

Magellan Compliance Notebook

August, 2014

Magellan Behavioral Health of Pennsylvania, Inc. (Magellan) strives on being proactive and using education as a preventative tool to provide our members the highest quality of care through you, the provider.

The Quality Improvement and Compliance Departments at Magellan have committed to sending monthly e-mails to targeted providers on a Compliance related subject. This month, we'd like to share an important reminder with Outpatient providers regarding the billing for ***Psychiatric Diagnostic Evaluations (90791)***. This clarification is for providers of Drug & Alcohol Clinic services and Mental Health Clinic services.

All Outpatient Clinics should have a minimum of two contracted Procedure Code/ Modifier Combinations for Psychiatric Diagnostic Evaluation services on their Magellan Exhibit B reimbursement schedule(s). Effective 1/1/13, the procedure code changed to 90791 (from 90801). If you are provider of Outpatient services and are currently billing any 90791 combination, please read this communication thoroughly and review your Magellan reimbursement schedule(s)/ rate sheet(s). You may direct any follow-up questions to your Network or Compliance Representative.

Although Reimbursement Schedules vary, every Outpatient provider should be utilizing specific modifier combinations to indicate what type of Diagnostic Evaluation was provided and who rendered the service (i.e. Master's level clinician, Psychiatrist, etc.). There are rate differentials on these code combinations based on what level practitioner completed the Evaluation.

In recent audits of both D&A and MH Outpatient Clinic providers, Magellan's Compliance Department has identified billing discrepancies related to paid claims for 90791 combinations wherein the documentation in member records did not support the modifier combination that was billed and paid by Magellan. In submitting claims, providers seeking Medicaid payments must certify certain facts of the service provided, as well as that the information is accurate. If the claim lists a service different from the service actually rendered, then the information on the claim is not true or accurate, and is a misrepresentation of the rendered service.

Retractions for evaluation services (90791) billed with the incorrect modifier combination based on the type of service provided and the qualifications of the rendering provider will continue to occur. This is a friendly reminder to providers of outpatient services of this audit trend: ***"Psychiatric Diagnostic Interview- no medcl svcs; Evaluation by a Psychiatrist"*** may **ONLY** be provided by a Psychiatrist or other approved Medical Doctor. Please reference the MH Outpatient Clinic and Drug and Alcohol Clinic regulations for additional information.

At Magellan, we will continue to educate our providers with updated MA Bulletins, Regulations and other pertinent information in order to ensure Compliance. Our members are our utmost priority and

together, we can provide quality services through education, knowledge, and being a proactive advocate for our member population.

Thank you for your ongoing hard work and dedication to our members!

Magellan of Pennsylvania's Compliance Team

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