## **Instructions for Coding Behavioral Health Homes-Waiver as a Payor in WITS**

Instructions for Behavioral Health Home Auto-Enrollees into BHH Payor Code

- 1) The new Behavioral Health Homes-Waiver plan-group should be added to any BHH enrollee who is also on a waiver (MH, TBI, etc.)- EFFECTIVE 10/1/2015
- 2) The current Behavioral Health Homes- BHH plan-group should be end dated on anyone with a waiver- EFFECTIVE 9/30/2015
- 3) WITS uses the client's active list of client group enrollments (aka Insurance) for claiming purposes when an encounter is released. It automatically associates insurances (i.e., staff do not have to select Behavioral Health Homes for a corresponding encounter) by selecting in the following order:
- 1. Group Insurance (e.g. Cigna, Connecticare, Aetna, etc.)
- 2. Medicare Part B
- 3. Medicaid
- 4. Other (e.g. WISE, Medicare Part D & Behavioral Health Homes-Waiver)
- 5. Self-Pay

Associating Insurances to clients is done through the Client Profile>Client Group Enrollment. A client can have many insurance values added to their profile; the only requirement is the plan & group is unique. THE POLICY NUMBER FOR BEHAVIORAL HEALTH HOMES-WAIVER WILL BE THE SAME AS THE PERSON'S MEDICAID ID NUMBER.

