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ISSUED/REVISED: 4/8/2025

EFFECTIVE: 4/1/2025

SUBJECT: SED Waiver Services - H2022 Discontinued

SERVICE AFFECTED: H2022 – Wraparound Services

BACKGROUND:

Effective 10/1/24, MDHHS will implement Intensive Care Coordination with Wraparound (ICCW) for children and youth who have intensive behavioral health needs and are eligible for Medicaid. ICCW is a form of care coordination that leverages the Wraparound planning process and will replace existing forms of Wraparound available through the Michigan Medicaid program. This service will be available to children who are and are not enrolled in the Waiver Program for Children with Serious Emotional Disturbances (SEDW).

PROCEDURE:

Effective 4/1/2025, ICCW services are to be billed as H2021 for youths with SED Waiver funding, per communication from Michigan Department of Health and Human Services (MDHHS). CPT code H2022 is discontinued for Wraparound Services as of 4/1/25.

AUTHORIZATION / CLAIMS:

H2021 requires prior authorization. When filing claims please ensure both the code and appropriate modifiers along with staff credentialing modifiers are submitted. *Refer to the Reference section below for additional information.*

CODE CHART:

Population	Current Billing Structure Wrap Around	New Billing Structure ICCW
Children not enrolled in SEDW	H2021 (15-minute code)	H2021 (15-minute code)
Children enrolled in SEDW	H2022 (per diem code)	H2021 (15-minute code)

ADDITIONAL INFORMATION:

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Activities that can be billed under H2021 include:

- o Planning and/or facilitating planning using the Wraparound process.
- o Developing an Individual Plan of Service (IPOS) utilizing person-centered planning process.
- o Develop a Wraparound plan utilizing the Wraparound planning process.
- o Monitoring of services with the Wraparound Team and other community services and supports. (in-person, audio-visual or audio for monitoring only)

DEFINITION OF MONITORING: Activities and contacts that are necessary to ensure the care plan is implemented and adequately addresses the eligible individual's needs, and which may be with the individual, family members, service providers, or other entities or individuals and conducted as frequently as necessary, and including at least one annual monitoring, to determine whether the following conditions are met:

- Services are being furnished in accordance with the individual's care plan;
- Services in the care plan are adequate; and
- Changes in the needs or status of the individual are reflected in the care plan. Monitoring and follow-up activities include making necessary adjustments in the care plan and service arrangements with providers.

- o Participating in treatment planning, including collaborating with providers of services with the assistance of the Wraparound Team

Billing Indirect Services

- o Coordination with the Medicaid Health Plan (MHP) or other health care providers
- o Other collateral contacts

DEFINITION OF COLLATERAL CONTACTS: Care coordination includes contacts with non-eligible individuals that are directly related to identifying the eligible individual's needs and care, for the purposes of helping the eligible individual access services; identifying needs and supports to assist the eligible individual in obtaining services; providing care coordinators with useful feedback, and alerting care coordinators to changes in the eligible individual's needs.

Activities that cannot be billed under H2021 include:

- o Case management that is the responsibility of the child welfare, juvenile justice, or foster care systems
- o Direct service provision provided by the ICCW Care Coordinator
- o Services and supports that are the responsibility of other agencies on the Community Team

Other Information:

- o Targeted Case Management (T1017) cannot be used in conjunction with H2021; this would be duplicative billing for case management services.
- o H0032 can be reported by multiple staff at the same time that the care coordinator also reports using H2021. Only one staff can attend the wraparound planning/IPOS meeting in the behavioral health case management role.
- o Participation of Children, Youth, and Young Adults
 - The participation of the children, youth, and young adults in the service planning process and wraparound planning process is essential to achieving a family-driven, youth-guided approach to service delivery.
 - MDHHS strongly supports the inclusion and participation in youth in all activities related to ICCW. Children, youth, and young adults must be involved in (1) the development,

- amendment, and ongoing monitoring of the Individual Plan of Service and (2) all wraparound planning activities including team meetings.
- ICCW will also include other care coordination and monitoring activities outside of the service planning process and wraparound planning process, and there may be instances when the care coordinator directly contacts and interacts with the primary caregiver/guardian without the youth present (including but not limited to crisis situations). MDHHS will allow for the continued billing of H2021 in instances when the child, youth, and young adult is not present.

REFERENCES:

MDHHS Website: SFY 2025 Behavioral Health and Provider Qualifications

https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Keeping-Michigan-Healthy/BH-DD/Reporting-Requirements/SFY_2025_BH_Code_Charts_and_Provider_Qualifications.xlsx?rev=34ce036c903d4ed998746338ef4eea09

DWIHN Rate Charts

<https://www.dwihn.org/rate-charts>

DWIHN Coding Manual Bulletins

<https://www.dwihn.org/billing-coding-bulletins>

DWIHN Service Utilization Guidelines

<https://www.dwihn.org/resources/upload/5264/DWIHN%20MASTER%20SUG%20LIST%20UPDATED%209-22-23.xlsx>

Policy Stat:

<https://www.dwihn.org/policies>

Michigan Medicaid Provider Manual:

<https://www.michigan.gov/mdhhs/doing-business/providers/providers/mcicaid/policyforms/mcicaid-provider-manual>

If there are any additional questions and or concerns, please contact: procedure.coding@dwihn.org