

## Children's Mental Health Residential Treatment

Policy Number: SC17P0062A2

Effective Date: May 1, 2018

Last Update: May 27, 2025

### PAYMENT POLICY HISTORY

DATE	SUMMARY OF CHANGE
May 27, 2025	Annual review complete. Grammar, formatting, and stylization updates applied.
February 5, 2025	Per MHCP guidance, Effective January 1, 2025, managed care organizations will cover substance use disorder and mental health room and board services for MinnesotaCare members. The 'Eligible Providers or Facilities,' 'Modifiers, CPT, HCPCS, and Revenue Codes' and 'Billing Requirements and Directions' sections have been updated to reflect this change.
July 12, 2024	Annual review complete. Grammar, formatting, and stylization updates applied.
June 22, 2023	Annual policy review completed. Updates made to enrollee eligibility section. Formatting and grammar updates applied.
February 16, 2023	Definition updates were completed to match other UCare MH policies.
September 19, 2022	Information regarding code-specific procedure CPT® or HCPCS was removed.
July 28, 2021	The Enrollee Section of the policy was updated. The age for service eligibility is eighteen (18) years of age.
October 6, 2020	Annual Policy review was completed. No technical changes were made. This Policy was moved to UCare's updated branded template. As a result, information may have been reformatted.
August 30, 2019	Information regarding comparison to the DHS MH Procedure CPT® or HCPCS Codes and Rates Chart and UCare fee schedules was removed from the document. The UCare Provider Manual contains information regarding how and when UCare updates fee schedules. A link to the UCare Provider Manual continues to be available within the document.
May 1, 2019	Annual policy review complete. The following changes were made to the Policy: <ul style="list-style-type: none"> <li>The UCare logo was replaced;</li> <li>All hyperlinks within the document were updated; and</li> <li>Updated the reference indicating room and board is not the responsibility of UCare. The reference was updated to the 2019 MN DHS contract for PMAP and Minnesota Care was updated to section 6.10.11.</li> </ul>
May 1, 2018	The Children's Mental Health Residential Treatment Policy is published by UCare.

## APPLICABLE PRODUCTS

This policy applies to the products checked below:

UCARE PRODUCT	PRODUCT TYPE	APPLIES TO
UCare Connect	Minnesota Health Care Programs (MHCP)	✓
UCare MinnesotaCare	Minnesota Health Care Programs (MHCP)	✓
UCare Prepaid Medical Assistance (PMAP)	Minnesota Health Care Programs (MHCP)	✓

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**PAYMENT POLICY INSTRUCTIONS**

A payment policy assists in determining provider reimbursement for specific covered services. To receive payment, the provider must be in a contractual relationship with UCare and provide services to a member enrolled in one of UCare's products. This payment policy is intended to provide a foundation for system configuration, work instructions, call scripts, and provider communications. A payment policy describes the rules for payment, which include applicable fee schedules, additional payment rules by regulatory bodies, and contractual terms. This policy is a general guideline and may be superseded by specific provider contract language.

**PAYMENT POLICY OVERVIEW**

Children's mental health residential treatment is a 24-hour-a-day program with services provided under the clinical supervision of a mental health professional in a community setting, rather than an acute-care hospital or regional treatment center. Children's residential treatment must be designed to:

- Prevent placement in a more intensive, costly, or restrictive than necessary and appropriate to the child's needs;
- Help the child improve family living and social interaction skills;
- Help the child gain the necessary skills to return to the community;
- Stabilize crisis admissions; and
- Work with families throughout the placement to improve the ability of the families to care for children with severe emotional disturbance in the home.

**POLICY DEFINITIONS**

TERM	NARRATIVE DESCRIPTION
Children's Mental Health Residential Treatment	<p>A 24-hour-a-day program where services are provided under the clinical supervision of a mental health professional in a community setting, other than an acute-care hospital or regional treatment center with services designed to:</p> <ul style="list-style-type: none"><li>• Prevent placement in settings that are more intensive, costly, or restrictive than necessary and appropriate to meet the child's needs;</li><li>• Help the child improve family living and social interaction skills;</li></ul>

TERM	NARRATIVE DESCRIPTION
	<ul style="list-style-type: none"> <li>• Help the child gain the necessary skills to return to the community;</li> <li>• Stabilize crisis admissions; and</li> <li>• Work with families throughout the placement to improve the ability of the families to care for children with severe emotional disturbance in the home.</li> </ul>
Mental Health Professional	<p>One of the following:</p> <ul style="list-style-type: none"> <li>• Clinical nurse specialist (CNS)</li> <li>• Licensed independent clinical social worker (LICSW)</li> <li>• Licensed marriage and family therapist (LMFT)</li> <li>• Licensed professional clinical counselor (LPCC)</li> <li>• Licensed psychologist (LP)</li> <li>• Mental health rehabilitative professional</li> <li>• Psychiatric nurse practitioner (NP)</li> <li>• Psychiatry or an osteopathic physician</li> <li>• Tribal-certified professional</li> </ul>
Severe Emotional Disturbance	<p>A child with emotional disturbance that meets at least one of the following criteria:</p> <ul style="list-style-type: none"> <li>• Has been admitted to inpatient or residential treatment within the last three years or is at risk of being admitted.</li> <li>• Is a Minnesota resident and receiving inpatient or residential treatment for an emotional disturbance through the interstate compact.</li> <li>• Has been determined by a mental health professional to meet one of the following criteria:             <ul style="list-style-type: none"> <li>○ Has psychosis or clinical depression</li> <li>○ Is at risk of harming self or others because of emotional disturbance</li> <li>○ Has psychopathological symptoms because of being a victim of physical or sexual abuse or psychic trauma within the past year</li> <li>○ Has a significantly impaired home, school, or community functioning lasting at least one year or presents a risk of lasting at least one year because of emotional disturbance, as determined by a mental health professional.</li> </ul> </li> </ul>

**ENROLLEE ELIGIBILITY CRITERIA**

**THIS SECTION OF THE POLICY PROVIDES INFORMATION THAT IS SPECIFIC TO THE UCARE MEMBER, INCLUDING INFORMATION ABOUT THE CRITERIA THE MEMBER MUST MEET IN ORDER FOR THE SERVICE(S) IN THE POLICY TO BE ELIGIBLE FOR PAYMENT.**

An individual must be enrolled and eligible for coverage in a UCare MHCP product to be eligible for this service. In addition, to receive Children's Mental Health Residential Treatment a patient must:

- Be under 18 years old;
- Meet the criteria for Severe Emotional Disturbance (SED); and
- Meet UCare's pre-screening requirements before placement in the residential facility for services.

**ELIGIBLE PROVIDERS OR FACILITIES**

**OUTLINED BELOW IS THE SPECIFIC CRITERIA A PROVIDER MUST MEET IN ORDER FOR THE SERVICE(S) IN THIS POLICY TO BE ELIGIBLE FOR PAYMENT.**

An eligible provider must be facility that is:

- Licensed by the state of Minnesota to provide children's mental health residential treatment services;
- Under clinical supervision of a mental health professional;
- Under contract with a lead county; and
- Enrolled with UCare and MHCP.

**EXCLUDED PROVIDER TYPES**

**OUTLINED BELOW IS INFORMATION REGARDING PROVIDERS WHO ARE NOT ELIGIBLE TO FURNISH THE SERVICE(S) LISTED IN THIS POLICY.**

Not applicable.

## MODIFIERS, CPT, HCPCS, AND REVENUE CODES

### General Information

The Current Procedural Terminology (CPT®), Healthcare Common Procedure Coding System (HCPCS), and Revenue codes listed in this policy are for reference purposes only. Including information in this policy does not imply that the service described by a code is a covered or non-covered health service. The inclusion of a code does not imply any right to reimbursement or guarantee of claim payment.

### Modifiers

There are no required modifiers associated with Children's Mental Health Residential Treatment.

### CPT and/or HCPCS Code(s)

CPT® AND/OR HCPCS CODE(S)	MODIFIER(S)	NARRATIVE DESCRIPTION
H0019		Children's Mental Health Residential Treatment

CPT® is a registered trademark of the American Medical Association.

### Revenue Codes

CPT AND/OR HCPCS CODE(S)	MODIFIER(S)	NARRATIVE DESCRIPTION
*1001		Room and board

\* Room and board is applicable for MinnesotaCare products only.

## BILLING REQUIREMENTS AND DIRECTIONS

The guidelines for billing children's residential treatment services are outlined below:

- Bill only direct mental health service days; do not bill for days when direct services were not provided.
- Use the MN-ITS 837P to bill the treatment procedure code H0019.
  - Enter a span of dates within a month; for example, if billing for services during May and June, bill May dates on one claim and bill June dates on another claim.
  - Use procedure code H0019 for the monthly negotiated rate.



- Enter the place of service code 99.
- Enter the number of units (1 unit = 1 day) based on the dates of service.
- Enter the facility's NPI number as the rendering/treating provider.
- Enter the county mental health program's NPI or UMPI number as the pay-to-provider.
- Use the MN-ITS 837I to bill for room and board revenue code 1001.
  - Children's Residential Services Path AKA '3rd Path' Room and Board
    - Per UCare's contract with DHS, UCare will work with local agencies upon a request for residential treatment through the Children's Residential Services Path.
    - Per MHCP: Bill room and board service days authorized by managed care organizations directly to MHCP.
    - See the MHCP Provider Manual for billing requirements
  - For MinnesotaCare members only:
    - Include the date of admission.
    - Type of Bill (TOB) 86X
    - Value Code 80
    - Enter the number of days for covered inpatient days
    - Value Code 81
    - Enter the number of days for noncovered inpatient days

## PRIOR AUTHORIZATION, NOTIFICATION, AND THRESHOLD INFORMATION

### Prior Authorization, Notification, and Threshold Requirements

UCare does update authorization, notification, and threshold requirements from time-to-time. The most current prior authorization requirements can be found [here](#).

## RELATED PAYMENT POLICY INFORMATION

OUTLINED BELOW ARE OTHER POLICIES THAT MAY RELATE TO THIS POLICY AND/OR MAY HAVE AN IMPACT ON THIS POLICY.

POLICY NUMBER	POLICY TITLE

**SOURCE DOCUMENTS AND REGULATORY REFERENCES****LISTED BELOW ARE LINKS TO CMS, MHCP, AND STATUTORY AND REGULATORY REFERENCES USED TO CREATE THIS POLICY.**

[MHCP Provider Manual, Mental Health Services, Children's Mental Health Residential Treatment](#)

[DHS MHCP Procedure CPT or HCPCS Codes and Rates Chart](#)

[MS 256B.0945](#) Services for Children with Emotional Disturbance

[MS 245.4882](#) Residential Treatment Services

[MS 245.4885](#) Screening for Inpatient and Residential Treatment

**DISCLAIMER**

"Payment Policies assist in administering payment for UCare benefits under UCare's health benefit Plans. Payment Policies are intended to serve only as a general reference resource regarding UCare's administration of health benefits and are not intended to address all issues related to payment for health care services provided to UCare members. When submitting claims, all providers must first identify member eligibility, federal and state legislation, or regulatory guidance regarding claims submission, UCare provider participation agreement contract terms, and the member-specific Evidence of Coverage (EOC) or other benefit document. In the event of a conflict, these sources supersede the Payment Policies. Payment Policies are provided for informational purposes and do not constitute coding or compliance advice. Providers are responsible for submission of accurate and compliant claims. In addition to Payment Policies, UCare also uses tools developed by third parties, such as the Current Procedural Terminology (CPT®\*), InterQual guidelines, Centers for Medicare and Medicaid Services (CMS), the Minnesota Department of Human Services (DHS), or other coding guidelines, to assist in administering health benefits. References to CPT® or other sources in UCare Payment Policies are for definitional purposes only and do not imply any right to payment. Other UCare Policies and Coverage Determination Guidelines may also apply. UCare reserves the right, in its sole discretion, to modify its Policies and Guidelines as necessary and to administer payments in a manner other than as described by UCare Payment Policies when necessitated by operational considerations."