

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



Office of Rates, Reimbursement & Financial Analysis

**DATE: May 1, 2020**

**SUBJECT: Behavioral Health Transformation Demonstration Program Rates**

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The purpose of this notice is to inform the District of Columbia’s Medicaid providers of the reimbursement rates for certain behavioral health services provided to Medicaid beneficiaries under the Behavioral Health Transformation Demonstration Program (Demonstration Program), beginning June 1, 2020.

In accordance with the requirements of Chapter 86 (Behavioral Health Transformation Demonstration Program) of Title 29 (Public Welfare) of the District of Columbia Municipal Regulations, services authorized under the Demonstration Program are reimbursed in accordance with the Medicaid fee schedule, unless otherwise indicated. The Medicaid fee schedule is located on the DHCF website at [www.dc-medicaid.com](http://www.dc-medicaid.com).

The table below outlines the codes and associated rates for the services provided under the Demonstration Program.

Service Description	Procedure Code	Modifier	Reimbursement Rate
Brief Psychiatric Emergency (up to 4 hours)	S9484		\$236.72 Per hour
Extended Psychiatric Emergency (up to 24 hours)	S9485		\$1,095.00 Per diem
Extended Psychiatric Observation (24 to 72 hours)	S9485		\$1,095.00 Per diem
Short-term Psychiatric Stabilization	S9485	U1	\$384.94 Per diem
Mobile Crisis Intervention	S9484	U1	\$236.72 Per hour
Behavioral Health Outreach	H0023		\$203.51 Per service

If you have questions, please contact Don Shearer, Director, Health Care Operations Administration, Department of Health Care Finance (DHCF) on (202) 698-2007.