

INFORMATIONAL LETTER NO. 2299-MC-FFS

DATE:	December 22, 2021	
TO:	Integrated Health Home (IHH) Providers	
APPLIES TO:	Managed Care (MC), Fee-for-Service (FFS)	
FROM:	Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)	
RE:	IHH Billing Changes	
EFFECTIVE:	January 1, 2022	

This informational letter is the most recent in a series directed at Health Homes to explain the process for billing for Health Home Services.

Health Home providers bill the monthly per member per month (PMPM) reimbursement rate using 99490 for IHH, along with the appropriate level II modifier to identify the enrollment tier for the member and corresponding PMPM reimbursement rate for providing Health Home services.

The Governor has appropriated additional funding to address the reduction in the nonintensive care management (ICM) child PMPM reimbursement rate that went into effect July 1, 2021. Effective for dates of service beginning January 1, 2022, pediatric IHHs will be reimbursed at the rate of \$200.97 for both tier 6 (99490 TG) and tier 8 (99490 U2). IHHs will continue to include the level II modifier on the claim to indicate an ICM and Non-ICM enrollee.

The PMPM reflects the enhanced coordination service using guidelines that are published by the State. General information on how to bill the PMPM claim can be found on the IHH webpage at <u>https://dhs.iowa.gov/ime/providers/integrated-health-home</u>¹.

¹ <u>https://dhs.iowa.gov/ime/providers/integrated-health-home</u>

IHH Procedure Code 99490

Tier	Modifier	PMPM Rate
5 (Adult)	TF	\$160.46
6 (Child)	TG	\$200.97
7 (HAB ICM)	U1	\$199.09
8 (CMH ICM)	U2	\$200.97

IHHs will also continue to attest to provision of one of the six core services to the member during the month by including one or more of the informational only codes listed below on subsequent lines on the claim for payment. Additional lines will be reimbursed at \$0.00 as these codes are informational only to inform which health home services were provided that month.

Health Home Service	Informational Only Codes effective through December 31, 2021	Informational Only Codes effective January 1, 2022
Chronic Care Management	G0506	G0506
Care Coordination	G9008	G9008
Health Promotion	99439	99439
Comprehensive Transitional Care	G2065	99426
Individual & Family Support Services	H0038	H0038
Referral to Community and Social Support Services	S0281	S0281

Iowa Medicaid appreciates your continued partnership as we work to improve health outcomes.

If you have any questions regarding billing for Health Home services, please contact Provider Services by email at <u>IMEProviderServices@dhs.state.ia.us</u>, by phone at 1(800) 338-7909, or locally in Des Moines at (515) 256-4609.