

This is an update about information in the provider manual. For access to the latest provider manual, go online to <https://providers.amerigroup.com/TX>.

Update to targeted case management and mental health rehabilitative services in the Dallas service delivery area

Summary of change: Beginning January 1, 2017, managed care organizations (MCOs) will be responsible for targeted case management (TCM) and mental health rehabilitative (MH Rehab) services for members in the Dallas service delivery area (SDA).

What this means to you: ValueOptions™ (also known as NorthSTAR) will no longer be responsible for services in the Dallas SDA. Beginning January 1, 2017, Amerigroup* will be responsible for TCM and MH Rehab services for Dallas STAR members. Amerigroup will also be responsible for claims processing.

Why is this change necessary?

As outlined in the 84th legislative session, NorthSTAR services will end December 31, 2016, and MCOs will be responsible for these services beginning January 1, 2017. This includes TCM and MH Rehab. Local mental health authorities and applicable behavioral health practitioners will be required to coordinate care with the member's applicable MCO. Claims will be processed by the member's MCO for these services.

What is the impact of the change?

You should expect only minor changes as you partner directly with Amerigroup for these services, claims submissions and payment processing. Existing authorizations will be honored for the 90-day transition period. The procedure codes and modifiers for TCM and MH Rehab services are as follows:

Modifiers accepted by Amerigroup:

Modifier	Modifier description
ET	Emergency treatment
HA	Child/adolescent program
HQ	Group setting
TD	RN

Note: MCOs will not be responsible for services that use modifier HZ (funded by criminal justice) because those services are excluded from the capitation.

Adult day programs:

Procedure code	Modifier 1	Modifier 2
G0177		

**Amerigroup members in the Medicaid Rural Service Area and the STAR Kids program are served by Amerigroup Insurance Company; all other Amerigroup members in Texas are served by Amerigroup Texas, Inc.*

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Medication training and support:

Procedure code	Modifier 1	Modifier 2
H0034		
H0034	HQ	
H0034	HA	
H0034	HA	HQ

Crisis intervention:

Procedure code	Modifier 1	Modifier 2
H2011		
H2011	HA	

Skills training and development:

Procedure code	Modifier 1	Modifier 2
H2014		
H2014	HQ	
H2014	HA	
H2014	HA	HQ

Psychosocial rehabilitative services:

Procedure code	Modifier 1	Modifier 2
H2017		
H2017	TD	
H2017	HQ	
H2017	HQ	TD
H2017	ET	

TCM:

Procedure code	Modifier 1	Modifier 2
T1017	TF	
T1017	TF	HA
T1017	TG	HA

Amerigroup adheres to all benefit limitations, units and ages for these services as defined in Chapter 15 of the *Uniform Managed Care Manual (UMCM)* and the *Texas Medicaid Provider Procedures Manual*. This information is outlined in the *Behavioral Health, Rehabilitation and Case Management Services* handbook. Additional TCM information can be found in the *Children's Services* handbook.

Will my contract need to be amended?

It is unlikely a contract amendment will be required for these services. Amerigroup has engaged providers as outlined in the Texas Health and Human Services Commission's *Significant Traditional Provider* list and has a robust behavioral health network in the area. If you have any questions, please do not hesitate to contact your Provider Relations representative.

I bill ValueOptions with more procedure codes and modifiers for TCM and MH Rehab than what is listed above. What will happen if I bill Amerigroup as I did ValueOptions?

Please adjust your billing requirements to match the procedure codes and modifiers listed. If you use a billing agency, please notify them of the above changes. All providers will need to bill as outlined or may receive a claim denial that would require a corrected claim.

Will Amerigroup use the *Adult Needs and Strengths Assessment* and *Child and Adolescent Needs* forms?

Yes, we will utilize these forms as required in Chapter 15 of the *UMCM*.

Do I need to populate the rendering provider information on the *CMS-1500*?

Yes, you need to provide this information. While Amerigroup understands the majority of individuals who render these services will be licensed practitioners, there may be some nonlicensed individuals who will be clinically supervised by a licensed professional. For billing purposes, licensed individuals will continue to submit the necessary rendering provider information in box 24 I/J of the *CMS-1500*. Nonlicensed individuals will not submit this information, so box 24 I/J on the *CMS-1500* can be left blank.

Does this apply to CHIP?

No, these services are applicable to Medicaid only. Amerigroup currently has Medicaid membership for STAR and STAR Kids in the Dallas SDA. STAR Kids became effective November 1, 2016, and these services will be provided by Amerigroup.

What if I need assistance?

If you have questions about this communication, received this fax in error or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at 1-800-454-3730.