

**Affected Programs:** BadgerCare Plus, Medicaid

**To:** Advanced Practice Nurse Prescribers, Counties Certified for Outpatient Mental Health/Substance Abuse Services in the Home or Community, County Mental Health Coordinators, Federally Qualified Health Centers, Hospital Providers, Master's-Level Psychotherapists, Outpatient Mental Health Clinics, Outpatient Substance Abuse Clinics, Physician Clinics, Physicians, Psychologists, Tribal Human Service Facilitators, HMOs and Other Managed Care Programs

## **New Policy for the Outpatient Mental Health Benefit and Corrections to Previously Published Information**

This *ForwardHealth Update* introduces new policy for the outpatient mental health benefit and issues corrections and changes to the January 2007 *Update* (2007-09), titled "Outpatient Mental Health Benefit."

### **New Policy for the Outpatient Mental Health Benefit**

The following introduces new policy for the outpatient mental health benefit for providers who provide services for Wisconsin Medicaid, the BadgerCare Plus Standard Plan, the BadgerCare Plus Benchmark Plan, and the BadgerCare Plus Core Plan for Adults with No Dependent Children.

### ***Pharmacologic Management No Longer Reimbursable for Master's Degree Level Therapists***

Effective for dates of service (DOS) on and after January 1, 2010, pharmacologic management (procedure code 90862) is no longer a reimbursable service for Master's degree level therapists (modifier "HO"). This change is to ensure our reimbursement policy is consistent with the scope of practice for Master's degree level therapists as defined by the Department of Regulation and Licensing.

### ***Revenue Code Added***

Effective for claims processed after November 10, 2008, revenue code 0510 (To be used for a medication check) has been added as an allowable revenue code for the outpatient mental health benefit for services provided by outpatient mental health hospitals. The policy for revenue code 0510 and procedure code 90862 (Pharmacologic management, including prescription, use, and review of medication with no more than minimal medical psychotherapy [quantity of 1.0 = 15 minutes]) is the same.

Providers should indicate the corresponding Healthcare Common Procedure Coding System (HCPCS) procedure code on the claims along with the revenue code to help clarify which service is being rendered. The HCPCS procedure code can be indicated in the following formats:

- Form Locator 44 of the UB-04 Claim Form when submitting claims on paper.
- Loop 2300, Element HI01-2 of the 837 Health Care Claim: Institutional transaction when submitting claims electronically.

- The Procedure Code field on the detail panel of the Institutional form when submitting via Direct Data Entry through the Portal.
- The Procedure field on the SRV tab for the Institutional Outpatient Claim form when submitting via Provider Electronic Solutions (PES) software.

Refer to the Attachment of this *ForwardHealth Update* for a complete list of outpatient mental health revenue codes.

### ***Additional Assessment Hours May No Longer Be Submitted with Procedure Code H0046***

Effective for DOS on and after January 1, 2010, providers may no longer submit claims for assessment hours beyond the eight-hour limit by using procedure code H0046 (Mental health services, not otherwise specified). Providers must request prior authorization (PA) for assessment hours beyond the eight-hour limit every rolling 12 months.

Providers may submit a PA request for assessment hours beyond the eight-hour limit by submitting the Prior Authorization/Mental Health and/or Substance Abuse Evaluation Attachment (PA/EA), F-11033 (10/08), along with the Prior Authorization Request Form (PA/RF), F-11018 (10/08).

### **Corrections to Previously Published Information**

The following details corrections and changes to the January 2007 *Update* (2007-09), titled “Outpatient Mental Health Benefit.” The Online Handbook has been revised to reflect these changes. These changes affect providers who provide services for Wisconsin Medicaid, the BadgerCare Plus Standard Plan, the Benchmark Plan, and the Core Plan.

### ***Footnote Corrected***

*Update* 2007-09 incorrectly attached footnote “b” with procedure code 90862 in Attachment 16 of the *Update*. The footnote applies to procedure code 90899 (Unlisted psychiatric service or procedure [quantity of 1.0 = 60 minutes]).

### ***Modifiers Attached to the HCPCS Procedure Code***

Attachment 17 of *Update* 2007-09 incorrectly listed required modifiers for outpatient mental health revenue codes.

Providers should continue to indicate the appropriate professional level modifier with the HCPCS procedure code to identify the credentials of the provider who rendered the service and to help clarify which service is being rendered.

### ***Services Cannot Be Delegated to Ancillary Providers***

Services provided under the outpatient mental health benefit cannot be delegated to ancillary providers and are not reimbursable by Medicaid and BadgerCare Plus for ancillary providers. *Update* 2007-09 incorrectly indicated services provided under the outpatient mental health benefit could be delegated to ancillary providers.

### ***Diagnosis Restrictions Removed for Procedure Code 90887***

*Update* 2007-09 incorrectly listed diagnosis restrictions for procedure code 90887 (Interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to family or other responsible persons, or advising them how to assist patient [quantity of 1.0 = 60 minutes]). Diagnosis restrictions for this procedure code have been removed.

## **Information Regarding Managed Care Organizations**

This *Update* contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization. Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

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

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin Well Woman Program is administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at [www.forwardhealth.wi.gov/](http://www.forwardhealth.wi.gov/).

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# ATTACHMENT

## Outpatient Mental Health Revenue Codes

The following table lists the revenue codes that providers are required to use when submitting claims for outpatient mental health services. Providers should use the corresponding Healthcare Common Procedure Coding System procedure code on the UB-04 Claim Form to help identify the service that is being rendered.

Revenue Code	Category	Description	Certified Providers Who May Perform Service
0900	Psychiatric/Psychological Treatments	General Classification	Master's degree level
			Doctoral level
			Psychiatrist
0902	Psychiatric/Psychological Treatments	Milieu Therapy	Master's degree level
			Doctoral level
			Psychiatrist
0903	Psychiatric/Psychological Treatments	Play Therapy	Master's degree level
			Doctoral level
			Psychiatrist
0909	Psychiatric/Psychological Treatments	Other Psychiatric/Psychological Treatment	Master's degree level
			Doctoral level
			Psychiatrist
0910	Psychiatric/Psychological Treatments	General Classification	Master's degree level
			Doctoral level
			Psychiatrist
0911	Psychiatric/Psychological Treatments	Rehabilitation	Master's degree level
			Doctoral level
			Psychiatrist
0914	Psychiatric/Psychological Treatments	Individual Therapy	Master's degree level
			Doctoral level
			Psychiatrist
0915	Psychiatric/Psychological Treatments	Group Therapy	Master's degree level
			Doctoral level
			Psychiatrist
0916	Psychiatric/Psychological Treatments	Family Therapy	Master's degree level
			Doctoral level
			Psychiatrist
0919	Psychiatric/Psychological Treatments	Other Behavior Health Treatments/Services	Master's degree level
			Doctoral level
			Psychiatrist
0510	Clinic	General Classification (Medication Check)	Psychiatrist
			Advanced practice nurse prescriber — psychiatric
			Physician assistant