Guidance ECRS 2014-06

Community Participation Pilot Procedure Code Setup
(Effective November 1, 2014)

The purpose of this guidance is to assist provider administrators with setting up the procedure code for the new Community Participation Pilot. The process is the same as with setting up any new procedure code within the electronic case record system (Therap). The designated provider staff person will do the following:

1. Go to the admin tab
2. Scroll to the bottom "Billing"

Billing

Funding Source	New | List
Description/Code	New | List | Archive
Cost Center Type	New | List | Archive
Attendance Type	New | List | Archive
Leave Rule	New | List | Archive
Taxonomy Code	New | List
Billing Provider	New | List
Custom PDF Invoice	New | List
CMS-1500 Print Calibration	New | List
Professional Template Group	New | List
Carrier	New | List | Archive
Policy Holder	New | Search | Archive

3. Select "New" to the right of "Description/Code"
4. Enter the following Information (reflected in quotation marks)
   a. Service Description – "Community Participation Pilot"
   b. Service Code – "D1007"
   c. Account Number (If you have one you can enter it here)
   d. Unit of Measure (Label) – "Units"
   e. Unit Rate (current rate as of 11/1/2014 is $11.52)
   f. Claim Type – check the radio button to the left of Professional Claim
   g. Primary Diagnosis Code – Select "ICD-9" and enter "319" in the field to the right
   h. Unit for Electronic Submission – Select "Unit"
   i. Procedure Qualifier – Select "HC – HCPCS
   j. Check the box to the right of Add Description in 837, Segment SV101-7 (Professional)
   k. Unit of Measure (Calculation) – Select "15 minutes"
   l. Rounding algorithm – select radio button to the left of "Half Up"
   m. Smallest Allowed Increment – Select radio button to the left of "15 min"

Service Description/Code

* Service Description   Community Participation Pilc
* Service Code   D1007
Account Number
Unit of Measure (Label)   Units
Unit Rate ($)   0.00   ☐ Enable Rate History

* Claim Type   ⦿ Professional Claim   ○ Institutional Claim
Procedure Modifiers   [ ] – [ ] – [ ] – [ ]

> Note: If you are not sure, use one of the following Primary Diagnosis Codes:
> 7999 = Other Unknown
> 78099 = Other General Symptoms
> 317 = Mild Intellectual Disabilities
> 319 = Unspecified Intellectual Disabilities
> Enter 1 in the first box for Diagnosis Code Pointer. Leave the other boxes empty.

Primary Diagnosis Code   ICD-9 ▼   319
Diagnosis Code Pointer   1 – [ ] – [ ] – [ ]

Electronic Billing

> Do not change the Unit for Electronic Submission from Unit to Day or Minute unless its required by the State Medicaid System.

* Unit for Electronic Submission   Unit ▼
* Procedure Qualifier   HC- HCPCS ▼
Add Description in 837, Segment SV101-7 (Professional) ☑

Automatic Unit Calculation From Time In/Out

Unit of Measure (Calculation)   15 Minutes ▼
Rounding Algorithm   ⦿ Half Up   ○ Half Down   ○ Up   ○ Down   See Example
   ○ None
Smallest Allowed Increment   ○ 5 Min   ○ 7.5 Min   ○ 10 Min   ⦿ 15 Min   ○ 30 Min   ○ 45 Min   ○ 60 Min   ○ 120 Min

[Cancel]   [Save] [Save And Create New]

5. Click "Save" to save the Procedure Code
6. The procedure code is now available for selection when creating a new service authorization for each individual participating in this pilot program.