

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid www.mass.gov/masshealth



MassHealth School-Based Medicaid Bulletin 24 June 2013

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- TO: School-Based Medicaid Providers Participating in MassHealth
- **FROM:** Julian J. Harris, M.D., Medicaid Director
  - **RE:** School-Based Medicaid Program Interim Rates (Amended)

# **Background** This bulletin revises the per-unit service interim rates effective July 1, 2012. and updates several codes effective January 1, 2013, for the School-Based Medicaid Program.

For the old per-unit service interim rates please refer to <u>School-Based Medicaid</u> <u>Bulletin 18</u>, dated November 2009.

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The Executive Office of Health and Human Services (EOHHS) is adding and deleting certain Mental Health service codes, due to a restructuring of certain mental health service HCPCS codes, effective January 1, 2013. Service Codes 90801 and 90804 have been deleted and Service Codes 90791 and 90832 have been added. Claims submitted with the old mental health service codes (90801-TM, 90804-TM, 90801-TM-U1, and 90804-TM-U1) between January 1, 2013, and March 28, 2013, should be resubmitted.

#### Revised Interim Rates and Codes

School-Based Medicaid providers must use the following codes and interim rates when filing claims for services provided through direct service claiming (DSC).

Service Code and Modifier	Service Description	Interim Rate	Practitioner
<b>90791-TM</b> (formerly 90801-TM)	Psychiatric diagnostic interview examination (pursuant to an IEP) (per 30 minutes: may bill up to eight units)	\$34.33	Psychiatrist Psychologist Social Worker Counselor
<b>90791-TM-U1</b> (formerly 90801-TM-U1)	Psychiatric diagnostic interview examination (pursuant to an IEP) (per 30 minutes: may bill up to eight units) (in private residential school)	\$17.17	Psychiatrist Psychologist Social Worker Counselor
<b>90832-TM</b> (formerly 90804-TM)	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 20- 30 minutes face to face with the patient (pursuant to an IEP), (may bill up to eight units)	\$13.94	Psychologist Social Worker Counselor

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Revised Interim Rates and Codes (cont.)

Service Code	Samia Description	Interim	Practitioner
and Modifier 90832-TM-U1 (formerly 90804-TM-U1)	Service Description Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 20- 30 minutes face-to-face with the patient (pursuant to an IEP) (may bill up to eight units ) (in private residential school)	<b>Rate</b> \$6.97	Psychologist Social Worker Counselor
90847-TM	Family psychotherapy (conjoint psychotherapy) (with patient present) (pursuant to an IEP) (per 30 minutes, may bill multiple units)	\$13.94	Psychologist Social Worker Counselor
90847-TM-U1	Family psychotherapy (conjoint psychotherapy) (with patient present) (pursuant to an IEP) (per 30 minutes, may bill multiple units) (in private residential school)	\$6.97	Psychologist Social Worker Counselor
90853-TM	Group psychotherapy (other than of a multiple- family group) (pursuant to an IEP) (per 30 minutes, may bill multiple units)	\$3.34	Psychologist Social Worker Counselor
90853-TM-U1	Group psychotherapy (other than of a multiple family group) (pursuant to an IEP) (per 30 minutes, may bill multiple units) (in private residential school)	\$1.67	Psychologist Social Worker Counselor
92506-TM	Evaluation of speech, language, voice, communication, and/or auditory processing, (pursuant to an IEP) (per hour with a maximum of four hours)	\$20.86	Speech-Language Therapist
92506-TM-U1	Evaluation of speech, language, voice, communication, and/or auditory processing, pursuant to an IEP (per hour with a maximum of four hours) (in private residential school)	\$10.43	Speech-Language Therapist
92507-TM	Treatment of speech, language, voice, communication, and/or auditory processing disorder (pursuant to an IEP) (per 15 minutes, may bill multiple units)	\$23.85	Speech-Language Therapist Speech-Language Pathology or Audiology Assistant
92507-TM-U1	Treatment of speech, language, voice, communication, and/or auditory processing disorder (pursuant to an IEP) (per 15 minutes, may bill multiple units)(in private residential school)	\$11.92	Speech-Language Therapist Speech-Language Pathology or Audiology Assistant
92508-TM	Treatment of speech, language, voice, communication, and/or auditory processing disorder: group, two or more individuals (pursuant to an IEP) (per 15 minutes, may bill multiple units)	\$10.21	Speech-Language Therapist Speech-Language Pathology or Audiology Assistant
92508-TM-U1	Treatment of speech, language, voice, communication, and/or auditory processing disorder: group, two or more individuals (pursuant to an IEP) (per 15 minutes, may bill multiple units) (in private residential school)	\$5.11	Speech-Language Therapist Speech-Language Pathology or Audiology Assistant

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Revised Interim Rates and Codes (cont.)

Service Code		Interim	
and Modifier	Service Description	Rate	Practitioner
96101-TM	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, (e.g., MMPI, Rorschach, WAIS), per hour of the psychologist's or physician's time, both face-to-face time with the administering tests to the patient and time spent interpreting test results and preparing the report, (pursuant to an IEP) (may bill multiple units)	\$29.98	Psychiatrist Psychologist
96101-TM-U1	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, (e.g., MMPI, Rorschach, WAIS), per hour of the psychologist's or physician's time, both face-to-face time with the administering tests to the patient and time spent interpreting test results and preparing the report (pursuant to an IEP) (may bill multiple units) (in private residential school)	\$14.99	Psychiatrist Psychologist
97001-TM	Physical therapy evaluation (related to an IEP) (per hour with a maximum of two hours)	\$20.86	Physical Therapist
97001-TM-U1	Physical therapy evaluation related to an IEP (per hour with a maximum of two hours) (in private residential school)	\$10.43	Physical Therapist
97003-TM	Occupational therapy evaluation (related to an IEP) (per hour with a maximum of two hours)	\$20.86	Occupational Therapist
97003-TM-U1	Occupational therapy evaluation related to an IEP (per hour with a maximum of two hours) (in private residential school)	\$10.43	Occupational Therapist
97110-TM	Therapeutic procedure, one or more areas, each 15minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility (provided pursuant to an IEP) (may bill multiple units)	\$5.22	Physical Therapist Occupational Therapist Physical Therapy Assistant Occupational Therapy Assistant
97110-TM-U1	Therapeutic procedure, one or more areas, each 15minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility (provided pursuant to an IEP) (may bill multiple units) (in private residential school)	\$2.61	Physical Therapist Occupational Therapist Physical Therapy Assistant Occupational Therapy Assistant
97150-TM	Therapeutic procedure(s) group (two or more individuals) (provided pursuant to an IEP) (per 15 minutes, may bill multiple units)	\$8.28	Physical Therapist Occupational Therapist Physical Therapy Assistant Occupational Therapy Assistant
97150-TM-U1	Therapeutic procedure(s) group (two or more individuals) (provided pursuant to an IEP) (per 15 minutes, may bill multiple units) (in private residential school)	\$4.14	Physical Therapist Occupational Therapist Physical Therapy Assistant Occupational Therapy Assistant

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Revised Interim Rates and Codes (cont.)

Service Code and Modifier	Service Description	Interim Rate	Practitioner
99499-TM	Unlisted evaluation and management services (per 15-minutes, up to a maximum of six services per member per date of service) (related to an IEP)	\$3.26	Audiologist Hearing Instrument Specialist
99499-TM-U1	Unlisted evaluation and management services (per 15-minutes, up to a maximum of six services per member per date of service) (related to an IEP) (in private residential school)	\$1.63	Audiologist Hearing Instrument Specialist
T1002-TM	RN services up to 15 minutes (pursuant to an IEP), (may bill multiple units)	\$4.55	Nurse (RN)
T1002-TM-U1	RN services up to 15 minutes (pursuant to an IEP) (may bill multiple units) (in private residential school)	\$2.27	Nurse (RN)
T1003-TM	LPN/LVN services, up to 15 minutes, (may bill multiple units)	\$3.75	Nurse (LPN)
T1003-TM-U1	LPN/LVN services, up to 15 minutes (may bill multiple units) (in private residential school)	\$1.87	Nurse (LPN)
T1019-TM	Personal care services per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) (may bill multiple units) (pursuant to an IEP)	\$1.23	Personal Care Services Provider
T1019-TM-U1	Personal care services per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provided by home health aide or certified nurse assistant) (may bill multiple units) (pursuant to an IEP) (in private residential school)	\$0.61	Personal Care Services Provider

Questions

If you have any questions about the information in this bulletin, please contact UMMS at 1-508-856-7640 or e-mail your inquiry to schoolbasedclaiming@umassmed.edu.