IHCP banner page

INDIANA HEALTH COVERAGE PROGRAMS

BR202137

SEPTEMBER 14, 2021

IHCP clarifies that scope of occupational therapy practice may include behavioral health services

The Indiana Health Coverage Programs (IHCP) covers occupational therapy services for eligible IHCP members when services are provided in accordance with *Indiana Administrative Code 405 IAC 5-22-11*. The IHCP supports including occupational therapists on a substance use disorder (SUD) or behavioral health treatment team, when the occupational therapists provide services within their scope of licensure.



The IHCP is addressing guidance in 405 IAC 5-22-11-5, which says IHCP reimbursement is "not available for occupational therapy psychiatric services." However, regarding occupational therapists delivering healthcare services to members with behavioral health diagnoses, *Indiana Code IC 25-23.5* says the practice of occupational therapy includes "services that are provided to promote health and wellness, prevent disability, preserve functional capabilities, prevent barriers for occupational performance from occurring, and enable or improve performance in everyday activities." To clarify, the scope of occupational therapy practice allows the provision of psychosocial interventions, and the IHCP supports including occupational therapy in the treatment plan of members receiving behavioral health treatment services.

IHCP requests providers to resubmit claims that paid incorrectly for waiver services with rate increases

The Indiana Health Coverage Programs (IHCP) recently announced rate increases for service on the following waivers:

- Aged and Disabled (A&D) Waiver
- Community Integration and Habilitation (CIH) Waiver
- Family Supports Waiver (FSW)
- Traumatic Brain Injury (TBI) Waiver

A complete list of the services, procedure codes and rates were published in *IHCP Banner Page BR202133*. That information is included below for reference in <u>Table 1</u> and <u>Table 2</u>.



The rate increases, as announced in *BR202133*, are effective retroactively for fee-for-service (FFS) claims with dates of service (DOS) on or after **July 1, 2021**.

Also stated in *BR202133*, claims for the waiver services with DOS from July 1, 2021, through Aug. 17, 2021, that paid incorrectly would be mass adjusted. However, the IHCP is correcting that statement. Those claims will not be mass adjusted and providers should resubmit the claims.

continued

Beginning immediately, providers should resubmit FFS claims for the A&D and TBI waiver services in Table 1 with DOS from July 1, 2021, through Aug. 12, 2021, for reimbursement consideration. Claims for those services with DOS after Aug. 12, 2021, were reimbursed correctly for the increased rates. Providers should resubmit FFS claims for the FSW and CIH Waiver services in Table 2 with DOS from July 1, 2021, through Aug. 17, 2021, for reimbursement consideration. Claims resubmitted beyond the original filing limit must include a copy of this banner page as an attachment and must be resubmitted within 180 days of the banner page's publication date.

BR202137

Reimbursement, prior authorization (PA) and billing information applies to services delivered under the FFS delivery system. Individual managed care entities (MCEs) establish and publish reimbursement, PA and billing criteria within the managed care delivery system. Questions about managed care billing and PA should be directed to the MCE with which the member is enrolled.

Table 1 - Reimbursement rate increases for A&D and TBI Waiver services, effective for claims with DOS on or after July 1, 2021

| Service | Procedure code | Modifier 1 | Modifier 2 | Modifier 3 | Old rate | New rate | Notes |
|--------------------------------|----------------|------------|------------|------------|------------|------------|---------|
| Assisted Living, Level 1 | T2031 | U7 | U1 | _ | \$72.52 | \$75.35 | Daily |
| Assisted Living, Level 2 | T2031 | U7 | U2 | - | \$80.52 | \$83.68 | Daily |
| Assisted Living, Level 3 | T2031 | U7 | U3 | - | \$93.20 | \$96.85 | Daily |
| Assisted Living, Level 1 | T2031 | U7 | U1 | UA | \$2,153.84 | \$2,237.90 | Monthly |
| Assisted Living, Level 2 | T2031 | U7 | U2 | UA | \$2,391.44 | \$2,485.30 | Monthly |

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

COPIES OF THIS PUBLICATION

If you need additional copies of this publication, please download them from the Banner Pages page of the IHCP provider website at in.gov/medicaid/providers.

TO PRINT

A printer-friendly version of this publication, in black and white and without photos, is available for your convenience.

SIGN UP FOR IHCP EMAIL NOTIFICATIONS

To receive email notices of IHCP publications, subscribe by clicking the blue subscription envelope or sign up from the IHCP provider website at in.gov/medicaid/providers.

continued

Table 2 – Reimbursement rate increases for FSW and CIH Waiver services, for claims with DOS on or after July 1, 2021

| Service | Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description procedure modified | FSW old rate | FSW new rate | CIH old rate | CIH new rate | Notes |
|--|-------|------------|------------|------------|------------|---|-----------------|-----------------|-----------------|-----------------|----------|
| Adult Day Services, Level 1 | S5101 | U7 | U5 | U1 | | U7=Waiver U5=DD U1=Level 1 | \$23.05 | \$26.28 | \$23.05 | \$26.28 | Half Day |
| Adult Day Services, Level 2 | S5101 | U7 | U5 | U2 | | U7=Waiver U5=DD U2=Level 2 | \$30.24 | \$34.47 | \$30.24 | \$34.47 | Half Day |
| Adult Day Services, Level 3 | S5101 | U7 | U5 | U3 | | U7=Waiver U5=DD U3=Level 3 | \$36.00 | \$41.04 | \$36.00 | \$41.04 | Half Day |
| Adult Day Services, 1/4 Hour, Level 1 | S5100 | U7 | U5 | U1 | | U7=Waiver U5=DD U1=Level 1 | \$1.45 | \$1.65 | \$1.45 | \$1.65 | 15 Min |
| Adult Day Services, 1/4 Hour, Level 2 | S5100 | U7 | U5 | U2 | | U7=Waiver U5=DD U2=Level 2 | \$1.89 | \$2.15 | \$1.89 | \$2.15 | 15 Min |
| Adult Day Services, 1/4 Hour, Level 3 | S5100 | U7 | U5 | U3 | | U7=Waiver U5=DD OASIS U3=Level 3 | \$2.25 | \$2.57 | \$2.25 | \$2.57 | 15 Min |
| Day Habilitation, Individual | T2020 | U7 | U5 | | | U7=Waiver U5=DD | \$24.85 | \$28.33 | \$24.85 | \$28.33 | Hour |
| Day Habilitation, Small Group | T2020 | U7 | U5 | U2 | | U7=Waiver U5=DD U2=Small | \$8.90 | \$10.15 | \$8.90 | \$10.15 | Hour |

Table 2 – Reimbursement rate increases for FSW and CIH Waiver services, for claims with DOS on or after July 1, 2021 (continued)

| Service | Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description procedure modified | FSW old rate | FSW new rate | CIH old rate | CIH new rate | Notes |
|-----------------------------------|-------|------------|------------|------------|------------|----------------------------------|-----------------|-----------------|-----------------|-----------------|-------|
| Day Habilitation, Medium Group | T2020 | U7 | U5 | UA | | U7=Waiver U5=DD UA=Medium | \$4.96 | \$5.65 | \$4.96 | \$5.65 | Hour |
| Day Habilitation, Large Group | T2020 | U7 | U5 | UB | | U7=Waiver U5=DD UB=Large | \$3.15 | \$3.59 | \$3.15 | \$3.59 | Hour |
| Extended Services | T2025 | U7 | U5 | UA | | U7=Waiver U5=DD UA=Agency | \$36.96 | \$42.13 | \$36.96 | \$42.13 | Hour |
| Facility Based Support | T1020 | U7 | U5 | UA | | U7=Waiver U5=DD UA=Agency | \$1.94 | \$2.21 | \$1.94 | \$2.21 | Hour |
| Participant Assistance and Care | T2033 | U7 | U5 | | | U7=Waiver U5=DD | \$24.40 | \$27.82 | | | Hour |
| Prevocational 2:1 | T2015 | U7 | U5 | U2 | | U7=Waiver U5=DD U2=Level 2 | \$8.90 | \$10.15 | \$8.90 | \$10.15 | Hour |
| Prevocational 4:1 | T2015 | U7 | U5 | U4 | | U7=Waiver U5=DD U4=Level 4 | \$8.90 | \$10.15 | \$8.90 | \$10.15 | Hour |
| Prevocational 6:1 | T2015 | U7 | U5 | U6 | | U7=Waiver U5=DD U6=Level 6 | \$4.96 | \$5.65 | \$4.96 | \$5.65 | Hour |

BR202137 Table 2

Table 2 – Reimbursement rate increases for FSW and CIH Waiver services, for claims with DOS on or after July 1, 2021 (continued)

| Service | Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description procedure | FSW old rate | FSW new rate | CIH old rate | CIH new rate | Notes |
|---|-------|------------|------------|------------|------------|-----------------------------------|-----------------|-----------------|-----------------|-----------------|-------|
| Prevocational 8:1 | T2015 | U7 | U5 | UA | | U7=Waiver U5=DD UA=Level 8 | \$4.96 | \$5.65 | \$4.96 | \$5.65 | Hour |
| Prevocational 10:1 | T2015 | U7 | U5 | UB | | U7=Waiver U5=DD UB=Level 10 | \$4.96 | \$5.65 | \$4.96 | \$5.65 | Hour |
| Prevocational 12:1 | T2015 | U7 | U5 | UC | | U7=Waiver U5=DD UC=Level 12 | \$3.15 | \$3.59 | \$3.15 | \$3.59 | Hour |
| Prevocational 14:1 | T2015 | U7 | U5 | UD | | U7=Waiver U5=DD UD=Level 14 | \$3.15 | \$3.59 | \$3.15 | \$3.59 | Hour |
| Prevocational 16:1 | T2015 | U7 | U5 | U9 | | U7=Waiver U5=DD U9=Level 16 | \$3.15 | \$3.59 | \$3.15 | \$3.59 | Hour |
| Residential Habilitation Services, Level 1 | T2016 | U7 | U5 | UA | | U7=Waiver U5=DD UA=Agency | n/a | n/a | \$26.15 | \$29.81 | Hour |
| Residential Habilitation, Level 2 | T2016 | U7 | U5 | | | U7=Waiver U5=DD | n/a | n/a | \$21.97 | \$25.05 | Hour |

Table 2 – Reimbursement rate increases for FSW and CIH Waiver services, for claims with DOS on or after July 1, 2021 (continued)

| Service | Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description procedure | FSW old rate | FSW new rate | CIH old rate | CIH new rate | Notes |
|--------------------------------|-------|------------|------------|------------|------------|---|-----------------|-----------------|-----------------|-----------------|-------|
| * RHS Daily Level 1, Algo 3 | T2016 | U7 | U5 | UN | UA | U7=Waiver U5=DD UN=2 Patients UA=Level 1 | n/a | n/a | \$171.33 | \$195.32 | Daily |
| RHS Daily Level 2, Algo 4 | T2016 | U7 | U5 | UN | UB | U7=Waiver U5=DD UN=2 Patients UB=Level 2 | n/a | n/a | \$241.63 | \$275.46 | Daily |
| RHS Daily Level 3, Algo 5 | T2016 | U7 | U5 | UN | UC | U7=Waiver U5=DD UN=2 Person UC=Level 3 | n/a | n/a | \$263.59 | \$300.49 | Daily |
| RHS Daily Level 4, Algo 3 | T2016 | U7 | U5 | UP | UA | U7=Waiver U5=DD UP=3 Person UA=Level 4 | n/a | n/a | \$171.33 | \$195.32 | Daily |
| RHS Daily Level 5, Algo 4 | T2016 | U7 | U5 | UP | UB | U7=Waiver U5=DD UP=3 Person UB=Level 5 | n/a | n/a | \$221.85 | \$252.91 | Daily |
| RHS Daily Level 6, Algo 5 | T2016 | U7 | U5 | UP | UC | U7=Waiver U5=DD UP=3 Person UC=Level 6 | n/a | n/a | \$241.63 | \$275.46 | Daily |

^{*} RHS is Residential Habilitation and Support, and has been used interchangeably with the term, Residential Habilitation Services

Table 2 – Reimbursement rate increases for FSW and CIH Waiver services, for claims with DOS on or after July 1, 2021 (continued)

| Service | Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description procedure | FSW old rate | FSW new rate | CIH old rate | CIH new rate | Notes |
|------------------------------|-------|------------|------------|------------|------------|---|-----------------|-----------------|-----------------|-----------------|--------|
| RHS Daily Level 7, Algo 3 | T2016 | U7 | U5 | UQ | UA | U7=Waiver U5=DD UQ=4 Person UA=Level 7 | n/a | n/a | \$160.35 | \$182.80 | Daily |
| RHS Daily Level 8, Algo 4 | T2016 | U7 | U5 | UQ | UB | U7=Waiver U5=DD UQ=4 Person UB=Level 8 | n/a | n/a | \$206.47 | \$235.38 | Daily |
| RHS Daily Level 9, Algo 5 | T2016 | U7 | U5 | UQ | UC | U7=Waiver U5=DD UQ=4 Person UC=Level 9 | n/a | n/a | \$219.66 | \$250.41 | Daily |
| Respite Care | S5151 | U7 | U5 | | | U7=Waiver U5=DD | \$26.15 | \$29.81 | \$26.15 | \$29.81 | Hour |
| Respite Nursing Care, RN | T1005 | U7 | U5 | TD | | U7=Waiver U5=DD TD=RN | \$7.79 | \$8.88 | \$7.79 | \$8.88 | 15 Min |
| Respite Nursing Care, LPN | T1005 | U7 | U5 | TE | | U7=Waiver U5=DD TE=LPN | \$5.91 | \$6.74 | \$5.91 | \$6.74 | 15 Min |

Table 2 – Reimbursement rate increases for FSW and CIH Waiver services, for claims with DOS on or after July 1, 2021 (continued)

| Service | Code | Modifier 1 | Modifier 2 | Modifier 3 | Modifier 4 | Description procedure modified | FSW old rate | FSW new rate | CIH old rate | CIH new rate | Notes |
|-------------------------|-------|------------|------------|------------|------------|----------------------------------|-----------------|-----------------|-----------------|-----------------|---|
| Transportation | T2002 | U7 | U5 | | | U7=Waiver U5=DD | \$5.25 | \$5.99 | \$5.25 | \$5.99 | Per Trip; 2 Trips/ Day; \$2,625/Year |
| Transportation, Level 2 | T2002 | U7 | U5 | U2 | | U7=Waiver U5=DD U2=Level 2 | \$21.00 | \$23.94 | \$21.00 | \$23.94 | Per Trip; 2 Trips/ Day; \$5,250/Year |
| Transportation, Level 3 | T2002 | U7 | U5 | U3 | | U7=Waiver U5=DD U3=Level 3 | \$42.00 | \$47.88 | \$42.00 | \$47.88 | U7=Waiver U5=DD OASIS U3=Level 3 |
| Workplace Assistance | T1020 | U7 | U5 | | | U7=Waiver U5=DD | \$27.69 | \$31.57 | \$27.69 | \$31.57 | Hour |