
SOUTHWEST MICHIGAN BEHAVIORAL HEALTH

TO: REGIONAL COMPLIANCE COMMITTEE; REGIONAL PROVIDER NETWORK COMMITTEE;
SUBCONTRACTED SERVICE PROVIDERS

FROM: ALISON STRASSER

SUBJECT: PROVIDER CREDENTIALS REQUIREMENT

DATE: FEBRUARY 13, 2023

The purpose of this memo is to clarify the provider credentials/qualifications requirements for providers billing CPT/HCPC codes that require the use of a provider credential modifiers.

Per SFY 2023 Behavioral Health Code Charts and Provider Qualifications, certain HCPC/CPT codes require H-modifiers for rendering providers based on the provider's education level/credentials. Please refer to the specific HCPC/CPT code on the Code Charts tab of the document to verify whether the code being billed requires an H-modifier.

Per SWMBH Operating Policy 12.11:
Progress note documentation must include the clinician/staff member service provider licensure/credentials.

During the FY23Q1 Medicaid Services Verification audit, SWMBH will be citing any service documentation missing provider licensure/credentials/qualifications for codes requiring the H-modifier. CMHs and sub-contracted providers will be asked to show proof of rendering provider qualifications to support the H-modifier included on the claim. Failure to provide this information may result in loss of points on the audit and possible recoupment.

Corrective Action Plans will not be required in response to service documentation missing rendering provider credentials during the FY23Q1 audit, it will merely be noted that the documentation did not include this information. For FY23 Q2 audits and beyond, it is expected that all service documentation for codes requiring the H-modifiers include rendering provider credentials and failure to meet this requirement will result in the need for a Corrective Action Plan.

Please ensure that all providers are aware of this expectation moving forward. Any questions or concerns can be relayed to the SWMBH Program Integrity/Compliance Department.