



## Using Correct License-level Modifiers on Your Claims

Magellan **organizational providers** and **individual providers submitting professional (CPT) claims as part of an organization** (using the organization's Taxpayer Identification Number) must submit claims with the license-level modifier that represents the **treating provider's license level**.

- We process claims using the organization's record and the license-level modifier provided.
- We base reimbursement on the treating provider's licensure.
- We reimburse professional (CPT) services rendered by clinical practitioners licensed at the independent practice level only. Regulatory or customer requirements may require an exception.

### What modifier should I use for my claims?

Degree/Licensure *	HIPAA** Modifier	HIPAA Modifier Description
Psychiatrist	<b>AF</b>	Specialty physician
Physician	<b>AG</b>	Primary physician
Psychologist	<b>AH</b> <b>HP</b>	Clinical psychologist or doctoral level
Social Worker	<b>AJ</b>	Clinical social worker
Master's Level Counselor	<b>HO</b>	Master's degree level
Clinical Nurse Specialist***	<b>SA</b> <b>TD</b>	Nurse practitioner RN
NCAC (National Certified Addictions Counselor) or state substance abuse counseling certification****	<b>HF</b>	Substance Abuse Program
Bachelor's degree level counselors	<b>HN</b>	Bachelor's degree level
Less than bachelor's degree level counselors	<b>HM</b>	Less than bachelor's degree level

\*Reimbursement is based on the treating provider's licensure and Magellan's credentialing requirements for that discipline, and is not based on the provider's academic credentials alone.

\*\*Public Sector accounts may have unique HIPAA modifiers. Please reference state-specific information for Public Sector account coding guidelines.

\*\*\* Select code that best applies. Nurses may only provide services and bill for CPT codes that fall within scope of practice allowed by their professional training and state licensure.

\*\*\*\* Actual credentials may vary depending on state, e.g., CAC, CCDC, CCDAC.



**Where should I insert HIPAA modifiers on claims?**

- On a CMS-1500 form, insert the modifier in Field 24d under “Modifier.”
- On a UB-04 form (HCFA 1450), insert the modifier with CPT or HCPCS code in field 44 (e.g., “90801 AH”).
- On electronic claims, for 837P, insert the modifier in SV101-3 (additional modifiers in SV101-4, SV101-5, and SV101-6). For 837I, insert the modifier in SV202-3 (additional modifiers in SV202-4, SV202-5, and SV202-6).