



ISSUE DATE:

July 30, 2019

EFFECTIVE DATE:

October 1, 2019

NUMBER:

OMHSAS-19-02

SUBJECT:

**Service Location Enrollment for Behavioral
Health Providers**

BY:

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Office of Mental Health and Substance Abuse Services

IMPORTANT REMINDER: All providers must revalidate the MA enrollment of each service location every 5 years. Providers should log into PROMISE to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the revalidation dates. Enrollment (revalidation) applications may be found at:
http://www.dhs.pa.gov/provider/promise/enrollmentinformation/S_001994

SCOPE:

This bulletin applies to all behavioral health providers licensed or approved by the Office of Mental Health and Substance Abuse (OMHSAS) or the Department of Drug and Alcohol Programs that are enrolled in the Medical Assistance (MA) Program, or who seek to enroll, revalidate, or re-activate their enrollment in the MA Program.

PURPOSE:

The purpose of this bulletin is to: 1) clarify for behavioral health providers the applicability of the requirements published in the Medical Assistance Bulletin (MAB) 99-18-11, "Service Location Enrollment Deadline," which reminded providers to enroll each service location out of which they operate; 2) advise behavioral health providers that effective October 1, 2019, they must use the enrolled service location at which a service was provided on claims.

BACKGROUND:

As discussed in MAB 99-18-11, the regulation at 42 CFR § 455.450 requires State Medicaid agencies to screen all initial applications for enrollment, including applications for new practice locations and applications for re-enrollment or revalidation. As explained in MAB 99-18-11, providers must enroll all service locations where they offer services.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:
Office of Mental Health and Substance Abuse Services, Bureau of Policy, Planning & Program Development, P.O. Box 2675, Harrisburg, PA 17105. General Office Number 717-772-7900.

OMHSAS previously issued a memo dated June 27, 2007 that specified that separate enrollments of satellite sites of outpatient psychiatric clinics was not required. This has raised some questions regarding the applicability of MAB 99-18-11 to behavioral health providers.

DISCUSSION:

In accordance with MAB 99-18-11, behavioral health providers must enroll each licensed or approved service location and receive a 13-digit number {provider's 9-digit Master Provider Index ("MPI") number plus 4-digit "service location" code} for each site address. Providers that render services under multiple provider types at the same location must enroll each provider type as a different service location. Each provider type at the same address will receive its own unique 13-digit number. Behavioral health providers identified in the scope of this bulletin must use the 13-digit number of an enrolled service location on a paper claim or the zip code of the location where services were provided on an electronic claim beginning October 1, 2019. If the service is provided in a home or in a community setting, providers should use the 13-digit number of an enrolled service location on a paper claim or the zip code of an enrolled service location on an electronic claim.

Further instructions, including information on electronic enrollment, may be found in MAB 99-18-11: http://www.dhs.pa.gov/cs/groups/webcontent/documents/bulletin_admin/c_284208.pdf.

This bulletin, and the requirement that outpatient psychiatric clinics enroll each satellite site or location, obsoletes the June 27, 2007 memo issued by OMHSAS.

REFERENCES AND RESOURCES:

Enrollment Information on the Department's website is available at the following link:
http://www.dhs.pa.gov/provider/promise/enrollmentinformation/S_001994

Provider Quick Tip #196 - Electronic Provider Enrollment Application "Copy" Function Released –
http://www.dhs.pa.gov/cs/groups/webcontent/documents/communication/c_231995.pdf

Provider Quick Tip # 221 – Common Billing Issues Which May Result in Denied Claims as of July 2019:
http://www.dhs.pa.gov/cs/groups/webcontent/documents/communication/c_288413.pdf

For more application information, please call the OMAP/BFFSP Provider Enrollment 1-800-537-8862.