

Maternity Case Management (MCM) DMAP Reimbursement Rates (Non-FQHC)

<p>G9001 - Initial Assessment - \$23.76 Develop Client Service Plan (CSP) Communicate with Provider Bill <u>once during pregnancy</u></p>	<p>G9009 – Case Management (Partial Service) - \$36.26 3 months or less of client service. Bill <u>once per pregnancy</u>. Bill when CSP has been developed and CM services were initiated prenatally and partially completed.</p>
<p>G9006 – Home Assessment (HA)- \$41.44 Need to do entire Home Assessment and document. Not required for MCM. Bill <u>once per pregnancy EXCEPT</u>: if client moves or situation requires repeat HA to resolve, submit documentation with claim stating the reason for repeat HA <u>Note</u>: If client moves simply write ‘moved’ and denote new address. (If it is a repeat HA without an address change, include copy of the repeat HA.)</p>	<p>G9002 – Case Management (Full Service)-\$72.52 Client must have been served for more than 3 months. Bill once per pregnancy after delivery when more than 3 months of service have been provided which were initiated prenatally.</p>
<p>G9012 – Case Management (CM)Visit - \$41.44 Evaluation and/or revision of objectives and activities addressed in CSP, training, information, education on at least 2 topics. <u>Four (4) CM visits may be billed prenatally.</u> (Telephone contacts included in this total). Bill additional visits done for High Risk with claim for High Risk CM (Full or Partial) when services completed.</p>	<p>G9010 – High Risk Case Management (Partial) \$62.16 Client becomes High Risk during pregnancy but is not served through the delivery date. Can be billed in addition to G9009. Bill <u>once per pregnancy when</u> 3 months or less of services were provided or less than eight case management visits were provided.</p>
<p>G9011 – Telephone Visit – \$10.36 Counts the same as one MCM visit. Documentation requirements same as MCM home visit. <u>State reason for telephone visit instead of face-to-face visit</u></p>	<p>G9005 – High Risk (HR) Case Management (CM) (Full) - \$124.32 Must meet HR criteria. Bill in addition to G9002. Bill <u>once per pregnancy</u> when more than 3 months of HRCM service and at least 8 CM visits have been completed (this totals the 4 basic CM visits plus at least 4 additional visits). <u>Note</u>: 4-6 additional HR visits are billable for up to 10 visits. (Example: 4 basic visits plus up to 6 high-risk visits. Minimum of 8 visits, maximum of 10 visits)</p>
<p>S9470 – Nutritional Counseling - \$45.69 Service provider must meet qualifications outlined at OAR 410-130-0595 (7). Not required for MCM. Bill <u>once per pregnancy</u>.</p>	