

News & Updates

Important Billing Changes Effective January 1, 2024

The Department of Health Care Policy & Financing (HCPF) is changing modifiers that will impact billing. The following changes will take place on January 1, 2024. The first position modifier will no longer be added to claims except for a few exceptions. The first position modifiers that will no longer be required on a claim are:

- HE (State Plan)
- B3: HK (Residential), U4 (CM), TM (ACT), HM (Respite), HJ (Voc), TT (Recovery), HT (Prev/EI)
HQ (Clubhouse/Drop in, and HF (SUD)

The only codes in the [State Behavioral Health Services Billing Manual](#) that will require a first-position modifier (currently a second-position modifier) are the following:

Code	Modifier	Current Position	Future Position	Description
H0019	HB	Second	First	Adult MH Transition Living
H0019	U1	Second	First	QRTP
H2036	U1	Second	First	ASAM 3.1
H2036	U3	Second	First	ASAM 3.3
H2036	U5	Second	First	ASAM 3.5
H2036	U7	Second	First	ASAM 3.7

HCPF is opening code H0046 to be used for behavioral health drop-in services. HCPCS code H0023 will be used exclusively for behavioral health outreach and will no longer require modifiers to distinguish it from drop-in services. HCPCS code H0046 is identical in structure and utilization as the current drop-in code.

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