

Quality Assurance Bulletin

August 9, 2012 No. 12-04

Program Support Bureau

County of Los Angeles - Department of Mental Health Marvin J. Southard, DSW, Director

UPDATES TO THE "GUIDE TO PROCEDURE CODES"

This Bulletin is to notify all Providers that "A Guide to Procedure Codes for Claiming Mental Health Services" has been updated and is now available on-line at: (http://file.lacounty.gov/dmh/cms1_159845.pdf). Below are highlights of the changes made to the Guide to Procedure Codes. Be sure to check the Table of Contents to identify any pages that were updated, modified or removed.

- Revised language on page vi regarding telephone services, telepsychiatric services and combined services
 - Please note that changes are being made in the IS to add a telepsychiatry box to the claim screen and to add modifiers to claims when the telephone box or telepsychiatry box is checked. These changes are expected to go into effect in September. Please watch for an IS News Bulletin and RMD Bulletin for more information.
- Added notation (**) for all services that are telephone allowable

 Please note that when the IS changes indicated above go into effect, services that are NOT telephone allowable (i.e. procedure codes in the Guide to Procedure Codes WITHOUT the telephone notation) will be denied if the telephone box is checked or, for Contractors submitting electronic claims, have the SC modifier.
- Added clarifying language for the RN discipline for all psychotherapy procedure codes An error was identified in the Guide to Procedure Codes which did not specify that Registered Nurses must have a master's degree is psychiatric mental health nursing and be listed as a psychiatric —mental health nurse by the Board of Registered Nursing in order to provide psychotherapy. This error has been corrected. Please see Evidence Code Section 1010-1027 for information regarding disciplines that can provide psychotherapy.
- Added modifiers to family psychotherapy code (90847) for family psychotherapy with 2 or more clients
 - The IS has been updated to add procedure code 90847 HE HQ for use for family psychotherapy with two or more clients. This addition will allow for the appropriate identification of individual (SFC 42) versus group (SFC 52) family psychotherapy. This new code is now available for use for claims submitted after August 8, 2012 as long as the service date is July 1, 2011 or later. For Direct Data Entry (DDE) into the IS system, the modifiers are added when using 90847 in the group module. For Electronic Data Interchange (EDI), the modifiers will need to be submitted along with 90847 for group services. Directly-operated programs should begin using this new code immediately; Contract providers should begin using this new code as soon as possible.
- Added procedure code H2016 for use by Community Partner Contract Providers
- Removed "Former Activity Code" language from all descriptions and tables

If you have any questions regarding this Bulletin, please contact your SA QA Liaison.

c: Executive Management Team District Chiefs Program Heads Department QA staff QA Service Area Liaisons

Judith Weigand, Compliance Program Office Nancy Butram, Revenue Management Pansy Washington, Managed Care TJ Hill, ACHSA Regional Medical Directors