## SPECIAL BULLETIN

## FOR HIGHMARK HEALTH OPTIONS PROVIDERS

**June 1, 2016** 

## ADJUSTMENTS TO REIMBURSEMENT RATES/BILLING CODES FOR INSTITUTIONS FOR MENTAL DISEASE (IMDs)

Highmark Blue Cross Blue Shield Delaware Health Options has revised the following reimbursement rates and billing codes for IMDs. These rates will be effective July 1, 2016. If you have any questions about these new rates, please contact your Highmark Delaware Health Options Provider Relations Representative.

Service Description	Billing Code	Rate	Method
Level 1 — Placement Rate  Daily 24/7 nursing services Physician services documented at least every	Revenue Code 0191	\$199.68	Per diem
<ul> <li>third day</li> <li>No expectation for or documentation of member involvement in group or activities therapy</li> <li>Social services duties are completed</li> <li>Documentation of clinical acuity supports need</li> </ul>			
for only a placement rate level of care (LOC) to await suitable alternative LOC			
<ul> <li>Level 2— Subacute Care</li> <li>Daily 24/7 nursing services</li> <li>Physician services documented at least every other day</li> <li>Minimal expectation for or evidence of minimal member involvement in group or activities therapy</li> <li>Social services duties ongoing and documented, but no longer needed, or documented daily</li> </ul>	Revenue Code 0192	\$215.42	Per diem
<ul> <li>Documentation of clinical acuity supports need for inpatient subacute level of care (LOC) to await suitable alternative LOC</li> </ul>			

