



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

**MARYLAND MEDICAL ASSISTANCE PROGRAM**  
**Psychiatric Rehabilitation Program (PT PR) Transmittal No. 01**  
**September 24, 2019**

TO: Psychiatric Rehabilitation Programs

FROM: Jill Spector, Director *Jill Spector*  
 Medical Benefits Management

Lisa Burgess M.D., Acting Deputy Secretary  
 Behavioral Health Administration

RE: Claims Submission

**NOTE: Please ensure that appropriate staff members in your organization are informed of the contents of this transmittal.**

Effective January 1, 2020, the Maryland Department of Health (MDH) is changing the billing and reimbursement policy for Psychiatric Rehabilitation Programs (PRPs). This policy change will assist Medicaid and providers in addressing a growing trend of providers submitting PRP claims before the required services have been rendered. Submitting claims for services that have not been rendered is not an accepted practice.

PRPs are reimbursed monthly for multiple service levels which require a minimum number of face-to-face services to be performed. Programs provide services at the frequency and intensity level based on individual's medical necessity. The services are tracked in the ASO system using a non-paying service data code of H2016. Effective January 1, 2020, PRPs may continue to submit service data (H2016) throughout the month as services are rendered, but are required to submit H2018 claims for payment after the first of the following month.

The examples below reflect the policy change that for dates of service on or after January 1, 2020, PRP providers may not submit claims for payment prior to February 1, 2020. This ensures providers do not bill for services prior to service delivery.

Example 1: In January, PRP provides services to individuals and submits H2016 visit dates into the ASO system as the visits occur. On or after February 1st, PRP providers submit claims for services provided in January using H2018. These claims will then be paid based on the supporting H2016 visit data that has been entered during the month of January.

Example 2: In January, PRP provides services to individuals. On or after February 1st, PRP providers submit both H2016 visit data and an H2018 claim for services provided in January. These claims will then be paid based on the supporting H2016 visit data entered at the same time as the claims submission.

If a PRP discovers visit data was excluded in its H2016 claim submission, the provider must request that the ASO to void the original claim and resubmit an updated H2018 claim that includes any missing H2016 visit data. Providers submitting service data reflecting little more than the minimum thresholds may be subject to increased audit authorizations and claims scrutiny.

This transmittal has been issued well in advance of the policy change to give PRPs time needed to alter their billing operations because they will experience a month delay in payment for services rendered during the month of January 2020.

Please direct any questions regarding the information in this transmittal to the Maryland Medicaid Behavioral Health Unit at [mdh.mabehavioralhealth@maryland.gov](mailto:mdh.mabehavioralhealth@maryland.gov).