

INFORMATIONAL LETTER NO. 2613-MC-FFS

DATE: July 25, 2024

TO: Assertive Community Treatment (ACT) Providers, Behavioral Health

Providers, Community Mental Health Centers (CMHCs), Crisis Response

Providers, Subacute Mental Health Providers

APPLIES TO: Managed Care (MC), Fee-for-Service (FFS)

FROM: lowa Department of Health and Human Services (HHS), Iowa Medicaid

RE: Rate Increases – Applied Behavior Analysis (ABA), Assertive Community

Treatment (ACT), Crisis Response and Subacute Services

EFFECTIVE: July 1, 2024

Provisions of the 2024 Iowa Acts, House File 2698, Section 14, Item 8, appropriated \$2,104,186.00 to increase reimbursement rates effective for mental health providers.

Applied Behavior Analysis (ABA) rates will be increased by 5.0% over the rates in place on June 30, 2024. This increase applies only when the codes listed below are billed by Provider Type 62 (Behavioral Health).

| Code | Modifier | Rate |
|-------|----------|---------|
| 97151 | HO, HP | \$35.73 |
| 97152 | HN | \$17.16 |
| 97152 | HO, HP | \$35.73 |
| 97153 | HN | \$17.16 |
| 97153 | HO, HP | \$28.59 |
| 97154 | HN | \$17.16 |
| 97154 | HO, HP | \$28.59 |
| 97155 | HO, HP | \$36.81 |



| 97156 | HN | \$17.16 |
|-------|--------|---------|
| 97156 | HO, HP | \$28.59 |
| 97157 | НО | \$8.39 |
| 97157 | HP | \$8.90 |
| 97158 | НО | \$8.39 |
| 97158 | HP | \$8.90 |
| G9012 | HO, HP | \$28.59 |

The rate for Assertive Community Treatment (ACT) will be increased by 50.291% over the rate in place on June 30, 2024. This increase applies to all providers of ACT.

| Provider Type | Code | Rate |
|-------------------------------------|-------|---------|
| Physician MD (2) | H0040 | \$83.91 |
| Community Mental Health Center (21) | H0040 | \$83.91 |
| Behavioral Health (62) | H0040 | \$83.91 |
| Assertive Community Treatment (67) | H0040 | \$83.91 |
| Physician Assistant (68) | H0040 | \$71.33 |

Crisis Response and Subacute rates will be increased by 15.0% over the rates in place on June 30, 2024. This increase applies only when the codes listed below are billed by Provider Type 80 (Crisis Response Services) or Provider Type 81 (Subacute Mental Health).

| Code | Modifier | Factor | Rate |
|-------|--------------------|--------|----------|
| 90791 | HO, U1, U2 | Х | \$111.14 |
| 90791 | HO, U1, U2 | 9 | \$118.04 |
| 90791 | SA, TD | Х | \$118.09 |
| 97091 | HP | Х | \$125.03 |
| 90791 | SA, TD | 9 | \$125.42 |
| 90791 | HP | 9 | \$132.79 |
| 90791 | AF | X | \$138.92 |
| 90791 | AF | 9 | \$147.55 |
| 90839 | HO, SA, TD, U1, U2 | X | \$98.84 |



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|-------|--------------------|-----|----------|
| 90839 | HO, SA, TD, U1, U2 | 9 | \$102.70 |
| 90839 | HP | X | \$108.31 |
| 90839 | HP | 9 | \$112.53 |
| 90939 | AF | X | \$152.94 |
| 90839 | AF | 9 | \$158.90 |
| 90840 | HO, SA, TD, U1, U2 | X | \$39.57 |
| 90840 | HO, SA, TD, U1, U2 | 9 | \$41.08 |
| 90840 | HP | X | 43.37 |
| 90840 | HP | 9 | \$45.01 |
| 90840 | AF | Х | \$61.24 |
| 90840 | AF | 9 | \$63.56 |
| H2011 | HM | 9 | \$63.25 |
| H2011 | HN | 9 | \$74.75 |
| H2011 | HO, HP, U1 | 9 | \$85.22 |
| H2011 | SA, TD | 9 | \$170.43 |
| S0201 | U3 | 9 | \$475.11 |
| S9484 | HM | 9 | \$63.25 |
| S9484 | HN | 9 | \$74.75 |
| S9484 | HO, U1 | 9 | \$85.22 |
| S9484 | HP, SA, TD | 9 | \$170.43 |
| S9485 | TF, TG | 9 | \$414.22 |
| H2013 | | 9 | \$460.00 |
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The state's contracted Managed Care Organizations (MCOs) have 30 days from the date of this letter to update their systems to reflect the increased rates. Providers should increase the billed amount on claims submitted for services delivered on or after July 1, 2024, by the percentage that applies to each service. This will allow the Fee-for-Services (FFS) and the MCOs to conduct a claim sweep and reimburse the difference between the rates in place on June 30, 2024, and the increased rates effective July 1, 2024, without the need for submission of corrected claims.

If you have questions, please contact Iowa Medicaid Provider Services or the appropriate MCO:

Iowa Medicaid Provider Services:

Phone: 1-800-338-7909



• Email: imeproviderservices@dhs.state.ia.us

Managed Care Organizations (MCOs):

Iowa Total Care:

■ Phone: 1-833-404-1061

Email: providerrelations@iowatotalcare.comWebsite: https://www.iowatotalcare.com

Molina Healthcare of Iowa:

Phone: 1-844-236-1464

• Email: iaproviderrelations@molinahealthcare.com

Website: https://www.molinahealthcare.com/providers/ia/medicaid/home.aspx

Provider Portal: https://www.availity.com/molinahealthcare

Wellpoint Iowa, Inc. (formerly Amerigroup Iowa, Inc.):

Phone: 1-833-731-2143

■ Email: <u>ProviderSolutionsIA@wellpoint.com</u>

Website: https://www.provider.wellpoint.com/iowa-provider/home