

Provider Billing Instructions for Updated Codes and Modifiers

Med-QUEST and Conduent very recently discovered that there are limitations preventing providers from submitting claims under the new code and modifier combinations, and they are currently working to address this with HPMMIS and Sandata. Once the delay in HPMMIS is resolved, the following instructions will assist the providers in understanding which codes and modifiers should be used for submitting claims.

Repurposed Codes and Modifiers

Authorizations for all repurposed codes and modifiers ended on June 30, 2025. Authorizations with the new service code and modifier combinations started on July 1, 2025.

Billing Instructions

Submitting claims for dates of service:

- Up through June 30, 2025:
 - Bill under old service code and modifier
 - Ensure units billed are within the units previously allocated for services up to June 30, 2025
 - Check DMO for available authorized units
- From July 1, 2025:
 - Bill under new service code and modifier(s)
 - Ensure units for services provided and billed are within the units previously allocated for services from July 1, 2025, to the end of the participant's plan year
 - Check DMO for available authorized units

Example:

A participant authorized for 1000 units of BI Chore for plan year January 1, 2025 – December 31, 2025. BI Chore at S5120 U1 ended on June 30, 2025 and changed to S5120 UA effective July 1, 2025. The CM and provider worked together to determine that 425 units will remain as of July 1, 2025. CM processed a mid-year plan change to end authorization under S5120 U1 effective June 30, 2025 with 575 units (1000 units – 425 units) and started authorization under S5120 UA effective July 1, 2025 with 425 units.

Provider to submit claims for dates of service:

- Up through June 30, 2025:
 - Bill using old code and modifier S5120 U1
 - Units billed should not exceed a total of 575 units for January 1 – June 30, 2025
 - Check DMO to ensure units billed does not exceed authorized units
- From July 1, 2025:
 - Bill using new code and modifier S5120 UA
 - Units provided and billed should not exceed a total of 425 units for July 1 – December 31, 2025
 - Check DMO for available authorized units up to December 31, 2025

Provider Billing Instructions for
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End old service codes and modifiers effective June 30, 2025 (white rows). Begin new (Repurposed from Current) service codes and modifiers effective July 1, 2025 (green rows).

SERVICE	CODE + MODIFIER	RATE	END DATE	START DATE
BI Chore	S5120 U1	\$9.34	6/30/2025	
Chore CD	S5120 U1	\$6.07		7/1/2025
Personal Assistance/Habilitation, CD, 1:1, Retainer	S5125 UA	\$5.07	6/30/2025	
BI Personal Assistance/Habilitation, 1:1	S5125 UA	\$11.49		7/1/2025
Personal Assistance/Habilitation, Registered Behavior Technician, 2:1, Retainer	S5125 U8	\$20.78	6/30/2025	
Personal Assistance/Habilitation, 3:1	S5125 U8	\$26.68		7/1/2025
Respite Hourly, CD 1:1	S5150 UA	\$5.61	6/30/2025	
BI Respite, 1:1	S5150 UA	\$8.82		7/1/2025
Residential Habilitation, Adult Therapeutic Living Program	T2016 UA	\$642.32	6/30/2025	
BI Residential Habilitation, Licensed Homes, Tier 1	T2016 UA	\$135.88		7/1/2025
BI Community Learning Service, Group, Tier 1	T2021 U1	\$6.13	6/30/2025	
Community Learning Service, Individual CD	T2021 U1	\$6.30		7/1/2025
BI Community Learning Service, 2:1	T2021 UN	\$21.41	6/30/2025	
Community Learning Service, 1:2	T2021 UN	\$5.60		7/1/2025
BI Community Learning Service, 3:1	T2021 UP	\$30.44	6/30/2025	
Community Learning Service, 1:3	T2021 UP	\$4.03		7/1/2025
BI Community Learning Service, Registered Behavior Technician, 2:1	T2021 U7	\$23.87	6/30/2025	
Community Learning Service, 2:1	T2021 U7	\$18.85		7/1/2025
BI Community Learning Service, Registered Behavior Technician, 3:1	T2021 U8	\$30.36	6/30/2025	
Community Learning Service, 3:1	T2021 U8	\$27.19		7/1/2025
BI Non-Medical Transportation	S0215 U1	\$2.14	6/30/2025	
Non-Medical Transportation, CD	S0215 U1	\$1.41		7/1/2025
Non-Medical Transportation, Trip	T2003 U1	\$6.00	6/30/2025	
Non-Medical Transportation, Trip, CD	T2003 U1	\$6.00		7/1/2025
Non-Medical Transportation, Trip, CD	T2003	\$6.00	6/30/2025	
Non-Medical Transportation, Trip	T2003	\$6.00		7/1/2025
BI Training and Consultation, Dietician	S5111 AE	\$78.09	6/30/2025	
Training and Consultation, Dietician	S5111 AE	\$65.61		7/1/2025
BI Training and Consultation, Psychologist	S5111 AH	\$103.14	6/30/2025	
Training and Consultation, Psychologist	S5111 AH	\$87.78		7/1/2025
BI Training and Consultation, Behavior	S5111 HI	\$173.73	6/30/2025	
Training and Consultation, Behavior Analyst	S5111 HI	\$150.00		7/1/2025
BI Training and Consultation, Speech	S5111 GN	\$90.00	6/30/2025	

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SERVICE	CODE + MODIFIER	RATE	END DATE	START DATE
Training and Consultation, Speech	S5111 GN	\$76.14		7/1/2025
BI Training and Consultation, OT	S5111 GO	\$90.00	6/30/2025	
Training and Consultation, OT	S5111 GO	\$76.14		7/1/2025
BI Training and Consultation, PT	S5111 GP	\$90.00	6/30/2025	
Training and Consultation, PT	S5111 GP	\$76.14		7/1/2025
BI Training and Consultation, Licensed, Marriage Family Therapist, Clinical Social Worker, Mental Health Counselor	S5111 HO	\$56.40	6/30/2025	
Training and Consultation, Licensed, Marriage Family Therapist, Clinical Social Worker, Mental Health Counselor	S5111 HO	\$46.43		7/1/2025
BI Training and Consultation, Registered Nurse	S5111 TD	\$111.39	6/30/2025	
Training and Consultation, Registered Nurse	S5111 TD	\$95.07		7/1/2025

Phase-in of Updated Code and Modifiers

This section provides guidance for non-repurposed codes and modifiers for services without any mid-year plan changes processed after May 30, 2025, to the end of the participant's plan year. Authorizations under the old code and modifier combinations will continue until the end of the participant's plan year. The authorizations for the participant's new plan year, during FY26, will be using the new code and modifier combinations.

Billing Instructions

Submitting claims for dates of service:

- Up to the end of the participant's plan year, during FY26:
 - Bill under old service code and modifier
 - Check DMO for available authorized units
- From the start of the participant's plan year, during FY26:
 - Bill under new service code and modifier(s)
 - Check DMO for available authorized units

Examples:

ADH Tier 1 is currently H2032 U1 but will be phased-out with participants' plan year during FY26 and new authorizations will be using S5100 UR.

1. Plan year July 1, 2025 – June 30, 2026. ADH Tier 1 authorized using S5100 UR from July 1, 2025, for the entire plan year.

Provider to submit claims for dates of service:

- From July 1, 2025:
 - Bill using new code and modifier S5100 UR
 - Check DMO to ensure units billed does not exceed authorized units
- 2. Plan year September 1, 2025 – August 31, 2026. ADH Tier 1 will continue authorization using H2032 U1 until August 31, 2025. For new plan, ADH Tier 1 will be authorized using S5100 UR from September 1, 2025.

Providers to submit claims for dates of service:

- Up through August 31, 2025:
 - Bill using old code and modifier H2032 U1
 - Check DMO to ensure units billed does not exceed authorized units
- From September 1, 2025:
 - Bill using new code and modifier S5100 UR
 - Check DMO for available authorized units

Mid-Year Plan Changes

This section provides guidance for non-repurposed codes and modifiers for mid-year plan changes. INSPIRE was updated on May 30, 2025, with the new code and modifier combinations. Any mid-year plan changes that were generated after May 30, 2025, will have authorizations for the participant's entire plan year with the new codes and modifier combinations.

For mid-year plan changes to an existing service authorization, when the CM generates the new authorization, both authorizations will exist in DMO: one under the old service code and modifier combination for the entire plan year with the original/old authorized amount and one under the new code and modifier combination for the entire plan year with the new annual authorized amount. This must be done so that the INSPIRE calculator is correct and also to leave enough units in DMO for providers to bill using the old service code and modifier. Providers must know how many units they can bill under the old service code and modifier and the new service code and modifier(s) so they do not over-bill, because both authorizations will be in DMO. Providers must ensure that all services provided and billed under the old service code and modifier and the new service code and modifier(s) do not exceed the total annual authorization per service for the participant's plan year.

Because of the high potential for error, during this time period, 100% of claims will be audited. Any overpaid claims will be recouped.

For mid-year plan changes to add a new service, DMO will accurately display the service period, authorized units, and remaining balance of units for the participant's plan year.

Billing Instructions

- Submitting claims for mid-year plan changes effective prior to or on July 1, 2025, with dates of service:
 - Up through June 30, 2025
 - Bill using old service code and modifier combination (because new service code and modifier combination is not effective until July 1, 2025)
 - From July 1, 2025
 - Bill using new service code and modifier combination
 - Ensure services provided and units billed do not exceed total authorization in the participant's ISP/Action Plan
 - **Do not rely on DMO** to calculate units remaining under new service code and modifier combination; the authorizations will be listed under 2 separate service authorizations:
 - The original/old authorization in DMO will reflect the units used/billed and will display the remaining number of units
 - The new authorization in DMO will display the entire annual authorized units which has not been reduced by the number of units used/billed in the original/old authorization
 - Total units used/billed for the entire plan year must not exceed the total authorized units in the participant's ISP/Action Plan
 - If moving units from one service to another, follow the above process for both services

Example:

ADH Tier 1 is currently H2032 U1 but will be phased-out with participants' plan year or through mid-year plan changes during FY26 and new authorizations will be using S5100 UR.

Plan year January 1 – December 31, 2025. Participant is originally authorized ADH Tier 1 for 500 units and has used 300 units. Effective June 1, 2025, participant wants to add an additional 500 units to the authorization, totaling 1000 units. CM does a mid-year plan change to authorize the 1000 units for the participant's plan year. DMO will reflect two service authorizations:

- ADH Tier 1 using H2032 U1 for January 1- December 31, 2025 with 500 units authorized, 300 units used/billed, and 200 units remaining
- ADH Tier 1 using S5100 UR for January 1 – December 31, 2025 with 1000 units authorized, 0 units used/billed, and 1000 units remaining

Provider to submit claims for dates of service:

- Up through June 30, 2025:
 - Bill using old code and modifier H2032 U1 (even if effective date of change is prior to July 1, 2025 because new service code and modifier combination is not effective until July 1, 2025)
- From July 1, 2025:
 - Bill using new code and modifier S5100 UR
 - Provider must manually keep track of units used/billed under both old code and modifier and new code and modifier to ensure total billing for the participant's plan year does not exceed 1000 units
 - Reminder: DMO will not accurately reflect units used/billed and the remaining units in the authorization for S5100 UR

➤ Submitting claims for mid-year plan changes after July 1, 2025, with dates of service:

- Up to effective date of mid-year plan change
 - Bill using old service code and modifier combination
- From effective date of mid-year plan change
 - Bill using new service code and modifier combination based on the effective date for the mid-year plan change in the participant's ISP/Action Plan
 - Ensure services provided and units billed do not exceed total authorization in the participant's ISP/Action Plan
 - **Do not rely on DMO** to calculate units remaining under new service code and modifier combination; the authorizations will be listed under 2 separate service authorizations:
 - The original/old authorization in DMO will reflect the units used/billed and will display the remaining number of units
 - The new authorization in DMO will display the entire annual authorized units which has not been reduced by the number of units used/billed in the original/old authorization

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- Total units used/billed for the entire plan year must not exceed the total authorized units in the participant's ISP/Action Plan

Example:

ADH Tier 1 is currently H2032 U1 but will be phased-out with participants' plan year or through mid-year plan changes during FY26 and new authorizations will be using S5100 UR.

Plan year January 1 – December 31, 2025. Participant is originally authorized ADH Tier 1 for 1000 units and has used 700 units. Effective August 1, 2025, participant wants to add an additional 200 units to the authorization, totaling 1200 units. CM does a mid-year plan change to authorize the 1200 units for the participant's plan year. DMO will reflect two service authorizations:

- ADH Tier 1 using H2032 U1 for January 1- December 31, 2025 with 1000 units authorized, 700 units used/billed, and 300 units remaining
- ADH Tier 1 using S5100 UR for January 1 – December 31, 2025 with 1200 units authorized, 0 units used/billed, and 1200 units remaining

Provider to submit claims for dates of service:

- Up through July 31, 2025:
 - Bill using old code and modifier H2032 U1
- From August 1, 2025:
 - Bill using new code and modifier S5100 UR
 - Provider must manually keep track of units used/billed under both old code and modifier and new code and modifier to ensure total billing for the participant's plan year does not exceed 1200 units
 - Reminder: DMO will not accurately reflect units used/billed and the remaining units in the authorization for S5100 UR

➤ Submitting claims for mid-year plan changes to add a new service:

- From effective date of mid-year plan change
 - Bill using new service code and modifier combination
 - Check DMO for available authorized units

Example:

Plan year March 1, 2025 – February 28, 2026. Participant wants to add PAB 1:1 starting September 1, 2025 with 1000 units. CM does a mid-year plan change to authorize the PAB 1:1 for 1000 units, using the new code S5125, for the period of September 1, 2025 to February 28, 2026.

Provider to submit claims for dates of service:

- From September 1, 2025:
 - Bill using new code S5125
 - Check DMO for available authorized units