

Global Commitment Register

December 22, 2023

GCR 23-159 PROPOSED

Supervised Billing: Addition of HM Modifier

Policy Summary:

The Vermont Medicaid program proposes to add the HM modifier as a required modifier used to indicate education level on supervised billing claims. This modifier will apply to providers who have an AAP certification and will align AAPs with billing requirements under HCAR 9.103. This modifier will be included on all claims for clinical services provided by AAPs and billed under their supervising provider. Following the rate schedule set out for other modifiers under Supervised Billing, the AAPs will be paid at 56% of the rate on file.

With the Medicare expansion taking effect on January 1, 2024, and allowing additional mental health counselors to enroll with Medicare, it is especially important that the appropriate modifier and supervisor ID are used on eligible claims for AAP certified providers who are providing clinical services under Supervised Billing. This will ensure that Vermont Medicaid can appropriately monitor and reimburse all eligible claims for which Medicaid remains the primary payor and can verify all third-party liability.

Effective Date:

February 1, 2024

Authority/Legal Basis:

This change is being done through Global Commitment to Health waiver authority, where DVHA may establish rates with providers on an individual or class basis without regard to the rates currently set forth in the approved State Plan.

Global Commitment to Health Waiver: Waiver authority #5 [Section 1902(a)(13), 1902(a)(30)]; Special Term and Condition #6.8.

Population Affected:

All Medicaid.

Fiscal Impact:

This change is expected to be budget neutral.

Public Comment Period:

December 22, 2023 – January 22, 2024



Send comments to: Medicaid Policy Unit 280 State Drive, Center Building Waterbury, VT 05671-1000

Or submit via e-mail to AHS.MedicaidPolicy@vermont.gov.

To be added to the GCR email list, send an email to AHS.MedicaidPolicy@vermont.gov.

