



## **Detroit Wayne Integrated Health Network**

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**BULLETIN NUMBER:** 21-005

**ISSUED/REVISED:** 06/21/2021

**EFFECTIVE:** 07/01/2021

**SUBJECT:** Peer-Delivered Oral Health Program

**SERVICE AFFECTED:** Peer Support Specialists (H0038)  
Youth Peer Support Specialists - (H0038 TJ)  
Peer Mentor (H0046)  
Parent Support Partners (S5111-HM)  
Drop-in Center (H0023)

### **BACKGROUND**

DWIHN is implementing a new peer-delivered program to educate those served on the importance of good dental health and hygiene. Disseminating quality information by trusted others, i.e., Peers, is considered a best practice and DWIHN priority. This bulletin addresses the criteria for both delivering the curriculum and submitting encounters to track this billable service.

### **PROCEDURE**

Must meet the following criteria:

- Offered by a Michigan Certified Peer
- Used a DWIHN approved oral health training curriculum
- Delivered in either an individual or group format

### **AUTHORIZATIONS & BILLING**

- Peer-delivered Oral Health program services will be identified with the local modifier "OH".

- A request for authorization is not required for the Oral Health program services (i.e., modifier “OH”). The underlying Peer Services code may require prior authorization.
- Biller must add the “OH” modifier to the claim before submission as indicated in the chart below:

#### CHART

Code and Modifier*	POS Code	Unit	Description
<b>H0038 OH</b> (MI Peer)	11 – Office 99 – Community	15 minutes	Peer Support Specialist
<b>H0038 TJ &amp; OH</b> (Youth Peer)	11 – Office 99 - Community	15 minutes	Youth Peer Specialist Service
<b>H0046 OH</b> (DD Peer)	11 – Office 99 – Community	15 minutes	Peer Mentor
<b>S5111 HM &amp; OH</b> (Parent Peer)	11 – Office 99 – Community	15 minutes	Parent Support Partners
<b>H0023 OH</b> (Drop-in Center)	11 – Office 99 – Community	15 minutes	Drop-in Center

**\*NOTE:** Add “TT” modifier if more than one member was served simultaneously (i.e., group) through 09-30-2021. Effective 10-01-2021, use one of the appropriate “Ux” to indicate the number of members served simultaneously (i.e., group).

#### REFERENCES:

Michigan Medicaid Provider Manual

[http://www.michigan.gov/mdhhs/0,5885,7-339-71551\\_2945\\_42542\\_42543\\_42546\\_42553-87572--,00.html](http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_42542_42543_42546_42553-87572--,00.html)

MDHHS Website: PIHP/CMHSP Reporting Cost Per Code and Code Chart

[https://www.michigan.gov/mdhhs/0,5885,7-339-71550\\_2941\\_38765---,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_38765---,00.html)

MDHHS Website: PIHP/CMHSP Provider Qualifications Chart

[https://www.michigan.gov/mdhhs/0,5885,7-339-71550\\_2941\\_38765---,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_38765---,00.html)