

Important Update on Billing Codes for Home Health PT/OT/ST Services & Behavioral Health State Enhancement Reimbursement Rate Changes

December 20, 2024

Neighborhood Health Plan of Rhode Island (Neighborhood) is notifying home health providers of two significant changes.

1. <u>Billing Codes for Home Health PT/OT/ST Services</u>

Billing requirements for physical therapy (PT), occupational therapy (OT), and speech therapy (ST) services provided in the home setting will change, retroactive to October 1, 2024.

Effective **December 26, 2024,** home health providers can no longer use S-codes and are required to use G-codes for authorization requests and billing as mandated by State legislative budget according to the Office of the Health Insurance Commissioner rate review.

On and after December 26th, claims submitted with the S-codes below will be denied.

PT/OT/ST Services Transition from Per Diem (S Codes) to Per Unit Billing (G Codes):

Previously, PT/OT/ST services were billed at a per diem rate using the following codes across all lines of business:

- S9128 Speech therapy; in the home: \$95.00 Per Diem
- S9129 Occupational therapy; in the home: \$95.00 Per Diem
- S9131 Physical therapy; in the home: \$95.00 Per Diem

The new required billing codes are based on a per unit system (15 minutes per unit), with a maximum of 8 units per day:

- G0151 Physical therapy; in the home: \$38.12 Per Unit
- G0152 Occupational therapy, in the home: \$38.12 Per Unit
- G0153 Speech therapy, in the home: \$38.12 Per Unit

Claim Impact

Starting on **December 26, 2024**, and throughout the month of January 2025, providers will begin to see retractions on their remittance advices for claims previously submitted and processed using the S codes for PT/OT/ST services rendered on or after October 1, 2024. There will be no impact on your existing PT/OT/ST authorizations.

- Medicaid/Commercial claims When providers see the retractions for the Medicaid and Commercial
 lines of business, promptly submit corrected claims in accordance with Neighborhood's electronic
 corrected claim process.
- **INTEGRITY claims** Providers will **not** see these retractions on their remittance advice. Providers should begin submitting corrected claims for all previously submitted and processed claims using Scodes for PT/OT/ST services on December 26th in accordance with Neighborhood's electronic corrected claim process.

2. Behavioral Health (BH) Enhancement Accreditation Reimbursement Increase

On December 11, 2024, Neighborhood was notified by the State of Rhode Island Department of Health and Human Services that effective October 1, 2024, those providers who received the State BH accreditation enhancement will receive an additional \$.04 reimbursement increase (to the maximum of \$0.39). The reimbursement increase will apply to service codes \$5125 and \$5130.

Effective January 16, 2025, please begin billing with the new rates, if you have not done so already. Settlements will be processed for affected providers for dates of service October 1, 2024, through January 16, 2025, in February 2025. There is no need to resubmit those claims.

For rate guidance on these changes please refer to the FY25 Medicaid Reimbursement Rate Updates.

All home health providers impacted by the coding and BH enhancement changes will be receiving an Amendment with associated Neighborhood contact information should you have any further questions.

We value your partnership in providing exceptional care to our members and appreciate your prompt attention to making these billing adjustments. Thank you for your cooperation and understanding.