

Home health billing guide

Home health authorization

Home health services require prior authorization approval.

Authorization request can be made by submitting the *Home Health*, *Hospice* and *Home- and Community-Based* Services Form located here:

https://provider.healthybluemo.com/docs/gpp/MO CAID HomeHealthHospiceHomeCommForm.pdf



Home health claims submission

- Submission of home health claims are required to be submitted on a 1500 form for appropriate processing and payment.
- Home health claims are paid off of the fee schedule rates, not a percentage of billed charges or a fixed rate.
- Claims submitted on a UB form will be rejected unless otherwise noted in your contract.
- Reminder: Effective claims with date(s) of services after July 1, 2022, home health is not listed on the outpatient simplified fee schedule and is now on the professional fee schedule. If your contract specifies you may bill on a UB form, it is the CPT®/HCPCS code that will drive the rate (at the professional percentage of Medicaid).

Please note: Healthy Blue is not required to follow the state (MO HealthNet) form type requirements in terms of what we require a provider to bill on.



MO HealthNet billing manual



The MO HealthNet home health billing manuals are available at the following website address:

http://manuals.momed.com/collections/collection hom/Print.pdf.

MO HealthNet fee schedule

The MO HealthNet fee schedule is available at:

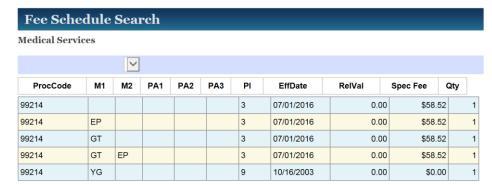
https://apps.dss.mo.gov/fmsFeeSchedules/fsmain.aspx



Select the link for the appropriate category for the CPT code or modifier you are wanting to view the allowed amount or modifier information for.

Next, select the radio button next to the **ProcCode** or **Modifier** and type in the procedure code or modifier.

The search will show you if the CPT code and/or modifier combination are payable





https://provider.healthybluemo.com

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