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BULLETIN NUMBER: 19-005

ISSUED/REVISED: 07/25/2019

EFFECTIVE: 05/20/2019

SUBJECT: SUD Codes for Masters-level Staff & non-Masters level Staff

PROVISION OF SERVICE AFFECTED: Substance Use Disorder Treatment

BACKGROUND

This bulletin is applicable to SUD providers that receive Medicaid, Healthy Michigan, Block Grant, and PA2 funding and is intended to provide clarification on the proper submission of claims for outpatient services. The bulletin will further clarify a memorandum dated May 20, 2019 on the use of codes and modifiers by Masters-level and non-Masters-level providers, and provide a crosswalk to assist in future billing.

Procedure

All SUD Treatment Providers must be in compliance with the MDHHS Reporting Requirements as defined in the most-up-to-date versions of the 1) PIHP/CMHSP Encounter Reporting HCPCS and Revenue Codes and 2) PIHP/CMHSP Provider Qualification per Medicaid Services & HCPCS /CPT Codes documents included in this bulletin under References. The Crosswalk chart below lists the 908xx codes to be used by licensed, MCBAP Certified Masters Level Clinicians and the Hxxxx codes to be used by Non-Masters level clinician. (See Provider qualifications for definitions of Substance Abuse Treatment Practitioner (SATP) and Substance Abuse Treatment Specialist (SATS). DWMHA has developed local modifiers to distinguish differences in the same codes such as location of service, length of service, or if client is present during the service.

The Reporting Units Column in the Reporting Code chart attached in the hyperlink reflects the type of "unit" required to be used with a code. A unit may be reported as a per diem, an encounter, a 30-minute encounter, 45 or 60-minute encounter or be reported in fifteen minute increments. For example, H0004 is reported in 15 minute increments. If you spent 30 minutes with consumer, you would report (2) 15 minute units, if you spent 45 minutes, you would report (3) 15 minute units; if you spend 60 minutes with a consumer, you would report (4) 15 minute units. Providers need to request or bill the appropriate number of units to reflect the actual time spent in providing the service.

The table below contains some of the previously used codes that may require modification based on staff credential. (Masters vs. Non-Masters level) If you previously used 90832, you would replace it with 2 units of H0004. If you previously used 90834, you would replace it with 3 units of H0004. If you previously used 90837 ZY, you would replace it with 4 units of H0004 ZY, and so forth

CHART: Crosswalk of Masters-level Codes mapped to comparable Non-Masters-level Codes

Masters-level codes	Modifier	Non-Masters level codes	Modifier
90832 – Individual therapy, adult or child (30 minutes)		H0004-Behavioral health counseling and therapy (15 minutes) *Use 2 units	
90834 -Individual therapy, adult or child (45 minutes)		H0004-Behavioral health counseling and therapy (15 minutes) *Use 3 units	
90837 - Individual therapy, adult or child (60 minutes) In home	ZY	H0004-Behavioral health counseling and therapy (15 minutes) *Use 4 units	ZY
90837- Individual therapy, adult or child (60 minutes) In office	ZZ	H0004-Behavioral health counseling and therapy (15 minutes) *Use 4 units	ZZ
90846 – Family Therapy, per session without member present		H2035 - Family Therapy, per session, multiple-family group psychotherapy. Outpatient alcohol/other drug treatment service per hour.	FG
90847 – Family therapy, per session, with member present		H2035 – Family Therapy per session, without member present. Outpatient alcohol/other drug treatment per hour	FO
90849 – Family therapy, per session, multiple family group psychotherapy (Encounter)		H2035 – Family Therapy per session, with member present. Outpatient alcohol/other drug treatment per hour	FW
90853 – Group therapy, adult or child, typically 60 minutes (Encounter)	ZX	H0005 – Alcohol and/or drug services; group counseling by a clinician (Encounter 60 minutes)	ZR
90853 – Group therapy, adult or child, typically 90 minutes (Encounter)	ZW	H0005 – Alcohol and/or drug services; group counseling by a clinician (Encounter 90 minutes)	ZS

REFERENCES:

Michigan Medicaid Provider Manual

http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_42542_42543_42546_42553-87572--,00.html

MDHHS Website: PIHP/CMHSP Reporting Cost Per Code and Code Chart

https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_38765---,00.html

MDHHS Website: PIHP/CMHSP Provider Qualifications Chart

https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_38765---,00.html