NY Billing and Coding Sources

New York Billing and Coding Helpful Sources

HealthySteps National Office Policy & Finance Team



About This Document

Have you ever needed a link that would take you directly to a website that has the key information you are looking for? Do you need to speak to a live person regarding a key reimbursement-related question? If so, this document can help and/or point you in the right direction to get your questions answered.

Below you will find website addresses/links and telephone numbers that may assist you in locating helpful information from New York State's Medicaid Agency, regarding questions such as patient eligibility and where to locate provider billing manuals.

New York State (NYS) Medicaid Website Links and Telephone Numbers

The NYS Department of Health oversees the NYS Medicaid program.

NYS Medicaid website: https://www.health.ny.gov/health_care/medicaid/providers/

NYS Medicaid telephone number: 1-800-541-2831

eMedNY is a service for providers and the general public as part of the offerings of the electronic Medicaid system for NYS. Among the many resources provided by eMedNY is the ability to submit claims and receive payments for Medicaid-covered services provided to eligible members and to access provider manuals and fee schedules.

Below are helpful sources for **eMedNY**:

- Main website link: https://www.emedny.org/
- eMedNY Call Center telephone number: 1-800-343-9000
- NYS Medicaid provider manuals: https://www.emedny.org/ProviderManuals/index.aspx
- NYS Department of Health Medicaid updates:
 https://www.health.ny.gov/health-care/medicaid/program/update/main.htm

Disclaimer: This document is not intended to give billing advice or guidance to any specific provider or HealthySteps site and does not consider the fact that payors, providers, and sites may have their own policies and procedures that may affect or prohibit implementation of these recommendations. Additionally, billing guidance is updated often. If there are any updates you recommend, please reach out to HSPolicyandFinance@zerotothree.org.

Prospective Payment System (PPS)/Ambulatory Patient Groups (APG)

The New York State Medicaid system has two payment systems for the reimbursement of patient care – the Prospective Payment System known as PPS, and Ambulatory Patient Groups known as APG.

PPS reimbursement is based on a predetermined, fixed amount for all services which are individually classified in groups (e.g., diagnosis-related groups, hospital outpatient, hospital inpatient).

APG reimbursement is based on the amount and type of resources used during a patient encounter. Patients in each APG have similar clinical characteristics as well as similar resource use and cost. Payments are directly related to the actual services provided based on a patient's diagnosis and CPT/HCPCS codes reported on a Medicaid claim. Medical services requiring a higher level of professional and ancillary care are paid a higher rate than those of a lower intensity.

All NYS Department of Health provider manuals: https://www.emedny.org/ProviderManuals/

Screening, Brief Intervention, and Referral to Treatment (SBIRT) Services



SBIRT is an evidence-based approach to identifying and supporting patients who use alcohol and other drugs. SBIRT services can be for the parents and/or caregivers of a child. Providers rendering SBIRT services to NYS Medicaid and Medicaid Managed Care members require that providers obtain SBIRT training from the Office of Addiction Services and Supports (OASAS) prior to providing SBIRT services.

Information on how to obtain training/certification for SBIRT services, including information on the certification process, can be obtained from the following website links:

- 4 hours of OASAS approved training/certification: https://webapps.oasas.ny.gov/training/searchresults.cfm?sbirt=4
- 12 hours of OASAS approved training/certification: https://webapps.oasas.ny.gov/training/searchresults.cfm?sbirt=12
- OASAS Certification process: https://webapps.oasas.ny.gov/training/index.cfm

Preventive Psychotherapy



Effective January 1, 2023, NYS Medicaid reimburses psychotherapy services without a concrete mental health diagnosis.

Information on therapy session types and the diagnoses that will support medical necessity can be found at the links below:

https://www.health.ny.gov/health_care/medicaid/program/update/2023/docs/mu_no2_jan23.pdf

Licensed Mental Health Counselors (LMHCs) and Licensed Marriage and Family Therapists (LMFTs)

Effective March 1, 2023, NYS Medicaid will reimburse for services provided by LMHCs and LMFTs when rendering services within their scope of practice.

Billing information such as rate codes and reimbursement rates:

• https://www.health.ny.gov/health-care/medicaid/program/update/2023/docs/mu-no2_jan23
.pdf

Information on scope of practice:

- https://nymhca.org/page/about-scope
- https://www.op.nysed.gov/professions/marriage-and-family-therapists/license-requirements

The American Academy of Pediatrics (AAP) Periodicity Schedule

Bright Futures, led by the AAP, and supported in part by the US Department of Health and Human Services, Health Resources and Services Administration (HRSA), is a national health promotion and prevention initiative program. The AAP's Periodicity Schedule lists recommended pediatric services such as screening requirements, and it is recognized and followed by NYS Medicaid.



- The AAP's Bright Futures 2023 Periodicity Schedule: https://www.aap.org/en/practice-management/bright-futures/bright-futures-materials-and-tools/bright-futures-guidelines-and-pocket-guide/
 - Once in the page, click on the hyperlink labeled, "Bright Futures/AAP Periodicity Schedule"

The AAP Coding Hotline

The AAP offers a coding hotline for AAP members as a resource to assist in accurate pediatric coding for services rendered to patients: https://form.jotform.com/Subspecialty/aapcodinghotline.

If you have a coding question, you can submit it via e-mail, and in most cases receive a response within the same week.

Community Health Worker Services

Effective October 1, 2023, NYS Medicaid Fee-for-Service and Medicaid Managed Care Plans recognize community health worker services for pregnant women and up to 12 months postpartum population, and effective January 1, 2024, Medicaid expanded the eligibility population to include the following:

- Children under 21 years of age
- Adults with chronic conditions
- Individuals with justice system involvement within the past 12 months
- Individuals who have been exposed to community violence or have a personal history of injury sustained because of an act of community violence, or who are at an elevated risk of violent injury or retaliation resulting from another act of community violence
- Individuals with unmet health-related social needs in the domains of housing, nutrition, transportation, or interpersonal safety.

Information on the Community Health Worker Services can be located om the <u>Community Health</u> <u>Worker Services Policy Manual</u>, and in <u>New York State's Medicaid Updates</u>.

Sources

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