SPECIAL BULLETIN

ATTN: ALL FACILITY PROVIDERS

This bulletin was end-dated 12/06/2019 and is now OBSOLETE.

Please note that the End Date and administrative notes apply to any copies produced of this bulletin

HIGHMARK DELAWARE TO COVER CODE S8990 FOR HABILITATIVE SERVICES EFFECTIVE JANUARY 1, 2014

TO: BILLING OFFICE
PERSONNEL CHIEF
FINANCIAL OFFICER
DIRECTOR/MANAGER OF PATIENT ACCOUNTS
CARE CASE MANAGEMENT/UTILIZATION REVIEW DEPT
OUTPATIENT THERAPY DEPT

FROM: HIGHMARK BLUE CROSS BLUE SHIELD DELAWARE (HIGHMARK DELAWARE)
PROFESSIONAL RELATIONS

PURPOSE

This bulletin notifies Highmark Delaware facility providers that habilitative therapy services will be covered for certain Highmark Delaware members. Effective January 1, 2014, habilitative therapy will be covered under code S8990.

BACKGROUND/OVERVIEW

Beginning January 1, 2014, the Patient Protection and Affordable Care Act (PPACA) requires all health insurers offering small group health insurance coverage (1-50 full time employees) and individual health insurance coverage to include essential health benefits in products offered on and off the Exchange. Federal law requires that individual and small group products include the following 10 categories of essential health benefits:

Ambulatory patient services	Prescription drugs

Emergency services	**Rehabilitative and habilitative services and**
Hospitalization	Laboratory services
Maternity and newborn care	Preventive and wellness services and chronic

	management
Mental health and substance use disorder services	Pediatric services, including oral & vision

Highmark Delaware currently defines rehabilitative and habilitative services as those services or supplies ordered by a professional provider to promote the restoration, maintenance, or improvement in the level of function following disease, illness or injury. This also includes therapies to achieve functions or skills never acquired due to congenital and developmental anomalies.

As a result of the PPACA essential health benefits requirement, effective with dates of service on or after January 1, 2014, Highmark Delaware will make the maintenance therapy procedure code S8990 eligible for payment for all habilitative services under physical therapy, occupational therapy and speech therapy. Physical, occupational, and speech therapy providers must use S8990 to bill all habilitative services. Please note that spinal manipulation is not considered a habilitative service. All existing rehabilitative and habilitative procedure and diagnosis codes will continue to be covered. This change also applies to administrative services only (ASO) employer groups who choose to offer a benefit for habilitative services.

IMPACT/ACTION

Outpatient rehabilitative and habilitative services benefits will have separate annual visit limits. The visit limit will be applied based on the revenue code reported with HCPC code S8990 (e.g., a physical therapy revenue code will apply to the habilitative outpatient physical therapy visit limit). Please note that S8990 is not a timed or per-service code and can only be billed once per patient per day.

Note: HCPC code S8990 should be billed with the appropriate revenue code to reflect the type of therapy being provided.

TIME FRAME

Effective with dates of service on and after January 1, 2014, Highmark Delaware will cover the essential health benefits.

ASSISTANCE

This Bulletin

Questions regarding this bulletin may be directed to the Provider Service Department, at 1-800-346-6262.

Inquiries about Eligibility, Benefits, Claim Status or Authorizations

For inquiries about eligibility, benefits, claim status or authorizations, Highmark Delaware encourages providers to use the electronic resources available to them -- NaviNet® and the applicable HIPAA transactions -- prior to contacting the Provider Service Department.

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