



# FY2022 (October 1, 2021) Encounter Coding Changes MH Provider Guide

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## Project Summary

The CMHPSM and our regional partners are completing setup for the new MDHHS encounter reporting requirements in CRCT which are set to take effect for services delivered on or after October 1, 2021. We are being asked by MDHHS to compile service encounter information in a different manner and thus will need our provider network to supply service encounters that meets the new MDHHS requirements. We are hoping to make this transition as painless as possible to our provider network as we know you all are already taxed. We have worked on this project as a region to enable reciprocity throughout our four-county region. We will continue to update this guide and publish it to the CMHPSM website to keep provider staff aware of all changes.

## New or Revised Service Codes

### Expiring Codes

The following codes are expiring and will not be replaced:

Billing	Service Description	Action Needed
<b>A0170</b>	Transportation Ancillary; Parking Fees, Tolls, Other	Expire 9/30/2021
<b>S0215</b>	Non-Emergency Transportation; Mileage, Per Mile	Expire 9/30/2021
<b>T2001</b>	Bus Token	Expire 9/30/2021
<b>T2002</b>	Non-emergency Transportation; per diem	Expire 9/30/2021
<b>T2003</b>	Non-Emergency Transportation; Encounter/Trip.	Expire 9/30/2021
<b>T2004</b>	Gas Card	Expire 9/30/2021
<b>T2005</b>	Non-emergency transportation; stretcher van	Expire 9/30/2021

### Replaced Codes

The following codes are expiring on 9/30/2021 and will be replaced by the codes indicated within the table:

Billing Code	Service Description	Action Needed
<b>T1016</b>	Supports Coordination	Replace with T1017 as of 10/1/2021

## Revised Shared Service Modifiers

### Transition from “TT” to “U” Modifiers for Shared Services

The TT modifier will be removed for all shared services delivered on or after 10/1/2021 and providers should utilize the “U” modifiers below:

Modifier	Modifier Description
UN	2 consumers served by one staff person
UP	3 consumers served by one staff person
UQ	4 consumers served by one staff person
UR	5 consumers served by one staff person
US	6 or more consumers served by one staff person

The shared service “TT” modifier was removed for H2015 (Unlicensed Community Living Supports) on 10/1/2020 and the “U” shared service modifiers were required whenever appropriate. Group modifiers should reflect number of group members covered by the same payer. If a provider is serving a group of 7 individuals with 3 individuals having private insurance and 4 individuals having Medicaid, the provider would report only on the 4 individuals covered by Medicaid and thus report UQ on each of the individual related claims.

Service codes that “U” shared service modifiers should be applied to whenever appropriate for services delivered on or after 10/1/2021:

Billing Code	Service Description
90853	Group Therapy
H0036	Homebased Services
H0038	Peer Support Services
H0039	Assertive Community Treatment (ACT)
H0046	DD Peer Mentor Services
H2014	Skill Building & Training
H2015	Comprehensive Community Support Services (CLS)
H2019	Dialectical Behavioral Therapy (DBT)
H2022	Wraparound Per Diem
H2023	Supported Employment
S5111	Family Training
S9123	Private Duty Nursing, RN: habilitation supports waiver (individual nurse only) 21 years and over ONLY
S9124	Private Duty Nursing, LPN: habilitation supports waiver (individual nurse only) 21 years and over ONLY
T1000	Private Duty/independent nursing service, licensed (HSW Only)
T1005	Respite Care Services
T1012	Recovery Supports
T2015	Prevocational Services (HSW Only)
T2027	Overnight Health and Safety

## FY2022 CLS Overnight Health and Safety Transition

While a majority of the changes to CLS reimbursement went in to place on 10/1/2020, there is also a 10/1/2021 change. In FY2021 we transitioned reporting of overnight health and safety services to T2027 for waiver consumers. Starting on 10/1/2021, non-waiver consumers that are authorized for overnight health and safety CLS services will have those services reported as H2015 UJ. There are no billing changes for non-waiver individuals not authorized for overnight health and safety CLS.

CLS Authorization Situation:	Service Authorized With:	CLS Service Claims:	Overnight Health and Safety Claims:
Individual is on a c-waiver (HSW, SED or CW) and qualifies for T2027 Overnight Health and Safety Services	H201X	H2015 and/or T2027	T2027
Individual is on a c-waiver (HSW, SED or CW) and does not qualify clinically for T2027 Overnight Health and Safety Services	H2015	H2015	N/A
Individual is not on a c-waiver and qualifies clinically for Overnight Health and Safety CLS	H2015	H2015	H2015 UJ
Individual is not on a c-waiver and does not qualify clinically for Overnight Health and Safety CLS	H2015	H2015	N/A

For more information on the FY2021 CLS changes : <https://www.cmhpsm.org/fy21clstransition>

### Autism Service U5 Modifier No Longer Required

Beginning on 10/1/2021 providers will no longer need to add the U5 modifier to ABA service claims. However, providers should enter the appropriate staff credential modifier on ABA services as required by MDHHS. ABA service staff credential modifiers examples include: “HN” for BCaBA or “HO” for Licensed Behavior Analyst/BCBA staff, more staff credential modifiers are outlined in the table below.

### CRCT Service Claims

Providers will be authorized for shared services either directly based upon the appropriate shared service modifier or with the base service code. Providers are required to bill the appropriate modifier based upon the CMHPSM insured individuals being served by the individual staff.

Shared service modifiers should be added to each claim as appropriate. The reimbursement rates for shared modifiers for each service may differ depending on the service. Please refer to your contract or your contract contact related to specific reimbursement rates.

## Staff Credential Modifiers

MDHHS is also seeking to implement modifiers related to the credentials of the staff delivering services.

Providers must enter the following modifiers for all appropriate services when submitting claims (i.e. services that MDHHS requires the clinician credentials outlined in the table below).

Modifier	Job Title
AE	Licensed/Registered Dietician/Nutritionist
AF	Psychiatrists - MD/DO
AG	Physicians - MD/DO
AH	Licensed Psychologist - PhD
AH	Limited Licensed Psychologist
AH	Temporary Limited-Licensed Psychologist
AH	Behavioral Psychologist
CO	Occupational Therapist Assistant
CQ	Physical Therapist Assistant
HM	Certified/registered medical assistant
HM	Behavioral Technician
HM	Certified Alcohol and Drug Counselor
HM	Approved MCBAP Development Plan Counselor
HM	Clubhouse /Day Treatment Specialist
HM	Supports Coordinator Assistant (Case manager aide)
HM	Supports Broker
HM	Direct Support Professional
HM	Parent Support Partner
HM	Residential Care Specialist
HM	Home Based Services Worker
HM	Home Based Services Assistant
HM	Other Mental Health Professional - HS or G.E.D.
HN	Occupational Therapist
HN	BCaBA
HN	Access Coordinator
HN	Therapeutic Recreation Specialist
HN	CCDP Bachelor's
HN	Licensed/Limited Licensed Social Worker - Bachelor's
HN	Certified Advanced Alcohol and Drug Counselor - Bachelor's
HN	Certified Alcohol and Drug Counselor - Bachelor's
HN	Approved MCBAP Development Plan Counselor - Bachelor's
HN	Certified Criminal Justice Professional Reciprocal
HN	Case Manager / Supports Coordinator - Bachelor's
HN	Other Bachelor's Level Behavioral Health Professionals
HO	Physical Therapist
HO	Speech Pathologist/Audiologist
HO	QBHP: BACB Approved Degree

Modifier	Job Title
HO	MCBAP Certification and Certified Clinical Supervisor
HO	Development Plan Supervisor
HO	Licensed Behavior Analyst/BCBA
HO	Mental Health Clinician
HO	CCPD - Master's
HO	Licensed/Limited Licenses Social Worker - Master's
HO	Licensed/Limited Licensed Professional Counselor
HO	Licensed/Limited Licensed Marriage And Family Therapist
HO	Certified Advanced Alcohol and Drug Counselor - Master's
HO	Certified Alcohol and Drug Counselor - Master's
HO	Approved MCBAP Development Plan Counselor - Master's
HO	Certified Criminal Justice Professional Reciprocal
HO	Case Manager / Supports Coordinator - Master's
HO	Music/Art Therapist
HO	Other Master's Level Behavioral Health Professionals
HP	Behavioral Health Professional - PhD
HP	BCBA-D
SA	Licensed Physician Assistant
SA	Nurse Practitioner
SA	Clinical Nurse Specialist
TD	Nurse BSN, RN - Master's
TD	Registered Nurse - Bachelor's
TE	Licensed Practical Nurse
WP	Trained Parents
WQ	Independent Facilitator

The CMHPSM is still analyzing potential fee-for-service reimbursement changes related to the FY2022 modifier changes and will keep the provider network informed of any such changes. We are currently determining to what extent we will align fee-for-service reimbursement with staff credentials. No reimbursement changes related to staff credentials are expected to be implemented prior to Quarter 2 of FY2022 (January 1, 2022).

## Supplemental Links

[https://www.michigan.gov/mdhhs/0,5885,7-339-71550\\_2941\\_38765---,00.html](https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_38765---,00.html)

The link above takes users to the page where all MDHHS encounter code chart information is documented. The individual links and versions of the documents frequently are updated so we typically provide a link to the page itself.

Linked documents on the MDHHS page include:

- Current PIHP/CMHSP Provider Qualifications Chart
- PIHP/CMHSP Encounter Reporting Costing Per Code and Code Chart

## Mental Health & Substance Use Disorder Reporting Requirements

### COVID-19 Encounter Code Chart

In order to monitor service provision, expenditures and consumer outcomes, the Department requires Community Mental Health Services Providers (CMHSPs), and Pre-Paid Inpatient Health Plans (PIHPs) to provide information and data on topics such as costs, services, consumer demographics, and administrative activities. The following is a list of key instructional documents for reporting to the federal Substance Abuse and Mental Health Services Administration.

[\(Click here for data reports and statistics.\)](#)

[Link to Core HIPAA-Related Health Plan Materials](#)

[PIHP/CMHSP Encounter Reporting Costing Per Code and Code Chart \(Updated 7/19/2021\)](#) 

[BHDDA Telemedicine Database \(4/7/2021\)](#) 

[PIHP/CMHSP Provider Qualifications Chart \(Updated 6/28/2021\)](#) 

[Michigan Fidelity Assistance Support Team \(MIFAST\)](#)

## Frequently Asked Questions

Please submit questions to [help@cmhpsm.org](mailto:help@cmhpsm.org)