In September 2017, CBH issued Bulletin 17-12 as a reminder that it is the provider’s responsibility to ensure that correct CPT code and Place of Service (POS) details are used on claims, based on their Pennsylvania PROMISe provider type. Recent data runs indicate that many providers are still using the incorrect POS. Therefore, CBH has begun to implement business rules, also known as claim edits, to reject claims that are submitted with the incorrect POS.

All CBH providers should review the attached list of Commonwealth-allowed POS to ensure that claims are being submitted with correct information. Future phases of claim edits will be added for additional levels of care until all are included.

Also, as providers make corrections to the POS in claims processing systems, it is recommended that the taxonomy information submitted on claims be reviewed for accuracy, as future claim edits will address discrepancies in this field.

CBH began this process with the Intensive Outpatient Program (IOP) and other 375 Levels of Care on June 1, 2019.

CBH is now adding the LOC 200 (Non-Hospital D&A) Levels of Care.

The following edits will begin enforcement with date of service November 1, 2019. Claims without the correct POS will reject during adjudication.

**CBH LEVEL OF CARE 200 (Non-Hospital D&A):**

All CBH LOC 200 should use Place of Service 99 (Other POS)

**200-1 Non-Hospital D&A – Detox** - CPT code H0013

Correct Place of Service: 99 (Other POS)

**200-2 Non-Hospital D&A – Short Term Rehab** - CPT code H0018 with Info Modifier HF

Correct Place of Service: 99 (Other POS)
200-5 Non-Hospital D&A – Halfway House – CPT code H2034
Correct Place of Service: 99 (Other POS)

200-7 Non-Hospital D&A – Long Term Rehab - CPT code T2048 with Info Modifier HF
Correct Place of Service: 99 (Other POS)

200-8 Non-Hospital D&A – Short Term Rehab - Specialized - CPT code H0018 with Info Modifier HF
Correct Place of Service: 99 (Other POS)

200-9 Non-Hospital D&A – Specialized Rehab – CPT code T2048 with Info Modifier HF
Correct Place of Service: 99 (Other POS)

200-11 Non-Hospital D&A – Co-Occurring, Women’s Program - CPT code T2048 with Info Modifier HF
Correct Place of Service: 99 (Other POS)

200-12 Non-Hospital D&A – HIV – Together House - CPT code T2048 with Info Modifier HF
Correct Place of Service: 99 (Other POS)

200-13 Non-Hospital D&A – Short Term Withdrawal Management/MAT – CPT code T2048 with Info Modifier HF
Correct Place of Service: 99 (Other POS)

200-16 Non-Hospital D&A – Long Term Withdrawal Management/MAT - CPT code T2048 with Info Modifier HF
Correct Place of Service: 99 (Other POS)

200-23 Non-Hospital D&A – Transitional Rehab - CPT code T2048 with Info Modifier HF
Correct Place of Service: 99 (Other POS)

Correct Place of Service: 99 (Other POS)
The 835RA rejection will have the following claim adjustment reason code (CARC) issued:

58 Treatment was deemed by the payer to have been rendered in an inappropriate or invalid place of service. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present. Start: 01/01/1995 | Last Modified: 07/01/2017

Questions regarding this Bulletin should be directed to the assigned Claims Analyst or Provider Relations Representative.