Private Psychiatric Residential Treatment Facilities:
Billing Instructions

Effective Date: October 1, 2021

Applies to: Private Psychiatric Residential Treatment Facility (PRTF) Providers

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INTERNET ELECTRONIC CLAIM SUBMISSION

Private PRTF providers may submit claims via the internet. The web site address is www.emomed.com. Providers are required to complete the online Application for MO HealthNet Internet Access Account. Please see “Apply for EMOMED” under the Billing heading at https://dss.mo.gov/mhd/providers/fee-for-service-providers.htm. Providers are unable to access www.emomed.com without proper authorization for each individual user.

CMS-1500 CLAIM FORM

The CMS-1500 claim form is used to bill for private PRTF services.

PROCEDURE CODE, LIMITATION AND MAXIMUM ALLOWABLE RATE

<table>
<thead>
<tr>
<th>CPT® Code</th>
<th>Description</th>
<th>Max Qty.</th>
<th>Rate</th>
</tr>
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<tbody>
<tr>
<td>H2013</td>
<td>Psychiatric Health Facility Service, Per Diem</td>
<td>31</td>
<td>$ 417.22</td>
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</table>
The maximum quantity for procedure code H2013 is one unit per date of service. Providers may bill for a date range of up to 31 days on one claim line.

**PLACE OF SERVICE**

Providers should use place of service 56, Psychiatric Residential Treatment Center, when submitting claims for PRTF services.

**APPLICABILITY**

The information in this bulletin applies to the MO HealthNet (MHD) fee-for-service program and may apply to the MHD managed care program, as well. MHD’s fee-for-service policies set the basic coverage policies for benefits and limitations in the managed care program. The managed care health plans have additional flexibilities in operating their respective programs, such as determining which services require prior authorization, and details required for claims submission. Certain services, such as pharmacy, are “carved out” of managed care and will be paid through the fee-for-service program. To ensure your understanding of this bulletin’s applicability to each managed care health plan, please contact your health plan directly, or contact MHD.MCCommunications@dss.mo.gov.

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**Provider Bulletins** are available on the MO HealthNet Division (MHD) website at [http://dss.mo.gov/mhd/providers/pages/bulletins.htm](http://dss.mo.gov/mhd/providers/pages/bulletins.htm). Bulletins will remain on the Provider Bulletins page only until incorporated into the provider manuals as appropriate, then moved to the Archived Bulletin page.

**MO HealthNet News:** Providers and other interested parties are urged to go to the MHD website at [http://dss.mo.gov/mhd/](http://dss.mo.gov/mhd/) to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient’s MO HealthNet Managed Care health plan. Before delivering a service, please check the patient’s eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the MO HealthNet ID card.

**Provider Communications Hotline**

573-751-2896