## Medicaid update and BadgerCare August 200

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Wisconsin Medicaid and BadgerCare Information for Providers

To: Federally Qualified Health Centers Nurse Practitioners Physician Assistants Physician Clinics Physicians Rural Health Clinics HMOs and Other Managed Care

Programs

Primary Care Treatment and Follow-up Care for Mental Health and Substance Abuse

Wisconsin Medicaid covers initial primary care treatment and follow-up care for recipients with mental health and/or substance abuse needs provided by primary care physicians, physician assistants, and nurse practitioners. Wisconsin Medicaid will reimburse providers for *Current Procedural Terminology* evaluation and management services with an *International Classification of Diseases*, *Ninth Revision, Clinical Modification* diagnosis code applicable for mental health and/or substance abuse services.

## Primary Care Treatment and Follow-up Care

Wisconsin Medicaid covers initial primary care treatment and follow-up care for recipients with mental health and/or substance abuse needs provided by primary care physicians, physician assistants, and nurse practitioners. Wisconsin Medicaid will reimburse the previously listed providers for Current Procedural Terminology (CPT) evaluation and management (E&M) services (procedure codes 99201-99205 and 99211-99215) with an International Classification of Diseases, Ninth Revision, Clinical Modification diagnosis code applicable for mental health and/ or substance abuse services. As a reminder, these services may be eligible for Health Professional Shortage Areas and pediatric enhanced reimbursements. Refer to the

Medicine and Surgery section of the Physician Services Handbook for more information about these incentive programs.

Refer to the latest edition of CPT or to the Centers for Medicare and Medicaid Services 1995 or 1997 Documentation Guidelines for Evaluation and Management Services at *www.cms.hhs.gov/MLNEdWebGuide/* 25\_EMDOC.asp for guidelines for determining the appropriate level of E&M services.

Since counseling may constitute a significant portion of the E&M services delivered to recipients with mental health and/or substance abuse diagnoses, providers are required to fully document the percentage of the E&M time that involved counseling. This documentation is necessary to justify the level of E&M visit allowed by Wisconsin Medicaid.

Claims for services delivered by ancillary staff under the *direct, on-site supervision* of a primary care physician must be submitted under the Medicaid provider number of the supervising physician. Wisconsin Medicaid limits coverage and reimbursement for these services to CPT code 99211 or 99212 as appropriate.

## Information Regarding Medicaid HMOs

This Wisconsin Medicaid and BadgerCare Update contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

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The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at *dhfs.wisconsin.gov/medicaid/*.

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