

## Clarification Regarding the Billing Requirement Changes for Article 29-I Health Facilities Other Limited Health Related Services (OLHRS)

To: Article 29-I VFCA Health Facilities and Medicaid Managed Care Plans (MMCPs) including Mainstream Managed Care and HIV Special Needs Plans

Date: October 27, 2023

The Department of Health (DOH), in collaboration with the Office of Mental Health (OMH), Office of Addiction Services and Supports (OASAS), Office for People with Developmental Disabilities (OPWDD) and the Office of Children and Family Services (OCFS) recently announced an update to billing requirements for Children's Medicaid Services, including Article 29-I Other Limited Health Related Services (OLHRS). After further consideration, it has been determined that claims for services found on the <a href="Article 29-I OLHRS Fee Schedule">Article 29-I OLHRS Fee Schedule</a> will not be required to follow the <a href="guidance">guidance</a> previously announced. Claims for these services <a href="will not require a">will not require a</a> FIPS/County Locator Code and will continue to follow current billing processes.

Claims for Children's Home and Community Based Services (HCBS) and Child and Family Treatment and Support Services (CFTSS) with dates of service on or after December 1, 2023, will be required to include the applicable FIPS/County Locator Code.

Additional information on billing requirements for Article 29-I services are outlined in the <u>29-I Billing Manual.</u>

Any questions on this announcement can be sent to BH.Transition@health.ny.gov