

Division of Alcohol and Substance Abuse (DASA) Services

HFS Managed Care Billing Guidelines 2016

H6751_ICP_16_44616_PR 06272016

Together, all the way.®



Confidential, unpublished property of Cigna. Do not duplicate or distribute. Use and distribution limited solely to authorized personnel. © 2016 Cigna

Agenda

- HFS Managed Care Billing and Encounter Reporting Guidelines Notice
- Services Overview
- General Claims Submission Requirements
- Diagnosis Codes
- Professional Claims
- Institutional Claims
- Additional Institutional Claims Submission Requirements
- Cigna-HealthSpring Claim Submission Methods & Timely Filing
- Cigna-HealthSpring Important Phone Numbers
- Cigna-HealthSpring Websites
- Questions & Answers



HFS Managed Care Billing and Encounter Reporting Guidelines

This guide establishes the standardized billing codes and claims submission processes to be utilized across the HFS contracted Managed Care Plans for the reimbursement of services rendered by the Division of Alcohol and Substance Abuse (DASA) certified providers. The HFS encounter claims system will accept encounter claims from the Managed Care Plans in line with the standardized claims submission requirements outlined in this guide.

- Effective 07/01/2016 (services rendered on or after July 1, 2016)
- This presentation is applicable to plans for Cigna-HealthSpring SpecialCare of Illinois and Cigna-HealthSpring CarePlan of Illinois.



Services Overview

The required DASA services covered by HFS contracted Managed Care Plans are listed in Table 1 below, along with the corresponding ASAM level(s) and general billing structure overview:

Table 1. DASA Services Overview

Service Name	ASAM Level(s)	Claim Type	Unit	Per Unit Rate	Authorization Required by Cigna- HealthSpring
Admission and Discharge Assessment	All levels	837P / 1500	¼ hour	\$16.32	No
Psychiatric Evaluation	All Levels	837P / 1500	Event	\$81.31	No
Psychotropic Medication Monitoring	All Levels	837P / 1500	¼ hour	\$15.53	No
Individual – Therapy/Counseling, Substance Abuse	Level I	837P / 1500	¼ hour	\$15.53	No
Group – Therapy/Counseling, Substance Abuse	Level I	837P / 1500	¼ hour	\$5.87	No
Individual – Intensive Outpatient, Substance Abuse	Level II	837P / 1500	¼ hour	\$15.53	No
Group – Intensive Outpatient, Substance Abuse	Level II	837P / 1500	¼ hour	\$5.87	No
Rehabilitation – Adult (age 21+)	Level III.5	837I / UB-04	Per Diem	Provider Specific	Yes
Rehabilitation – Child (age 20 or under)	Level III.5	837I / UB-04	Per Diem	Provider Specific	Yes
Adolescent Residential	Level III.5	837I / UB-04	Per Diem	Provider Specific	Yes
Detoxification	Level III.7D	837I / UB-04	Per Diem	Provider Specific	Yes



General Claims Submission Requirements

1. DASA services may only be rendered from a site that is certified by the Department of Human Services' Division of Alcohol and Substance Abuse (DASA). The NPI providers bill Managed Care Plans under must correspond to a DASA certified site.
2. Providers offering both substance abuse and mental health services from the same site and have separate NPI numbers; must use the NPI that is approved for the service. Please contact Provider Relations Representative to verify that the additional NPI is credentialed.
3. All outpatient DASA services are to be submitted on an 837P / 1500 claim. All inpatient/residential DASA services are to be submitted on an 837I claim / UB-04, in line with the Claim Type listed in Table 1.



Diagnosis Codes

- A primary diagnosis code is required on all DASA claims. Acceptable primary diagnosis codes for DASA claims are listed below in Table 2:

Table 2. Acceptable Primary Diagnosis Codes for DASA Services

ICD- 10
(services rendered on or after October 1, 2015)

F10 – F19.99



Professional Claims

- The following billing codes (Table 3) will be accepted for all outpatient DASA services on an 837P / 1500 claim:

Table 3. DASA 837P / 1500 Billing Codes

Service Name	Billing Code	Modifier	Taxonomy	Unit	Per Unit Rate	Place of Service	Authorization Required by Cigna-HealthSpring
Admission and Discharge Assessment	H0002		261QR0405X, 276400000X	¼ hour	\$16.32	21, 22, 55, 57	No
Psychiatric Evaluation	90791			Event	\$81.31	21, 22, 55, 57	No
Psychotropic Medication Monitoring	H2010			¼ hour	\$15.53	21, 22, 55, 57	No
Individual – Therapy/Counseling, SA	H0004			¼ hour	\$15.53	22, 57	No
Group – Therapy/Counseling, SA	H0005			¼ hour	\$5.87	22, 57	No
Individual – Intensive Outpatient, SA	H0004	TF		¼ hour	\$15.53	22, 57	No
Group – Intensive Outpatient, SA	H0005	TF		¼ hour	\$5.87	22, 57	No



Institutional Claims

- The following billing codes (Table 4) will be accepted for all institutional/residential DASA services on an 837I / UB-04 claim:

Table 4. DASA 837I /UB-04 Billing Codes

Service Name	Revenue Code	Billing Code	Modifier	Taxonomy	Type of Bill	Authorization Required by Cigna-HealthSpring
Rehabilitation – Adult (age 21+)	944 or 945	H0047		324500000X, 3245S0500X	086X, 089X	Yes
Rehabilitation – Child (age 20 or under)	944 or 945	H0047	HA			Yes
Adolescent Residential	944 or 945	H2036				Yes
Detoxification	944 or 945	H0010				Yes



Additional Institutional Claims Submission Requirements

1. DASA residential / institutional services are to be billed as one global rate on a single 837I / UB-04 claim – (room and board costs) and treatment costs should **not** be split nor should they be billed to the MCOs separately. Revenue codes 128 and 1002 are no longer in use.
2. A Value Code of 80 is required on all 837I / UB-04 claims for the number of covered treatment days.
3. If a member is being dually treated for both alcohol and substance abuse, the primary admitting diagnosis code should be utilized to determine the appropriate Revenue Code (944 or 945) for the claim.



Cigna-HealthSpring Claim Submission Methods

Electronic Submission:

Through clearinghouse Payor ID: 52192

Paper Submission:

- ***Claims Mailing Address***

Cigna-HealthSpring

PO Box 981804

El Paso, TX 79998

Special Instructions:

- Claims should be submitted on the correct CMS form, original forms and not photocopied.
- There should be no hand writing or markings on the form as the system will not accept the claim.
- Corrected claims can be resubmitted via paper, by entering a “7” on box 22 as the Resubmission code, followed by the original claim number in the Original Reference Number. The original claim number can be found on the original Explanation of Payment.
- Corrected claims can also be submitted electronically, by submitting with a “7” as the frequency of submission on the bill type.
- For additional billing resources, visit <http://www.nucc.org/> and <http://www.nubc.org/>



Timely Filing

(based on standard contract)

Type of Claim	Timely Filing Policy
Initial Filing	120 days from the date of service
Secondary Filing	120 days from the date on the Primary carrier's Explanation of Payment (EOP)
Filed to Incorrect Carrier	120 days from the denial date on the incorrect carrier's Explanation of Payment (EOP)
Corrected Claims	180 days from the date on Cigna-HealthSpring's Explanation of Payment (EOP)



Important Phone Numbers

Cigna-HealthSpring Contacts	Phone Number
Behavioral Health Services and Substance Abuse	866-780-8546 866-949-4846 (fax)
Provider Services	866-486-6065
Customer Services	866-487-4331
Pharmacy	800-331-6293
DentaQuest (Dental)	800-259-3081
Superior Vision (Vision)	866-819-4298
First Transit (Transportation)	855-300-9126
Network Operations / Provider Relations	312-548-2002



Cigna-HealthSpring Websites

Cigna-HealthSpring Medicare-Medicaid Plan (MMP) and Integrated Care Program (ICP) websites are available at:

Integrated Care Program: www.specialcareil.com/ICproviderres

Medicare Medicaid Plan: <http://careplanil.com/ILCareproviderres>

The websites are a great tool and allows providers to download additional, more informative resources, such as:

- ✓ Cigna-HealthSpring Provider Manual
- ✓ Cigna-HealthSpring Provider Directory
- ✓ National Clinical Practice Guidelines
 - ✓ Referral and Authorization Forms
 - ✓ Provider Notices and Updates
 - ✓ Provider Newsletters



Questions & Answers



All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including HealthSpring of Tennessee, Inc. The Cigna name, logos, and other Cigna marks are owned by Cigna Intellectual Property, Inc. Cigna-HealthSpring on Illinois is a health plan that contracts with both Medicare and Illinois Medicaid to provide benefits of both programs to enrollees.

