

PROVIDER BULLETIN

PROVIDER INFORMATION



March 1, 2022

Billing Changes for Residential Treatment Centers and 1115 Waiver Providers for Minnesota Health Care Programs

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) is implementing billing changes for Residential Treatment Centers (RTC), 1115 Waiver and Withdrawal Management providers effective May 1, 2022. Blue Cross is updating the requirements to be consistent with the Minnesota Department of Human Services (DHS).

Effective May 1, 2022, inpatient RTC, 1115 Waiver and Withdrawal Management claims must be billed using the appropriate value code to indicate level of service as published by DHS on the **Residential 5-digit Value Codes for Billing Direct Access** (https://mn.gov/dhs/assets/res-value-codes-billing-direct-access_tcm1053-477386.pdf). Providers are advised that they should not bill with a HCPCS code/modifier combination beginning May 1, 2022, based on first date of service on the claim.

Inpatient services provided prior to May 1, 2022, must be billed using the HCPCS code/modifier combination to identify the level of intensity for accurate reimbursement. Residential Treatment Centers providing services to children and adolescents are advised that the use of modifier HA - Child/Adolescent program is defined as a member under the age of 18 for claims processing.

If claims have been submitted using the Value Codes prior to the effective date of May 1, 2022, providers are advised to submit replacement claims using the HCPCS code/modifier combination.

Outpatient services will continue to require the HCPCS code/modifier combination based on the services provided to the members.

Products Impacted

This information applies to the following Minnesota Health Care Programs:

- Families and Children (formerly Prepaid Medical Assistance Program)
- MinnesotaCare

Questions?

If you have questions, please contact provider services at **1-866-518-8448**.