## GOVERNMENT OF THE DISTRICT OF COLUMBIA Department of Health Care Finance



Office of the Senior Deputy Director/Medicaid Director

Transmittal # 22-33

**TO:** All Medicaid Providers Billing Services under the Fee Schedule

**FROM:** Melisa Byrd

Senior Deputy Director and Medicaid Director

**DATE:** September 28, 2022

**SUBJECT:** Reimbursement Rate Increase for Behavioral Health Services

**Purpose:** The purpose of this transmittal is to notify all Medicaid behavioral health service providers that the District of Columbia Medicaid Fee Schedule will be updated. The rate changes outlined in this transmittal are the result of recently approved changes to the District of Columbia Medicaid State Plan and the District's implementation of Section 9817 of the American Rescue Plan Act (ARPA) of 2021.<sup>1</sup>

Section 9817 of ARPA provides states with a temporary ten percent (10%) increase to the Federal Medical Assistance Percentage (FMAP) for Medicaid Home and Community-Based Services (HCBS). States must use the funds attributable to the enhanced FMAP to implement activities that enhance, expand, or strengthen Medicaid HCBS. The Centers for Medicare & Medicaid Services (CMS) May 13, 2021 guidance letter includes rehabilitative services, (e.g. State Plan mental health and substance use disorder services authorized under § 1905(a)(13) of the Social Security Act) within the definition of Medicaid HCBS.<sup>2</sup> As outlined in its approved ARPA Section 9817 Spending Plan, the Department of Health Care Finance (DHCF) will use the enhanced funding to increase reimbursement rates for community-based behavioral health rehabilitation services included in the State Plan, among other activities.

As detailed in an earlier transmittal (DC Transmittal #22-28), DHCF inflated behavioral health rehabilitative service reimbursement rates in accordance with the initiative outlined in our ARPA Section 9817 Spending Plan by 3.3% effective April 1, 2022. This transmittal increases the rates an additional 2.8% based on the growth in the Medicare Economic Index, effective October 1, 2022. Therefore, these services will receive an overall rate increase of 6.1% from the base rates.

The tables below provide a listing of both the billing codes and new rates for behavioral health rehabilitative services, including the temporary enhanced reimbursement rates for ASURS

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<sup>&</sup>lt;sup>1</sup> Pub. L. No. 117-2

<sup>&</sup>lt;sup>2</sup> SMD # 21-003, Available at: https://www.medicaid.gov/federal-policy-guidance/downloads/smd21003.pdf

during the federal COVID-19 Public Health Emergency.<sup>3</sup> The Medicaid Fee Schedule for those services is located on the DHCF website at

https://www.dc-medicaid.com/dcwebportal/nonsecure/feeScheduleInquiry.

#### Rehabilitative Services Effective October 1, 2022

#### Mental Health Rehabilitative Services (MHRS)

Service Description	Procedure Code	Modifier	Rate Effective 10/01/22
Screening, Diagnostic Assessment (at least 3hrs)	T1023	НЕ	\$ 275.34
Screening, Diagnostic Assessment (at least 3hrs)	T1023	GT, HE	\$ 275.34
Screening, Brief Diagnostic Assessment (40-50mins)	H0002		\$ 91.78
Screening, Brief Diagnostic Assessment (40-50mins)	H0002	GT	\$ 91.78
Med Training/Support Group	H0034	HQ	\$ 13.36
Med Training/Support Group	H0034	HQ, GT	\$ 13.36
Med Training/Support Individual	H0034		\$ 53.37
Med Training/Support Individual	H0034	GT	\$ 53.37
Community Support Group	H0036	HQ	\$ 6.45
Community Support Group	H0036	GT, HQ	\$ 6.45
Community Support Individual	H0036		\$ 25.77
Community Support Individual	H0036	GT	\$ 25.77
Community Support Collateral	H0036	UK	\$ 25.77
Community Support Family without consumer	H0036	GT, UK	\$ 25.77
Community Support Family without consumer	H0036	HS	\$ 25.77

<sup>&</sup>lt;sup>3</sup> <u>DHCF Transmittal # 20-36</u> outlines the temporary enhanced reimbursement rates for ASURS (Formerly ASARS). CMS approved DC SPA #20-007 to increase ASURS reimbursement by 20% during the federal COVID-19 public health emergency.

Community Support Family with consumer	H0036	GT, HS	\$ 25.77
Community Support Family with consumer	H0036	HR	\$ 25.77
Community Support Family with consumer	Н0036	GT, HR	\$ 25.77
Community Support CRF	H0036	U1	\$ 25.77
Community Support Physician Team Mbr	H0036	AM	\$ 25.77
Community Support Physician Team Mbr	H0036	GT, AM	\$ 25.77
Self-help/Peer Support	H0038		\$ 25.77
Self-help/Peer Support Group	H0038	HQ	\$ 6.45
Self-help/Peer Support Family Service	H0038	HS	\$ 23.33
Self-help/Peer Support Family Group Service	H0038	HQ, HS	\$ 7.06
Mental Health Clubhouse Services	H2031		\$ 100.88
Crisis Intervention Service	H2011		\$ 62.84
Day Services (1 day at least 3 hours)	H0025		\$ 124.14
Day Services (1 day at least 3 hours)	H0025	GT	\$ 124.14
Intensive Day Treatment (1 day at least 5 hours)	H2012		\$ 174.80
Community-Based Intervention - CBI (Level II) IHCBS	H2022		\$ 55.18
Community-Based Intervention - CBI (Level II) IHCBS	H2022	GT	\$ 55.18
Community-Based Intervention - CBI (Level III) IHCBS- short term	H2022		\$ 55.18
Community-Based Intervention - CBI (Level I) MST	H2033		\$ 55.18
Community-Based Intervention - CBI (Level I) MST	H2033	GT	\$ 55.18
Functional Family Therapy	H2033	HU	\$ 55.18
Assertive Community Treatment - ACT Individual	H0039		\$ 39.45

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Assertive Community Treatment - ACT Individual	H0039	GT	\$ 39.45
Assertive Community Treatment – ACT Group	H0039	HQ	\$ 9.88
Assertive Community Treatment – ACT Group	H0039	GT, HQ	\$ 9.88
Counseling Group	H0004	HQ	\$ 7.66
Counseling Group	H0004	GT, HQ	\$ 7.66
Counseling On-site Individual	H0004		\$ 30.59
Counseling On-site Individual	H0004	GT	\$ 30.59
Counseling On-site Family without Consumer	H0004	HS	\$ 30.59
Counseling On-site Family without Consumer	H0004	GT, HS	\$ 30.59
Counseling On-site Family with Consumer	H0004	HR	\$ 30.59
Counseling Off-site Individual	H0004	HE, TN	\$ 38.42
Child/Parent Psychotherapy	H0004	HT	\$ 38.42
Trauma-Focused Cognitive Behavioral Therapy	H0004	ST	\$ 38.42
Cognitive Behavioral Therapy Trauma- focused	H0004	GT, ST	\$ 38.42
Cognitive Behavioral Therapy Trauma- focused - TREM	H0004	ST, UB	\$ 10.62
Trauma Systems Therapy - TST	H0004	ST, UA	\$ 38.42
Case Management	H0006		\$ 23.33
Clinical Care Coordination	T1017		\$ 28.06

<u>Adult Substance Use Rehabilitative Services (ASURS)</u> – *Temporarily enhanced an additional 20% through the end of the federal COVID-19 PHE* 

Service Description	Procedure Code	Temporary Enhanced Rate Modifier	Temporary Enhanced Rate Effective 10/01/22
Urinalysis Collection	H0048	LR	\$ 11.21
Clinical Care Coordination	T1017	HF	\$ 33.67
Clinical Care Coordination	T1017	HF, GT	\$ 33.67
Counseling, Group	H0005		\$ 9.19
Counseling Group	H0005	GT	\$ 9.19
Counseling, Group, Psychoeducational	H2027	HQ	\$ 7.74
Counseling, Group, Psychoeducational	H2027	GT,HQ	\$ 7.74
Counseling, Group, Psychoeducational (HIV)	H2027	HF,HQ	\$ 7.74
Counseling, Individual, Onsite, Behavioral Health Therapy	H0004	HF	\$ 36.71
Counseling, Individual, Offsite	H0004	HF, TN	\$ 37.50
Counseling, Family with Client	H0004	HF, HR	\$ 36.71
Counseling, Family without Client	H0004	HF, HS	\$ 36.71
Crisis Intervention	H0007	HF	\$ 47.06
Short Term MMIWM - (Medically Monitored Inpatient Withdrawal Management)	H0010	U1	\$ 633.31
Behavioral Health Assessment, On-going, Risk Rating	H0002	TG	\$ 192.13
Diagnostic Assessment, Comprehensive Adult	H0001		\$ 330.40
Medication Assisted Treatment, Methadone, Clinic or Take Home	H0020		\$ 10.93
Medication Assisted Therapy, Administration	H0020	HF	\$ 10.93

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Medication Management, Adult	H0016		\$ 64.05
Medication Management, Youth	H0016	HA, HF	\$ 64.05
Multi-Systemic Therapy for Juveniles (ACRA) (ages 12- 20)	H2033	HA, HF	\$ 80.42
Multi-Systemic Therapy for Juveniles (ACRA) (ages 21- 24)	H2033	HF	\$ 80.42
Case Management	H0006		\$ 28.00
Case Management (HIV)	H0006	HF, HK	\$ 28.00
Recovery Support Service (RSS), Individual	H2014	UK, GT	\$ 30.93
RSS Group	H2014	HQ	\$ 7.74
Trauma Recovery and Empowerment Services (TREM)	H0004	ST, UB	\$ 12.74

### Behavioral Health Stabilization

Service Description	Procedure Code	Modifier	R	ate Effective 10/01/22
Brief Psych Emergency	S9484		\$	251.38
Extended Psychiatric Emergency	S9485		\$	1,162.81
Mobile Crisis Intervention	S9484	U1	\$	251.38
Mobile Outreach	H0023		\$	216.11
Short-term Psychiatric Stabilization	S9485	U1	\$	408.78

### **Transition Planning Services**

Service Description	Procedure Code	Modifier	R	Rate Effective 10/01/22
Transitional Planning Service	G9012		\$	1,084.57

### Rehabilitation Services for Deaf and Hard of Hearing Effective October 1, 2022

### Mental Health Rehabilitative Services (MHRS) for Deaf and Hard of Hearing

Service Description	Procedure Code	Modifier	Effective 01/22
Screening, Diagnostic Assessment (at least 3hrs)	T1023	не,нк	\$ 367.04
Brief Diagnostic Assessment (40-50mins)	H0002	НК	\$ 122.34
Med Training/Support Group	H0034	HK,HQ	\$ 19.38
Med Training/Support Individual	H0034	HK	\$ 64.01
Community Support Group	H0036	HK,HQ	\$ 9.54
Community Support Individual	H0036	HK	\$ 31.50
Community Support Collateral	H0036	HK,UK	\$ 31.50
Community Support Family without Consumer	H0036	HK,HS	\$ 31.50
Community Support Family with Consumer	H0036	HK, HR	\$ 31.50
Community Support CRF	H0036	HK,U1	\$ 31.50
Community Support, Physician Team Member	H0036	AM, HK	\$ 31.50
Community Support, Self-help/Peer Support	Н0038	НК	\$ 31.50
Community Support, Self-help/Peer Support Group	H0038	HK,HQ	\$ 9.54
Community Support, Family/Couple Peer Support Family Service	H0038	HK,HS	\$ 31.50
Crisis Emergency	H2011	HK	\$ 84.74
Day Services (1 day at least 3 hours)	H0025	HK	\$ 176.41
Intensive Day Treatment (1 day at least 5 hours)	H2012	НК	\$ 235.98
Community-Based Intervention - CBI (Level II and III) IHCBS	H2022	НК	\$ 51.24
Community-Based Intervention - CBI (Level I) MST	H2033	НК	\$ 82.32
Functional Family Therapy	H2033	HK,HU	\$ 82.32
Assertive Community Treatment - ACT Individual	H0039	НК	\$ 54.53

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Assertive Community Treatment - ACT Group	H0039	HK,HQ	\$ 16.50
Counseling Group	H0004	HK,HQ	\$ 11.47
Counseling on-site Individual	H0004	HK	\$ 37.88
Counseling on-site Family without Consumer	H0004	HK,HS	\$ 37.88
Counseling on-site Family with Consumer	H0004	HK,HR	\$ 37.88
Psychotherapy for Family Violence Child/Parent	H0004	нк,нт	\$ 51.24
Cognitive Behavioral Therapy Trauma-focused	H0004	HK,ST	\$ 51.24
Cognitive Behavioral Therapy Trauma-focused - TREM	H0004	ST, UB, HK	\$ 14.34
Trauma Systems Therapy - TST	H0004	ST, UA, HK	\$ 51.86
Mental Health Clubhouse Services	H2031	HK	\$ 136.19
Clinical Care Coordination	T1017	HK	\$ 31.50

<u>Adult Substance Use Rehabilitation Services (ASURS) for Deaf and Hard of Hearing</u> – Temporarily enhanced an additional 20% through the end of the federal COVID-19 PHE

Service Description	Procedure Code	Temporary Enhanced Rate Modifier	Enh	emporary nanced Rate tive 10/01/22
Breathalyzer Collection	H0048	HK	\$	15.14
Urinalysis Collection	H0048	HK,LR	\$	15.14
Clinical Care Coordination	T1017	HF, HK	\$	37.79
Counseling, Group	H0005	HK	\$	13.76
Counseling, Group, Psycho-educational	H2027	HK,HQ	\$	11.43
Counseling, Individual, On-site, Behavioral Health Therapy	H0004	HF, HK	\$	45.47
Counseling, Individual, Off-site	H0004	HF, HK,TN	\$	47.22
Counseling, Family with Client	H0004	HF, HK, HR	\$	45.47
Counseling, Family without Client	H0004	HF, HK, HS	\$	45.47
Crisis Intervention	H0007	HF, HK	\$	63.52
Short Term MMIWM - (Medically Monitored Inpatient Withdrawal Management)	H0010	U1, HK	\$	915.38
Behavioral Health Assessment, Ongoing, Risk Rating	H0002	HK,TG	\$	240.84

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Diagnostic Assessment, Comprehensive Adult	H0001	НК	\$ 440.44
Medication Assisted Treatment, Methadone, Clinic or Take Home	H0020	нк	\$ 10.94
Medication Assisted Therapy, Administration	H0020	HF, HK	\$ 14.76
Medication Management, Adult	H0016	HK	\$ 76.82
Multi-Systemic Therapy for TAY - Transitional Aged Youth (ACRA) (Ages 21-24)	H2033	HF, HK	\$ 98.78
Case Management	H0006	HK	\$ 37.80
Case Management (HIV)	H0006	HK, HF, HV	\$ 37.80
Recovery Support Service, Group	H2014	HK, HQ	\$ 11.44
Recovery Support Service (RSS), Individual	H2014	UK, HK	**
Trauma Recovery and Empowerment Services (TREM)	H0004	ST, UB, HK	\$ 14.34

<sup>\*\*</sup> The rate for this service is under review. An update to this rate will be published subsequent to this transmittal.

#### Transition Planning Services for Deaf and Hard of Hearing

Service Description	Procedure Code	Modifier	Rate Effective 10/01/22
Transitional Planning Service	G9012	HK	\$ 1,464.18

#### **Contact:**

If you have any questions, please contact Amy Xing, Reimbursement Analyst, Office of Rates Reimbursement and Financial Analysis, Department of Health Care Finance, via email amy.xing2@dc.gov or via telephone at (202) 481-3375.

cc: Medical Society of the District of Columbia

DC Hospital Association

DC Primary Care Association

DC Health Care Association

DC Home Care Association

DC Behavioral Health Association

DC Coalition of Disability Service Providers