

# ForwardHealth **UPDATE**

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## **EXPANDED MOBILE CRISIS BENEFIT AND CHANGES TO CRISIS INTERVENTION SERVICES CLAIM SUBMISSION**

Under the [American Rescue Plan Act of 2021](#), the Wisconsin Department of Health Services (DHS) is expanding coverage for crisis intervention services to align more closely with the Crisis Now model. Changes to billing codes and claims submission will give crisis programs and DHS clearer information about utilization of services along the crisis continuum of care. This ForwardHealth Update describes the first phase of changes for crisis intervention and mobile crisis services. In 2024, the second phase will provide enhanced reimbursement for eligible mobile crisis services. More information will be published at a later date.

### **Expanded Coverage and Requirements for Mobile Crisis Teams**

Effective for dates of service (DOS) on and after January 1, 2023, Wisconsin Medicaid reimburses Medicaid-enrolled crisis programs for

## **AFFECTED PROGRAMS**

BadgerCare Plus, Medicaid

## **TO**

Crisis Intervention Providers, HMOs and Other Managed Care Programs

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up to three providers on a mobile crisis team who render services as part of a mobile crisis team response per DOS.

To receive reimbursement, the mobile crisis team must meet the following requirements:

- All team members must be trained and rostered with the county crisis intervention program, per Wis. Admin. Code ch. DHS [34](#).
- Each team includes at least one behavioral health professional who is qualified to do assessments in accordance with Wis. Admin. Code § [DHS 34.22\(3\)\(b\)](#) and at least one additional Wisconsin Medicaid provider.
- At least one team member must provide services in person. Additional team members may provide services in person or through telehealth.

For more information about telehealth policy, refer to the Telehealth topic ([#510](#)) in the ForwardHealth Online Handbook.

Wisconsin Medicaid will continue to reimburse for mobile crisis services rendered by a single crisis provider.

## Crisis Intervention Services Claim Submission

### New Procedure Codes for Crisis Intervention Services

Effective for DOS on and after January 1, 2023, the following procedure codes have been added for crisis intervention services:

- H0030 (Behavioral health hotline service [limited to one call per day, per member])
- H2011 (Crisis intervention service, per 15 minutes)
- T1016 (Case Management, each 15 minutes)

Effective for DOS on and after January 1, 2023, the following procedure codes will be used only for crisis stabilization services:

- S9484 (Crisis intervention mental health services, per hour)
- S9485 (Crisis intervention mental health services, per diem)

The addition of procedure codes H0030, H2011, and T1016, and change in the use of procedure codes S9484 and S9485 allow claims to more accurately identify services that occur along the **crisis continuum**:

“Effective for dates of service (DOS) on and after January 1, 2023, Wisconsin Medicaid reimburses Medicaid-enrolled crisis programs for up to three providers on a mobile crisis team who render services as part of a mobile crisis team response per DOS.

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- **Local Crisis Intervention Line (H0030):** This service is frequently a member’s initial contact with the local county crisis program. The service is initiated when a member or an individual acting on behalf of the member (referent) contacts the county crisis line to seek professional local support for a member experiencing a behavioral health crisis. The local crisis intervention line includes two components:
  - **Telephonic Triage:** Upon contact by the individual or referent, a provider will determine the appropriate service response to the crisis, including the need for immediate, in-person intervention. Telephonic crisis triage also includes a preliminary assessment to determine the need for further evaluation and to make treatment recommendations and/or referrals to other health and/or behavioral health services as clinically indicated. Crisis line triage is not a billable service.
  - **Telephonic Response:** If crisis triage indicates the need for further evaluation and/or crisis response, the crisis staff person may prepare and initiate a response plan approved as medically necessary by a qualified mental health professional. The crisis staff person may provide crisis counseling and de-escalation strategies and/or refer or arrange for additional behavioral health services to aid the member in returning to a safe and more stable level of functioning. Medically necessary response plans are reimbursable. The telephonic response is a billable service using procedure code H0030.
- **Crisis Response (H2011):** This service provides a rapid, in-person response to a member experiencing a behavioral health crisis, regardless of the member’s location. The service is typically provided by going to the member in crisis (that is, mobile crisis) but may also be provided on a walk-in basis. Crisis response includes individual assessment and crisis resolution services rendered by a practitioner or team of practitioners for a member in crisis. Team responses of two practitioners are encouraged whenever possible. Up to three practitioners are eligible for reimbursement on a single DOS when medically necessary. Crisis response services end when the crisis situation is de-escalated **or** the member is admitted to a higher level of care, such as a hospital or stabilization facility.
- **Linkage and Follow-Up (T1016):** This service involves implementation of follow-up activities from the response plan created during a local crisis line call or crisis response or following discharge from a stabilization service.
  - Linkage and follow-up includes periodic follow-up contacts, coordination of additional services and supports, and enhancing

## QUICK LINKS

- Covered Services topic ([#6763](#))
- Member Eligibility for Crisis Intervention Services ([#6761](#))
- Initial Assessment and Planning topic ([#6803](#))
- Crisis Linkage and Follow-Up Services topic ([#6804](#))
- Optional Crisis Stabilization Services topic ([#6805](#))
- Crisis Stabilization Guidelines topic ([#6759](#))

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individual and family coping skills until an ongoing services practitioner can begin or resume care.

- Linkage and follow-up may also include development and implementation of a crisis plan if the member is at risk for a recurring crisis. The crisis plan must conform to the requirements in Wis. Admin. Code ch. DHS 34.

- **Crisis Stabilization** (S9484 and S9485): Crisis stabilization services provide short-term, intensive, community-based services and supports in a residential setting to avoid the need for inpatient hospitalization. Services may be provided on an hourly (S9484) or a per diem basis (S9485). For more information about stabilization, refer to the Optional Crisis Stabilization Services topic ([#6805](#)) of the Online Handbook.

All service notes required by state regulation, including updates to the crisis plan if one is on file, must be completed for each service rendered.

Refer to the [Attachment](#) to this Update for information about claim submission and reimbursement for crisis intervention services.

### New Modifiers for Crisis Intervention Services

Effective for DOS on and after January 1, 2023, the following modifiers will be added for crisis intervention services:

- U8 (Certified Peer Specialist)
- FQ (The service was furnished using audio-only communication technology)
- GT (Via interactive audio and video telecommunication systems)
- HT (Multi-disciplinary team)
- U1 (Second renderer with the same professional level modifier on the same DOS for the same procedure code [H2011 or T1016])
- U2 (First Responder Level 1 [Emergency Medical Responder, Emergency Medical Technician (EMT), Advanced EMT, and EMT-Intermediate])
- U3 (First Responder Level 2 [Paramedic and Paramedic with Critical Care Endorsement for Inter-Facility Transport Only])

Note: With the addition of modifier U8, modifier U7 (Paraprofessional) should no longer be used for certified peer specialists.

Refer to the Modifiers topic ([#6777](#)) of the Online Handbook for a list of professional level and additional modifiers for crisis intervention service claims.

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## Place of Service

On a single DOS, if services are rendered in more than one place of service (POS), providers must determine the most appropriate POS code to use. Services rendered in a hospital, emergency room, skilled nursing facility, nursing home, or inpatient psychiatric facility must always be listed on individual detail lines with the corresponding POS code.

### *Additional Allowable Place of Service Codes*

Effective for DOS on and after January 1, 2023, ForwardHealth has added the following POS codes for crisis intervention services:

- 16 (Temporary Lodging)
- 17 (Walk-In Retail Health Clinic)
- 18 (Place of Employment—Worksite)
- 24 (Ambulatory Surgical Center)
- 52 (Psychiatric Facility—Partial Hospitalization)
- 53 (Community Mental Health Center)
- 55 (Residential Substance Abuse Treatment Facility)
- 58 (Non-Residential Opioid Treatment Facility)

Refer to the Place of Service Codes topic ([#6798](#)) of the Online Handbook for a complete list of allowable POS codes for crisis intervention services.

## Claim Submission

Only enrolled county crisis programs can submit and be reimbursed for claims submitted to ForwardHealth for crisis intervention services. Individual renderers must be Medicaid providers trained and rostered with the county's DHS 34-certified crisis program. A single provider may not bill more than one service for the same unit of time.

For each service rendered on a DOS, the claim must include a detail line for each renderer. Each detail line must include a professional level modifier. The HT modifier must be used if the service was provided as part of a mobile team.

On a single DOS with more than one renderer, if two detail lines are identical (that is, they use the same procedure code, modifiers, and rendering provider ID), the U1 modifier must be included on one of the two lines to prevent the detail line from denying as a duplicate.

## NEVER MISS A MESSAGE

Stay current on policies and procedures by signing up for Portal text messages or email alerts! These alerts let providers know when there is a new secure Portal message. Go to the **Message Center** on the secure Portal and click **Notification Preferences**. Section 12.4 of the [ForwardHealth Provider Portal Account User Guide](#) has detailed instructions.

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## Training Video

To better understand how to submit claims for crisis intervention services, providers may watch the [Changes to Crisis Intervention Services and Claims Submission Training](#) video on the [Trainings](#) page of the Portal.

## Documentation Retention

Providers are reminded that they must follow the documentation retention requirements per Wis. Admin. Code § [DHS 106.02\(9\)](#). Providers are required to produce or submit documentation, or both, to DHS upon request. Per Wis. Stat. § [49.45\(3\)\(f\)](#), providers of services shall maintain records as required by DHS for verification of provider claims for reimbursement. DHS may audit such records to verify the actual provision of services and the appropriateness and accuracy of claims. DHS may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in sanctions including, but not limited to, termination from the Medicaid program.

## Information Regarding Managed Care Organizations

This Update applies to crisis intervention services that members receive on a fee-for-service basis from Wis. Admin. Code ch. DHS 34-certified county crisis programs or their contracted providers.



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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 Medicaid Services within the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health within DHS.

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

# ATTACHMENT

## Claim Submission and Reimbursement for Crisis Intervention Services

The table below explains appropriate procedure code and modifier use for crisis intervention services in the crisis continuum.

CRISIS INTERVENTION SERVICE	PROCEDURE CODE	MODIFIER TYPE	REIMBURSEMENT
Local Crisis Intervention Line	H0030 (per call)	Professional (required)	H0030 reimbursement is for one provider who takes the initial call.
Crisis Response	H2011 (per 15 min)*	Professional (required) + additional (as applicable)	H2011 reimbursement is for each provider who renders a mobile response, up to three providers per date of service (DOS).
Linkage and Follow-Up	T1016 (per 15 min)*	Professional (required) + additional (as applicable)	T1016 reimbursement is for each provider who renders linkage or follow-up, up to three providers per DOS.
Crisis Stabilization	S9484 (hourly)** S9485 (per diem)	Professional (required for S9484)	S9484 reimbursement is an hourly rate. S9485 reimbursement is a daily rate.

\* For units that represent 15 minutes of service, a unit of time has been reached when a provider has completed at least 51 percent of the designated time unit.

\*\* Rounding guidelines apply to procedure code S9484, per the Rounding Guidelines topic ([#22537](#)) of the ForwardHealth Online Handbook.

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