



Dear Home & Community-Based Services (HCBS) Residential Habilitation Provider,

This message is a follow-up to the previous email below and is intended to give Residential Habilitation providers more information on billing for HCBS services with increased rates in response to the COVID-19 public health emergency.

Residential Habilitation providers should bill with two lines, one with the regular codes (for the normal rate) and one with the modifier U3 (for the Developmental Disabilities COVID-19 increased rate).

Example:

Service Details											
#	From Date	To Date	Place of Service	EMG	Procedure Code	Mod	Diag Code Ptrs	Units	EPSDT Service	Family Plan Service	Charge Amount
1	04/01/2020	04/15/2020	12	N	T2016	U3	1	1.000 Unit	<input type="checkbox"/>	<input type="checkbox"/>	\$70.79
2	04/01/2020	04/15/2020	12	N	T2016	U3, TU	1	1.000 Unit	<input type="checkbox"/>	<input type="checkbox"/>	\$48.36

If claims were not submitted with two lines, please either:

- adjust the original claim, but keep both lines on the adjustment;**OR**
- bill a second claim with modifier U3 to pay the additional line

For members with Residential Habilitation Levels 1-6, one line should be billed for the entire amount of the increased daily rate.

Thank you,

Department of Health Care Policy & Financing

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Dear Home and Community-Based Services (HCBS) Provider,

In response to the COVID-19 public health emergency, rates have increased for certain HCBS services.

Providers should refer to [Operational Memo Number OM 20-048](#) for more information on how to bill the impacted services, including the total percentage increase for each service. Providers with further questions about billing should contact the [Provider Services Call Center](#).

Thank you,

Department of Health Care Policy & Financing

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