## SAMHSA-HRSA Center for Integrated Health Solutions



X SAMHSA

\*HRSA

## Financing integrated Healthcare in Ohio

As of: August 29. 2011

		Diagnostic	Federally Qualified Health Centers (FQHC)						
	CPT Code	Code	Medicare		State Medicaid				
			Paid?	Credentials	Paid?	Code	Credentials	Comments	
	99201-99205	May be used	Yes MD, PA, ANP		1	T1015	MD, PA, APN	Include CPT	
es	New Pt	only with		Υ	.1013		code		
M Codes	99211-99215	physical		7 ' '		T1015	MD, PA, APN	Include CPT	
	Est. Pt	health			у		, ,	code	
E &		diagnosis							
			Yes						
						_			
	96150	Services are	Yes Non-physician men health practitioners	Non-physician mental	N				
	Assessment	secondary to		health practitioners					
ABI	96151	a physical			N				
E)	Reassessment	health	Yes	Psychologist only at this					
ior	96152	diagnosis	Yes	time; excludes CSW	N				
hav	Individual Int.			4					
Be	96153		Vos		N				
Health and Behavior (HABI)	Group Int. 96154		Yes	-	N				
‡	Family +		Yes		l IN				
eal	Patient		165						
	96155			7	N				
	Family w/o Pt		No						
	, ,				II				
	90801- Assess/			-Physician					
	Psych.Eval		Yes	-Nurse Practitioner	N				
	90804 -09		Yes	-Physician Assistant -Clinical Nurse Specialist -Clinical psychologist*	N				
	90862				N				
	Med Mgmt		Yes						
	99201 – 99205			-Clinical social worker*	N				
	New Pt		Yes	*Cannot bill for psychotherapy services that include medical evaluation and management services					
	99211 -99215		Yes		N				
ine	Est. Pt.		N. 1						
Telemedicine	99241-99245		No <sup>1</sup>		N				
a.	99251 -99255 F-U Inpt Consul		No		N N				
le le	- limited		Yes	under Medicare. May	N				
	F-U Inpt Consul		163	not bill or receive	N				
	– intermediate		Yes	payment for:	14				
	F-U Inpt -		T	90805, 90807, and	N			1	
	Complex		Yes	90809.					
	Initial 30 min		Yes	7	N				
	Initial 50 min		Yes	7	N	1			
	Initial 70 min		Yes	7	N				
	Facility Fee		Yes		N				
	90804 – 90815			Physicians and non-		Use CPT	MD, PA, APN,	Use modifier for	
ce			Yes	physicians such as	Υ		licensed	type of	
tan				clinical social worker, &			Psych,	practitioners	
Substance Abuse Codes				clinical psychologists			licensed CSW	(AH, AJ, HN, HO,	
S				licensed by the state				HP)	
	90847,90853,				Υ	Use CPT	MD, PA, APN,	Use modifier for	

<sup>&</sup>lt;sup>1</sup> Medicare Manual Update, Publication 100-04 notes that CPT 99241-99245 has been discontinued effective 1/1/10. These codes are to be replaced by CPT 99201-99215. Likewise, CPT 99251-9925 has been replaced by G0425-G0427.

	90857		Yes				licensed Psych, licensed CSW	type of practitioners (AH, AJ, HN, HO, HP)
	AOD Assess		Yes					
	BH Screening		Yes					
	BH Counseling		Yes					
	AOD Group		Yes					
	IOP Services		No					
	90801 -90815	Used with BH Diagnosis Codes	Yes	Physicians and non- physicians, such as clinical social workers & clinical psychologists	Y	T1015		Include CPT code, practitioner type modifiers
Mental Health	90847, 90853, 90857,90772, 90862,90865, 90887, 96101		Yes	licensed by the state	Y	T1015		90862, 90865, 90387, 96101 NOT COVERED; include other CPT code, practitioner type modifiers
	BH Coun&Ther		Yes		N			
	MH Assess		Yes		N			
	Crisis Stab.		No <sup>2</sup>		N			
Two	Services in One Day	Billable at the F	QHC?		Subseque	nt illness, injur	y only	
Case Mgmt			No		N			

.

<sup>&</sup>lt;sup>2</sup> No separate billing code for crisis stabilization services, however, Medicare does permit a psychiatrist to bill for extended appointments under other CPT codes.

	Diagnostic		Community Mental Health Centers (CMHC)						
_		Code		Medicare	State Medicaid				
<u> </u>			Paid?	Credentials	Paid?	Code	Credentials	Comments	
S.	99201-99205	Used only							
Codes	New Pt 99211-99215	with physical health		-					
Σ	Est. Pt	diagnosis							
E & M	250.7.0								
	06150	Continue		No. of all all all all all all all all all al	N				
	96150 Assessment	Services are secondary to	No health practitioners	Non-physician mental	N				
Health and Behavior (HABI)	96151	a physical		nearth practitioners	N				
美	Reassessment	health	No	Psychologist only at this time; excludes CSW					
Š	96152	diagnosis			N				
eha	Individual Int.		No	4					
g B	96153 Group Int.	-	No		N				
h ar	96154		140		N				
ealt	Family + Patient		No						
Ĭ	96155				N				
	Family w/o Pt		No						
	90801- Assess/				Υ	H0031	Qualified	MH Assessment	
	Psych.Eval		Yes	-Physician	'	H0031	practitioner	Service under	
	1 3 7 611. 2 4 41		163	-Nurse Practitioner			practicing n	Rehabilitation	
				-Physician Assistant			ODMH	Option	
				-Clinical Nurse Specialist			certified CMH		
				-Clinical psychologist*			Agency		
				-Clinical social worker*					
				*Cannot bill for					
	90804 -09		Yes	psychotherapy services	Υ	H0004	Qualified	Behavioral	
				that include medical		H0036	practitioner	Health	
				evaluation and			practicing in ODMH	Counseling Service under	
				management services under Medicare. May			certified CMH	Rehabilitation	
				not bill or receive			Agency	Option AND	
				payment for:				Community	
				90805, 90807, and				Psychiatric	
				90809.				Supportive Treatment	
				Note: When a CMHC				Service under	
licine				serves as an originating				Rehabilitation	
edi				site, the originating site				Option	
Telemed	90862		Yes	facility fee does not	Υ	90862		Pharmacological	
l e	Med Mgmt		count toward the				Management Services under		
				number of services used to determine payment				Rehabilitation	
				for partial				Option	
	99201 – 99205		Yes hospitaliza	hospitalization services.	N				
	New Pt			4	<u> </u>				
	99211 -99215 Est. Pt.		Yes		N				
	99241-99245		No		N				
F	99251 -99255		No		N		1		
	F-U Inpt Consul -			7	N				
<u> </u>	limited		Yes	_					
	F-U Inpt Consul		V		N				
-	- intermediate F-U Inpt -		Yes	-	N				
	Complex		Yes		l N				
	Initial 30 min		Yes	1	N				
	Initial 50 min		Yes	1	N				
	Initial 70 min		Yes		N				
	Facility Fee		Yes		N				

	90804 – 90815	Yes	Physicians and non- physicians such as clinical social worker, & clinical psychologists licensed by the state	Y	H0004 H0005	Qualified practitioner practicing in ODADAS certified Treatment Program	CAVEAT: In Ohio ONLY CMHC's which also are ODADAS- Certified Treatment Programs can provide substance abuse services
	90847,90853,	.,		?			
odes	90857 AOD Assess	Yes Yes		Y	H0001	Qualified practitioner practicing in ODADAS certified Treatment Program	
rse	BH Screening			N	N		
Substance Abuse Codes	BH Counseling	Yes Yes		Y	H0004	Qualified practitioner practicing in ODADAS certified Treatment Program	
	AOD Group	Yes		Υ	H0005	Qualified practitioner practicing in ODADAS certified Treatment Program	
	IOP Services	No		Υ	H0015	Qualified practitioner practicing in ODADAS certified Treatment Program	
	Laboratory Urinalysis			Y	H0003	ODADAS certified treatment program	Rehabilitation Option Service
	Medical/Somatic			Y	H0016	Qualified practitioner practicing in ODADAS certified Treatment Program	Rehabilitation Option Service
	Methadone Administration			Y	H0020	Qualified practitioner practicing in ODADAS certified Treatment Program	Rehabilitation Option Service
	Ambulatory Detoxification			Y	H0014	Qualified practitioner practicing in ODADAS certified Treatment Program	Rehabilitation Option Service
	Crisis			Υ	H0005	Qualified	Rehabilitation
<u> </u>	1			Ī	1	-,	

	Intervention					practitioner practicing in ODADAS certified Treatment Program	Option Service
Mental Health	90801 -90819	Yes	Physicians, CSW's, clinical nurse practitioners, clinical nurse specialists, and psychologists licensed by States	Y	90801		Psychiatric Diagnostic Interview Service under Rehabilitation Option
uta	90821 -90824	Yes		N			
Σ	90826 -90829	Yes		N			
	98045,90847, 90853,90857, 90865,96101	Yes		N			
	Partial Hospitalization			Υ	S0201		Rehabilitation Option Service
	Crisis Intervention			Υ	S9484	Qualified practitioner practicing n ODMH certified CMH Agency	Rehabilitation Option Service
Case Mgmt	AOD Case Management			Y	H0006	Qualified practitioner practicing in ODADAS certified Treatment Program	Rehabilitation Option Service
Case Mgmt	CPST Individual and Group			Υ	Н0036	Qualified practitioner practicing n ODMH certified CMH Agency	NOTE: "CASE MANAGEMENT- LIKE ACTIVITIES ARE EMBEDDED IN THE CPST SERVICE UNDER THE REHABILITAION OPTION

## Sources

 ${\sf OAC\,5101:3-1-60\,Appendix\,DD\,Medicaid\,Reimbursement\,Rule,\,Fee\,Schedule\,Table}$ 

OAC 5101:3-13-04 Covered Specialty Clinic Services

OAC 5101:3-8-23 Advanced Practice Nurses: Coverage and Limitations

OAC 5122-29-30 ODMH Certified CMH Agency Eligible Providers and Supervisors

 ${\tt OAC\,5101:3-27-02\,Coverage\,and\,Limitations\,of\,Medicaid\,Community\,Mental\,Health\,Services}$ 

OAC 5101:3-28-04 Federally Qualified Health Centers (FQHC's): Billable Services

OAC 5101:3-4-06 Physician Visits

OAC 5101:3-8-05 Covered Psychology Services and Limitations

OAC 5101:3-4-29 Services Provided for the Diagnosis and Treatment of Mental and Emotional Disorders

OAC 5101:3-13-04 Covered Specialty Clinic Services

OAC 5122-29-04 Mental Health Assessment Service

OAC 5122-29-03 Behavioral Health Counseling and Therapy Service

OAC 5122-29-05 Pharmacologic Management Service

OAC 5122-29-17 Community Psychiatric Supportive Treatment Service

http://emanuals.odjfs.state.oh.us/emanuals/GetTocDescendants.do?maxChildrenInLevel=100&nodeId=%23node-id%28425%29 (ODJFS Ohio Health Plans eManual)

## http://jfs.ohio.gov/ohp/bhpp/FeeSchdRates.stm

ODMH Numbered Advisory: 9-FY11-5 (Medicaid Fee Schedule Codes/Rates for ODMH and ODADAS Certified Agencies/Programs for Medicaid Rehabilitation Option Services)

ODMH Correspondence #C-06-08-01 June 10, 2008 Telemedicine advisory