

## Notice of updates to UCare’s Minnesota State Public Programs mental health services claims processes

UCare has reviewed and updated mental health services payment processes. The updates will improve payment accuracy and consistency and align more closely with Minnesota Health Care Programs (MHCP) policies.

Below are some of the key payment process updates:

### Modifiers

#### Required Modifiers

Effective for dates of service on or after May 1, 2018, the services listed below will be denied if submitted without the following modifier(s).

You will see: **CARC 4** - The procedure code is inconsistent with the modifier used or a required modifier is missing when services are denied. Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.

TYPE OF SERVICE	CPT® OR HCPCS CODE	MODIFIER	MODIFIER	MODIFIER	BRIEF NARRATIVE DESCRIPTION
ARMHS	H0031	UD			Functional assessment
ARMHS	H0031	UD	TS		Functional assessment update / review
ARMHS	H0032	UD			Individual treatment plan
ARMHS	H0032	UD	TS		Individual treatment plan update / review
CTSS	H0031	UA	UD		Administering and reporting standardized measures
CTSS	H0032	UA	UD		Treatment plan development and review
CTSS	H2014	UA			Skills training and development – individual
CTSS	H2014	UA	HQ		Skills training and development – group
CTSS	H2014	UA	HR		Skills training and development – family
EIDBI	H0032	UB	HK	UD	Individual Treatment Plan (ITP) Development and Monitoring
EIDBI	H0032	UB	HP	UD	Individual Treatment Plan (ITP) Development and Monitoring
EIDBI	H0032	UB	HO	UD	Individual Treatment Plan (ITP) Development and Monitoring
EIDBI	H0032	UB	HN	UD	Individual Treatment Plan (ITP) Development and Monitoring
Certified Community Behavioral Health Clinic	H0032	Q2	UD		Service plan development by non-physician

TYPE OF SERVICE	CPT® OR HCPCS CODE	MODIFIER	MODIFIER	MODIFIER	BRIEF NARRATIVE DESCRIPTION
Certified Community Behavioral Health Clinic	H0032	Q2	UD	TS	Service plan development by non-physician, update
Psychiatric Consultations to PCP	99499	HE	AG		Primary Provider - Communication between a consulting professional and a primary care provider, for consultation or medical management; or behavioral health care and treatment of a recipient.
Psychiatric Consultations to PCP	99499	HE	AM		Consulting Professional - Communication between a consulting professional and a primary care provider, for consultation or medical management; or behavioral health care and treatment of a recipient.

### Sequencing of Modifiers

When multiple modifiers are required for mental health services, the modifiers must be submitted in the same order as outlined in the billing section of each mental health service / program in the [MHCP provider manual](#).

### Submit Claims Using the Correct Claim Format

Effective for dates of service on or after May 1, 2018, eligible services listed below will be denied if submitted using the 837I (Institutional) format. The 837P (Professional) format should be used to submit these services.

- Adult Day Treatment
- Children’s Residential Treatment
- Intensive Rehabilitative Treatment Service (IRTS)

You will see these CARC and RARC used in the denial:

- **CARC 16** - Claim/service lacks information or has submission/billing error(s). Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.
- **RARC N34** - Incorrect claim form/format for this service.

### Mental Health Travel Time

For claims processed on or after April 1, 2018, UCare will require providers to submit travel time and the mental health service furnished on the same claim. In the future, UCare will take back payment for travel time that has been previously paid, if the mental health travel time was billed by itself.

### Master’s Level / Advance Practice Provider Reductions

#### Mental Health Services

Certain mental health services identified by indicator “(a)” in the [DHS MH Procedure CPT or HCPCS Codes and Rates Chart](#) and furnished by a Master’s prepared provider are subject to a 20% reduction. Master’s prepared providers are:

- Clinical Nurse Specialist (CNS-MH)
- Licensed Independent Clinical Social Worker (LICSW)
- Licensed Marriage and Family Therapist (LMFT)
- Licensed Professional Clinical Counselor (LPCC)
- Licensed Psychologist (LP) Master's Level
- Psychiatric Nurse Practitioner
- Master's Level enrolled provider

These services are not subject to a discount when performed in a Community Mental Health Center (CMHC).

UCare identified minor inconsistencies in the reductions being applied to Master's level and advance practice providers across State Public Programs. Beginning with claims received on or after April 1, 2018, corrections will be reflected in the amount paid by UCare.

We also found inconsistencies in the reductions being applied to UCare's dual eligible products. Updates will be reflected in the amount paid by UCare in approximately 60 days.

### **Clinical Services**

Certain services that can be furnished by a mental health provider do not appear on the DHS MH Procedure CPT® or HCPCS Codes and Rates Chart. When an eligible advance practice provider bills one of these services a 10% percent reduction is reflected in the paid amount

### **Essential Community Providers (ECP)**

UCare uses the DHS published list of providers who have been designated as Essential Community Providers (ECP) and/or Rule 29 Providers. If your status changes with DHS, it will also be updated with UCare accordingly.

On May 1, 2018, UCare will post mental health services payment policies for our State Public Programs.