

## Intensive Behavioral (IB) Services Billing Summary – Effective 10/1/2013

Effective 10/1/2013, OPWDD transitioned IB Services from a contract based service reimbursed with 100% state funds through the OPWDD Web Based Services recording application to Fee for Service Medicaid. IB Services providers will be responsible for billing Medicaid, for service dates 10/1/13 and after, using specific rate codes established for the service. IB Services is available under the Home and Community Based Services (HCBS) Waiver and service provision is limited to individuals enrolled in the HCBS Waiver. The service is time-limited and removal from the IB Services TABS program code is automatic when the individual has been enrolled for 180 days.

### IB Services Billing for HCBS Waiver Enrolled Individuals

#### **eMedNY Provider Identification (ID) Number**

Providers with an existing “Day” Services eMedNY Provider ID will utilize this Provider ID to bill Medicaid for IB Services. Agencies that do not currently provide any of the following OPWDD HCBS Waiver Services will need to obtain a new eMedNY Provider ID before they can bill for IB Services; Day Habilitation, Prevocational Services, Hourly Community Habilitation or PCSS . If your agency requires an application for a new Provider ID, contact OPWDD’s Central Operations Bureau at (518) 402-4333. Agencies must be authorized to provide IB Services and have a program code established in TABS before a Medicaid Provider ID enrollment application can be submitted to the NYS Health Department for processing.

#### **Locator Codes**

There are three locator codes being utilized for billing IB Services under the regional fee structure. **The locator code used for billing is dependent on where the individual being served resides.**

Locator Code	Fee Region
<b>012</b>	<b>IB Services Fee Region 1</b> (New York City)
<b>013</b>	<b>IB Services Fee Region 2</b> (Westchester, Putnam, Rockland, Ulster, Dutchess, Greene, Columbia, Sullivan, Orange, Suffolk, and Nassau Counties)
<b>014</b>	<b>IB Services Fee Region 3</b> (Rest of State)

#### **Rate Codes**

Two rate codes are being utilized for billing IB Services. Rate code **4720** is utilized to bill a one-time payment for completing both the Functional Behavioral Assessment (FBA) and the Behavior Support Plan (BSP). The date of service billed for this component of the service is the date that the BSP is completed and signed by the appropriate credentialed staff (either a Licensed Psychologist or a Licensed Clinical Social Worker (LCSW)). Rate code **4721** is utilized to bill the ongoing, “hourly” implementation services **in ¼ hour billing units**. Implementation services are limited to 25 hours (100 units) within a 180 day authorization period. A maximum of 8 hours (32 units) is permitted for billing on a single date of service.

Rate Code	Description
<b>4720</b>	<b>IBS; Vol; IBP/FBA Plan Development; Flat Fee*</b>
<b>4721</b>	<b>IBS; Vol; Plan Implementation; ¼ Hr</b>

\* Payment of the one-time fee may be billed again after three years if the service needs of the individual merit an additional FBA and BSP and the District has again authorized the service.

## **ETIN (Electronic Transmitter Identification Number)**

Agencies that receive a new eMedNY provider ID will need to update their ETIN with the new provider ID. Claim submissions to Medicaid will not be accepted until this occurs. If you currently have an existing “Day” Services provider ID, you will not need to update your ETIN. If your agency does not have an ETIN, contact the eMedNY call center at (800) 343-9000.

## **Individual Authorization for Service and OPWDD TABS Program Enrollment**

IB Services have a pre-payment edit to check that the individual is authorized for the service from the provider submitting the claims and for the date(s) of service being claimed. An individual must be authorized for IB Services by enrollment in the provider’s IB Services program code to pass the edit.

## **Clinician Requirements and Enrollment**

Provision of IB Services requires agencies to have on staff either a Licensed Psychologist or LCSW who directly provide IB services, or supervise staff providing these services. Claim submissions to Medicaid will require inclusion of the National Provider Identification Number (NPI) of either the Licensed Psychologist or the LCSW.

New requirements from the Affordable Care Act require providers to be enrolled in state Medicaid programs if they order or refer services reimbursed by the Fee-For-Services (FFS) Medicaid program. As the IB Services Functional Behavioral Assessment (FBA) and Behavior Support Plan (BSP) must be developed by, or under the direct supervision of a LCSW or a Licensed Psychologist, and these clinician disciplines are eligible to enroll in Medicaid, staff enrollment is required. LCSWs and Licensed Psychologists responsible for providing or supervising IB Services must complete the Order-Prescribe-Refer-Attend (non-biller) Medicaid Application. The application for each profession can be found on the eMedNY.org website at the following link:

<https://www.emedny.org/info/ProviderEnrollment/csw/Option2.aspx> (for LCSW)

[https://www.emedny.org/info/ProviderEnrollment/clin\\_psych/Option2.aspx](https://www.emedny.org/info/ProviderEnrollment/clin_psych/Option2.aspx) (for Licensed Psychologist)

If staff have already enrolled in Medicaid, then additional enrollment for this purpose is not required.

Special Note – For LCSWs, enrollment in Medicare is required before enrollment in the New York State Medicaid program can occur. Medicare has an expedited Ordering/Referring enrollment application that can be completed. The link below will access the Medicare enrollment application. **Again, this is only required for LCSWs and not for Licensed Psychologists:**

<http://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/cms855o.pdf>

## **Claim Submissions**

Once staff enrollment is complete, IB Services claim submissions must include the NPI of either the LCSW or Licensed Psychologist in both the Attending NPI and Referring NPI fields of the 837 Institutional claim submission. The NPIs should be included in the corresponding loops and segments of your claim submissions:

Attending NPI – Loop 2310A, Segment NM109

Referring/Ordering NPI – Loop 2310F, Segment NM109

Questions related to billing IB Services can be directed to Earl Jefferson or Matt Breslin at (518) 402-4333. Service documentation questions can be directed to Anne Swartwout at (518) 474-2954.