

Managed long term services and supports (MLTSS)

Provider updates

Jennifer Langer Jacobs, VP LTSS Operations

Important updates

- Authorization waiver extension
- Assisted Living (ALP, ALR and CPCH) – rate changes
- Personal emergency response system (PERS) – code changes
- Traumatic brain injury (TBI) services – modifier updates
 - Cognitive therapy
 - Behavioral management
 - Modifier 59 on TBI therapies
- Transition of members to accredited patient care assistants (PCA)
- Coordination of benefits
- Patient liability deduction – residential services

Authorization waiver extended

Please be advised that the previous authorization waiver that was scheduled to end on November 1, 2014, has been extended to December 31, 2014.



Authorization waiver extended (cont.)

MLTSS Service	Code	Modifier 1	Modifier 2	Authorization rule
Adult family care	S5140			Waive authorization July 1, 2014 through February 28, 2015
Assisted living services assisted living residence (ALR)	T2031			Waive authorization July 1, 2014 through February 28, 2015
Assisted living services comprehensive personal care home (CPCH)	T2031	U1		Waive authorization July 1, 2014 through February 28, 2015
Assisted living program (ALP)	T2031	U2		Waive authorization July 1, 2014 through February 28, 2015
Behavior management (TBI)	H0004			Waive authorization July 1, 2014 through February 28, 2015
	H0004	HQ		Waive authorization July 1, 2014 through February 28, 2015
Cognitive therapy	T2013			Waive authorization July 1, 2014 through February 28, 2015
	T2013	HQ		Waive authorization July 1, 2014 through February 28, 2015
Cognitive therapy	97532	U4		Waive authorization November 1, 2014 through February 28, 2015
	97532	U5		Waive authorization November 1, 2014 through February 28, 2015
Cognitive therapy	97532	U4	59	Waive authorization November 1, 2014 through February 28, 2015
	97532	U5	59	Waive authorization November 1, 2014 through February 28, 2015

*Please note updated code change

Authorization waiver extended (cont.)

MLTSS Service	Code	Modifier 1	Modifier 2	Authorization rule
Community residential services (CRS)	T2033			Waive authorization July 1, 2014 through February 28, 2015
	T2033	TF		Waive authorization July 1, 2014 through February 28, 2015
	T2033	TG		Waive authorization July 1, 2014 through February 28, 2015
Home based supportive care	S5130			Waive authorization July 1, 2014 through February 28, 2015
	S5130	HQ		Waive authorization July 1, 2014 through February 28, 2015
	S5130	U1		Waive authorization July 1, 2014 through February 28, 2015
	S5130	U2		Waive authorization July 1, 2014 through February 28, 2015
Home delivered meals	S5170			Waive authorization July 1, 2014 through February 28, 2015
Medication dispensing device (set up)	T1505			Waive authorization July 1, 2014 through February 28, 2015
Medication dispensing device (monthly monitoring)	S5185			Waive authorization July 1, 2014 through February 28, 2015
MLTSS PCA (individual - par provider)	T1019			Waive authorization July 1, 2014 through February 28, 2015
MLTSS PCA (group - par provider)	S5125			Waive authorization July 1, 2014 through February 28, 2015
MLTSS PCA (individual- non-par provider)	S9122			Waive authorization July 1, 2014 through February 28, 2015
MLTSS PCA (group - non-par provider)	S9122	HQ		Waive authorization July 1, 2014 through February 28, 2015

*Please note updated code change

Authorization waiver extended (cont.)

MLTSS Service	Code	Modifier 1	Modifier 2	Authorization rule
Nursing facility services (custodial)	Revenue code 0100			Waive authorization July 1, 2014 through February 28, 2015
	SCNF - Revenue code 0100			Waive authorization July 1, 2014 through February 28, 2015
Occupational therapy (group and individual)	97535	U2	59	Waive authorization July 1, 2014 through February 28, 2015
	97535	U3	59	Waive authorization July 1, 2014 through February 28, 2015
	97535	U4	59	Waive authorization July 1, 2014 through February 28, 2015
	97535	U5	59	Waive authorization July 1, 2014 through February 28, 2015
Occupational therapy (group and individual)	97535	U2	59	Waive authorization July 1, 2014 through February 28, 2015
	97535	U3	59	Waive authorization July 1, 2014 through February 28, 2015
	97535	U4	59	Waive authorization July 1, 2014 through February 28, 2015
	97535	U5	59	Waive authorization July 1, 2014 through February 28, 2015
Personal emergency response system (PERS: set up)	S5160			Waive authorization July 1, 2014 through February 28, 2015

*Please note updated code change

Authorization waiver extended (cont.)

MLTSS service	Code	Modifier 1	Modifier 2	Authorization rule
Personal emergency response system (PERS: monthly monitoring)	S5161			Waive authorization July 1, 2014 through February 28, 2015
	S5161	U1		Waive authorization July 1, 2014 through February 28, 2015
	S5161	U2		Waive authorization July 1, 2014 through February 28, 2015
	S5161	U3		Waive authorization July 1, 2014 through February 28, 2015
Physical therapy (group and individual)	97110	U2		Waive authorization July 1, 2014 through February 28, 2015
	97110	U3		Waive authorization July 1, 2014 through February 28, 2015
	97110	U4		Waive authorization July 1, 2014 through February 28, 2015
	97110	U5		Waive authorization July 1, 2014 through February 28, 2015
Physical therapy (group and individual)	97110	U2	59	Waive authorization July 1, 2014 through February 28, 2015
	97110	U3	59	Waive authorization July 1, 2014 through February 28, 2015
	97110	U4	59	Waive authorization July 1, 2014 through February 28, 2015
	97110	U5	59	Waive authorization July 1, 2014 through February 28, 2015

*Please note updated code change

Authorization waiver extended (cont.)

MLTSS service	Code	Modifier 1	Modifier 2	Authorization rule
Private duty nursing	T1002	UA		Waive authorization July 1, 2014 through February 28, 2015
	T1003	UA		Waive authorization July 1, 2014 through February 28, 2015
Respite (daily and hourly)	T1005			Waive authorization July 1, 2014 through February 28, 2015
	S5151			Waive authorization July 1, 2014 through February 28, 2015
NF respite	REV 0663			Waive authorization July 1, 2014 through February 28, 2015
Self directed service: PCA individual (prior)	T2025	SE		Waive authorization July 1, 2014 through February 28, 2015
Self directed service: PCA individual (new)	T2025	SE	52	Waive authorization July 1, 2014 through February 28, 2015
Self directed service: PCA group (prior)	S9122	SE		Waive authorization July 1, 2014 through February 28, 2015
Self directed service: PCA group (new)	S9122	SE	52	Waive authorization July 1, 2014 through February 28, 2015
Self directed service: home-based supportive care	T1022	SE		Waive authorization July 1, 2014 through February 28, 2015
Self directed service: chore service	S5120	SE		Waive authorization July 1, 2014 through February 28, 2015
Self directed service: non-medical transport	T2003	SE		Waive authorization July 1, 2014 through February 28, 2015

***Please note updated code change**

Authorization waiver extended (cont.)

MLTSS service	Code	Modifier 1	Modifier 2	Authorization rule
Social adult day care	S5102	U3		Waive authorization July 1, 2014 through February 28, 2015
Speech, language and hearing therapy (group and individual)	92507	U3		Waive authorization July 1, 2014 through February 28, 2015
	92508	U3		Waive authorization July 1, 2014 through February 28, 2015
	92507	U4		Waive authorization July 1, 2014 through February 28, 2015
	92508	U4		Waive authorization July 1, 2014 through February 28, 2015
Speech, language and hearing therapy (group and individual)	92507	U3	59	Waive authorization July 1, 2014 through February 28, 2015
	92508	U3	59	Waive authorization July 1, 2014 through February 28, 2015
	92507	U4	59	Waive authorization July 1, 2014 through February 28, 2015
	92508	U4	59	Waive authorization July 1, 2014 through February 28, 2015
Structured day program	S5100			Waive authorization July 1, 2014 through February 28, 2015
Supported day services	T2021			Waive authorization July 1, 2014 through February 28, 2015

*Please note updated code change

Assisted living rate changes

The state of New Jersey mandated a rate increase for all Assisted Living Programs effective July 1, 2014. Amerigroup will reprocess your claims back to that date.

Providers who submitted claims at a rate less than the amount below for dates of service after July 1, 2014, will need to resubmit claims with the corrected rate in order to be processed according to increased rate.

SERVICE	CODE	RATE
ALR	T2031	\$ 72.50
CPCH	T2031_U1	\$ 62.50
ALP	T2031_U2	\$ 52.50

Personal emergency response system (PERS) changes

The State of New Jersey made the following additions:

Service	Code
Standard landline unit	S5161
Cellular unit	S5161_U1
Cellular unit with fall detection	S5161_U2
Mobile unit	S5161_U3

Cognitive therapy

The state of New Jersey made the following change effective November 1, 2014. This will replace the previous codes for cognitive therapy.

SERVICE	CODE
Cognitive Therapy (Individual)	97532_U4
Cognitive Therapy (Group)	97532_U5

Modifier 59

Note for TBI providers: When more than one therapy is provided on the same day, provider should add modifier 59.

Please note : This is in addition to the U modifier, which identifies individual or group and maintenance or rehabilitation therapy.

For example, speech therapy and physical therapy provided in the same day would be billed as:

92507 59 U3

97110 59 U2

Home-based supportive care (HBSC)/PCA transition

- HBSC/PCA providers without PCA accreditation will not be permitted to service Amerigroup Community Care members beyond December 31, 2014.
- Please note that our network includes accredited providers only, so unaccredited providers will continue to serve members on an out-of-network basis.

Coordination of benefits

- Federal law requires that Medicaid is the payer of last resort.
- You must bill the member's primary insurance first for all MLTSS services and provide an explanation of payment (EOP) from the primary carrier with claim submission to Amerigroup.
- If the member has a primary insurer, Amerigroup must receive an EOP from the other payer for each claim until the benefit is exhausted for each calendar year.
- If the member's only other coverage is straight Medicare and the service is not a Medicare-covered code, you will not be required to submit an EOP from Medicare for payment.

Claims submission

Paper Claims Submission	Electronic
<p data-bbox="382 519 915 668">Amerigroup Community Care P.O. Box 61010 Virginia Beach, VA 23466-1010</p>	<p data-bbox="1232 519 1495 668">Emdeon 27514 Capario 28804 Availity 26375</p>

Patient pay liability

- As required for residential services, Amerigroup began deducting patient pay liability amounts provided by the State on September 26, 2014.
- The State has given us approval to initiate reprocessing of claims billed prior.
- This project will begin in mid-December and should be completed in approximately 60 days.

We are here for you

MLTSS contracting

Aisha White

Manager I Network Relations, MLTSS

Email: Aisha.White@amerigroup.com

Carol DiPrisco

Network Relations Consultant

Email: Carol.DiPrisco@amerigroup.com

Covering: Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Hunterdon, Monmouth, Morris, Ocean, Salem, Warren

Alex Valentin

Network Relations Consultant

Email: Alejandro.Valentin@amerigroup.com

Covering: Essex, Mercer, Middlesex, Passaic, Somerset, Sussex, Union

MLTSS claims

Tonya Sherrill

Manager, MLTSS Provider Liaison

Email: nj1mltssprovhelp@amerigroup.com