management), and enhanced services. The modifiers will let providers accurately reflect how the service was delivered.

Q: Will Alliance be doing another provider stabilization payment for May?

A: At this time, Alliance is not planning a stabilization payment for May. As the situation requires and as we're evaluating data and hearing from providers, we'll consider taking other steps if it appears there is significant jeopardy to providers.

Q: What about the rate enhancements for S5145 (residential level II)? I have a notice that the rate enhancements are effective 4/1/2020. How do we submit billing for this?

A: Submit billing using the normal process, and bill the higher rate effective 4/1/2020.

Q: Do we go ahead and use the GT CR for outpatient therapy now or wait until further notification?

A: Providers will be notified via Provider News when to start using the modifiers with the codes. Alliance will use a future start date in order to have some time for providers to adjust billing systems. Included in the notification will be the codes and modifiers to be utilized.

Update 5/12/2020: Per Provider News on 5/11/2020, Providers **will be required** to utilize the codes/modifiers for any of the service flexibilities that are being provided with service dates starting on and after May 23, 2020. HOWEVER, the codes are currently active in Alpha and providers can choose to use the codes prior to May 23, 2020, as their billing systems allow.

<https://www.alliancehealthplan.org/provider-news/guidance-for-gt-cr-modifiers/>