

OneCare Kansas (OCK) is a bundled service where individual core services provided within any month are not billed as fee-for-service. Payment to the Lead Entity from the State is a per member per month (PMPM) payment made retrospectively each month, and unless preapproved by the State, payment to the OneCare Kansas Partner (OCKP) will be a PMPM.

For an OCKP to receive the PMPM payment agreed upon between the Lead Entity and the OCKP, the OCKP must provide the member with at least one OCK service during the month for which the claim is submitted. Services should be documented per the information provided in Section 11 of the OCK Program Manual as required by the Lead Entity-OCKP contract.

The table below outlines the billing codes and modifiers for OCK services. Please consult with each Lead Entity for more specific information about their billing instructions.

Core Services	Codes	Notes
Comprehensive Care Management	S0280 U1	Completion of the HAP is one-time only.
Comprehensive Care Management	S0281 U1	
Care Coordination	S0311 U1	
Health Promotion	G9148 U1	
Comprehensive Transitional Care	G9149 U1	
Patient and Family Support	G9150 U1	
Referral to Community and Social Supports	S0221 U1	
Specific Identifying Modifier for SUD. Add this modifier to OCK service codes for tracking purposes.	HF Modifier	Identifies members with a diagnosis of substance use disorder. It does not have to be the primary diagnosis.

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