October 16, 2015

RE: UPDATED CLAIMING GUIDANCE FOR OMH AND OASAS CLINICS and OPIOID TREATMENT (OTP), OMH PROS AND OMH ACT PROGRAMS

Dear Providers, Vendors and Managed Care Plans:

It has come to the State’s attention through the BH claims submission testing process that there are some billing problems that need to be resolved:

- Claims utilizing the OASAS (02249145) or OMH unlicensed practitioner (02249154) ID in the attending provider field (837I Loop 2310A NM109) are being denied.
- PROS and ACT program claims are being denied or rejected if they do not include an attending provider (Loop 2310A is not sent). ACT and PROS programs are not required to submit an attending provider, but are required to submit a referring provider on fee-for-service claims. As some Managed Care Plans are unable to accept claims that do not include an attending practitioner, PROS and ACT programs may add the OMH unlicensed practitioner ID as attending (as below) on their claims to enable the Plans to process them.

To resolve these issues for ACT, PROS, OMH Programs and OASAS Clinic and OASAS OTP claims:

- When submitting claims utilizing an unlicensed practitioner ID as Attending, providers will submit the NM1 Attending Provider Loop 2310A as follows:
  - NM108 and NM109 will be blank/not sent
  - REF Attending Provider Secondary Information will be added
    - REF01 G2
    - REF02 the OASAS or OMH unlicensed practitioner ID (example: REF*G2*02249145~)