

### IMPORTANT PROVIDER BILLING REMINDERS

### Maryland HealthChoice - DC Healthy Families - DC Healthcare Alliance

As you are aware, effective January 1, 2023, MedStar Family Choice (MFC) transitioned to a new vendor for the provision of certain administrative functions for our Maryland and District of Columbia health plans. Claims adjudication and payment processes were impacted by this transition.

The MedStar Family Choice Claims Department would like to provide clarification related to the following topics:

#### **Wellness Visits**

If a well-child or well-adult examination (99381 – 99385 and 99391 – 99395) results in an abnormal finding (Z00.121 or Z00.01), additional diagnosis code(s) must be assigned to identify the specific abnormal finding(s).

Wellness visits billed with an abnormal finding (Z00.121 or Z00.01) will deny if subsequent diagnoses are not submitted.

**Incorrect Billing** 



# **Correct Billing**



It's how we treat people.

<sup>\*\*</sup>Make sure diagnosis pointers are pointing to the correct ICD-10 codes.



# **Outpatient Physical Therapy / Occupational Therapy and Speech Therapy**

All claims for outpatient therapy service must report a therapy modifier (GP, GO, GN) along with the HCPCS code to indicate the treatment plan discipline (PT,OT, SLP). Also, certain HCPCS codes require certain therapy modifiers.

Please refer to the following tables for additional details:

Codes Requiring the "GN" Therapy Modifier

Code	CPT Short Descriptor	Therapy Modifier Required
92521	Evaluation of speech fluency	GN
92522	Evaluate speech production	GN
92523	Speech sound lang comprehend	GN
92524	Behavral quality analys voice	GN
92597	Oral speech device eval	GN
92607	Ex for speech device rx 1hr	GN

Codes Requiring the "GO" Therapy Modifier

Code	CPT Short Descriptor	Therapy Modifier Required
97165	Ot eval low complex 30 min	GO
97166	Ot eval mod complex 45 min	GO
97167	Ot eval high complex 60 min	GO
97168	Ot re-eval est plan care	GO

# **Codes Requiring the "GP" Therapy Modifier**

Code	CPT Short Descriptor	Therapy Modifier Required
97161	Pt eval low complex 20 min	GP
97162	Pt eval mod complex 30 min	GP
97163	Pt eval high complex 45 min	GP
97164	Pt re-eval est plan care	GP

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## **Allergy Serum Preparation Reminder**

**Allergy Serum Preparation** – As previously communicated via our provider alert dated June 29, 2020, effective August 1, 2020, claims will only be payable by MedStar Family Choice for allergy serum preparation when performed by Allergists.

## **Dialysis Facility Claims Billing Reminder**

Please be advised that there has been an identified trend where dialysis facilities are billing multiple units on dialysis revenue code 0821 with only 1 date of service. The Statement From / To is more than the Units Billed. Claims will deny if the days are not billed on separate claim lines.

For questions concerning this Provider Alert, please contact your respective Provider Relations Department:

- MFC-DC during business hours: Monday through Friday (8:00am to 5:30pm).
  Phone: 855-798-4244 Option 2. Email: <a href="mailto:mfcdc-providerrelations@medstar.net">mfcdc-providerrelations@medstar.net</a>
- MFC-Maryland during business hours: Monday through Friday (8:30am to 5:00pm). Phone: 800-905-1722 Option 2. Email: mfc-providerrelations2@medstar.net
- MFC-DC and MFC-Maryland Ancillary Contracting Department. Email: mfcancillary@medstar.net

