



NC DEPARTMENT OF  
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HUMAN SERVICES**

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**LME-MCO Joint Communication Bulletin # J359**

Date: April 01, 2020

To: Local Management Entities-Managed Care Organizations (LME-MCOs)

From: Deb Goda, Behavioral Health Unit Manager, NC Medicaid  
Renee Rader, Assistant Director for Policy and Programs, DMH/DD/SAS

Subject: Using modifiers GT and CR for Medicaid and State Funded Services:

This joint communication bulletin provides clarification on the use of GT and CR modifiers.

The GT modifier is used when the service is provided through two way -real time- audio and visual communication between the provider and beneficiary. When the service is provided telephonically (no visual communication), the GT modifier is not used.

The CR modifier (catastrophe/disaster related) is used to indicate the service is provided during a disaster and to relax limitations defined in the code definitions. It is used for both two-way audio and visual communication and telephonic communication between the provider and the beneficiary.

If the service is provided face-to-face as normal, no modifier would be used.

More than one modifier may be used. For example:

- Intensive In Home is being provided via two way audio and visual communication. The service will be billed as H2022 GT CR.
- ACT is being billed telephonically. The service will be billed as H0040 CR.

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Regarding the billing/encounter submission for GT and CR modifiers:

We understand that both LME-MCO and contracted providers' claims/billing systems are not presently set up to accommodate these modifiers (GT and CR). We ask that LME-MCOs permit providers to continue billing without the modifier until you are able to accommodate these modifiers. Providers will then need to resubmit claims with the appropriate modifier(s). We ask that you continue encounter submission as usual. We do not want you to hold the encounters because we are trying to set up processes to monitor where there may be disruptions in care. This will be very difficult to do if you are holding back data. Once your systems are able to accommodate these modifiers, you will need to correct the encounters and resubmit encounters with the appropriate modifiers.

**Additionally, for State Funded Services only:** DMHDDSAS can only accept one modifier for State Funded Services. We would like to request that you allow the provider to submit both modifiers, but you only submit one modifier to NC TRACKS. The logic for submission follows:

- If both GT and CR are billed, submit GT.
- If only CR is billed, submit CR.
- If another modifier is needed for the service (i.e., HI or HQ) when normally used, then submit that modifier.

If you have any questions, please contact Deb Goda at [Deborah.Goda@dhhs.nc.gov](mailto:Deborah.Goda@dhhs.nc.gov) or Eric Johnson at [eric.johnson@dhhs.nc.gov](mailto:eric.johnson@dhhs.nc.gov).

Previous bulletins can be accessed at:

[www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins](http://www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins)

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