

 Aetna Better Health of Kentucky 9900 Corporate Campus Drive Suite 100 Louisville, KY 40223	Date	<inset date>
	To	All Network Providers
	From	Provider Experience
	Subject	UPDATE - Monthly Billing for Targeted Case Management Services
	Document number	<insert Doc #>

UPDATE - Billing for Targeted Case Management Services (T2023)

Aetna Better Health of Kentucky would like to provide an update regarding the expectations for billing claims for Targeted Case Management (T2023) services. These expectations are inclusive of Kentucky DMS guidance.

It is the Department's direction and guidance that Targeted Case Management (TCM) claims can be billed in a rolling month or a calendar month. To accommodate this updated guidance, Aetna Better Health of Kentucky has implemented a rolling month methodology for TCM claims payment.

- Targeted Case Management (T2023) may be billed **one time per rolling month, by one provider**, for services provided throughout that rolling month timeframe.
- **Aetna Better Health of Kentucky will implement a rolling month as follows. There must be a minimum of (28) days between the end date of service for Targeted Case Management (TCM) and the start date for the following month of TCM services.** This means that the start date on the claim for the next month of TCM services must start on or after the 29th day from the end date of the previous claim for TCM services.
- For example, if a provider bills a TCM claim with an end date of 6/2/23, the next claim for TCM must have a start date on or after 7/1/23.
- Providers of TCM are not required to bill exactly on the 29th day. Using the example above, the TCM claim had an end date of 6/2/23. It would be acceptable for the provider to bill the claim for the next month of TCM services with a start date of 7/6/2023.
- Providers should clearly document the dates that constitute the "month" of TCM in recipient records for Targeted Case Management services.
- Claims for Targeted Case Management services should include **one** of the below modifiers per the population served. Please note the below.

Modifier	Modifier Requirement
UA	The (UA) modifier is required when billing for Targeted Case management services for individuals with SED.
TG	The (TG) Modifier is required when billing for Targeted Case Management services for individuals with a mental health or substance use disorder and chronic or complex physical health issues.
HE	The (HE) modifier is required when billing for Targeted Case management services for individuals with SMI.
HF	The (HF) modifier is required when billing for Targeted Case management services for individuals with Substance Use

Disorders.

For complete coverage provisions, reimbursement provisions and requirements regarding Targeted Case Management, see the below Kentucky Administrative Regulations.

907 KAR 15:040. Coverage provisions and requirements regarding targeted case management for individuals with a substance use disorder.

<https://apps.legislature.ky.gov/law/kar/907/015/040.pdf>

907 KAR 15:045. Reimbursement provisions and requirements for targeted case management services for individuals with a substance use disorder.

<https://apps.legislature.ky.gov/law/kar/907/015/045.pdf>

907 KAR 15:050. Coverage provisions and requirements regarding targeted case management for individuals with a mental health or substance use disorder and chronic or complex physical health issues.

<https://apps.legislature.ky.gov/law/kar/907/015/050.pdf>

907 KAR 15:055. Reimbursement provisions and requirements regarding targeted case management for individuals with a mental health or substance use disorder and chronic or complex physical health issues.

<https://apps.legislature.ky.gov/law/kar/907/015/055.pdf>

907 KAR 15:060. Coverage provisions and requirements regarding targeted case management for individuals with a severe mental illness and children with a severe emotional disability.

<https://apps.legislature.ky.gov/law/kar/907/015/060.pdf>

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