



Quality Assurance Bulletin

Quality Assurance Unit

County of Los Angeles – Department of Mental Health

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GUIDE TO PROCEDURE CODES UPDATES

The Guide to Procedure Codes for Specialty Mental Health Services (“the Guide”) has been updated to provide clearer guidance and reflect new guidance from the FY25-26 and FY26-27 Department of Health Care Services (DHCS) Specialty Mental Health Services Billing Manual which includes updates related to Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT¹) services. BH-CONNECT is a State DHCS initiative to expand access to care, improve outcomes, and address long-standing gaps in mental health and substance use disorder services. It expands the continuum of community-based services and evidence based practices (EBP) available through Medi-Cal for children, youth and adults living with significant behavioral health needs.

Below is a summary of updates to the Guide effective **July 1, 2026**, unless otherwise specified below.

OTHER ITEMS:

- ✓ Removed the statement related to CGF, MHSA and funding plans as those are no longer applicable effective July 1, 2026.
- ✓ Added clarifying language to include clients with both Medicare and Medi-cal (Medi-Med) on the statement on billing Medicare first
 - ✓ Added the following services are exempt from Medicare submission: 90885, 96110, 96376, 98960-2, 99605-7, 99366-8, 90887, 90867-9, 99242-5, 99252-5, 99417, and 99418.
 - ✓ Added the following HCPCS codes need to be submitted to Medicare first: G0539-43, G0019 and G0022
- ✓ Added statement that clients with OHC (Other Health Care) coverage should consult with the OHC before submitting any claims covered by the plan and OHC must be billed prior to claiming Medi-Cal when OHC covers the service
- ✓ Added clarifying statement that if EBP or Service Strategies (SS) are used when providing a service, it is best practice to report the practice or strategy on the claim using the EBP/SS field, per the Companion Guide: [EBP/SS field](#)

ABBREVIATIONS:

- ✓ Added the following abbreviations:
 - BH-CONNECT- Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment
 - EBP- Evidence Based Practices
 - FFT- Functional Family Therapy
 - MST- Multi-systemic Therapy
 - PCIT- Parent-Child Interaction Therapy

DISCIPLINE/TAXONOMY:

- ✓ Added Certified Community Health Worker (Certified CHW) as an available discipline with the following allowable taxonomy descriptions:
 - 172V00000X – Certified Community Health Worker
- ✓ Added statement clarifying that Nurse Practitioners are required to complete an approved Master’s level Psychiatric Mental Health Nurse Practitioner’s Program

MODIFIERS:

- ✓ Added modifier 22, PCIT to indicate PCIT EBP services were provided during individual and family psychotherapy services
- ✓ Expanded HK modifier to be used for MST and FFT

¹Behavioral Health Information Notice (BHIN) 25-006

- ✓ Retitled Residential/Day Services to Residential/Day Services/Monthly Services
- ✓ Added the UK modifier to indicate a collateral contact was provided as part of monthly bundled services
- ✓ Added a section for new Caregiver Training Services and modifiers below (for new Caregiver Training Services codes *only*):

CG	Assessment	Use this modifier to categorize the service as an assessment. Only applies to codes 96202, 96203, 97550, 97551, 97552, G0323, G0541, G0542, G0543, G0539, and G0540.
RD	Medication Support Services	Use this modifier to categorize the service as medication support services. Only applies to codes 96202, 96203, 97550, 97551, 97552, G0323, G0541, G0542, G0543, G0539, and G0540.
HH	Psychosocial Rehabilitation	Use this modifier to categorize the service as psychosocial rehabilitation. Only applies to codes 96202, 96203, 97550, 97551, 97552, G0323, G0541, G0542, G0543, G0539, and G0540.
HT	Referral and Linkages	Use this modifier to categorize the service as referral and linkages. Only applies to codes 96202, 96203, 97550, 97551, 97552, G0323, G0541, G0542, G0543, G0539, and G0540.
HS	Therapy (without client present)	Use this modifier to categorize the service as therapy. Only applies to codes 96202, 96203, 97550, 97551, 97552, G0323, G0541, G0542, G0543, G0539, and G0540.
HI	Treatment Planning	Use this modifier to categorize the service as treatment planning. Only applies to codes 96202, 96203, 97550, 97551, 97552, G0323, G0541, G0542, G0543, G0539, and G0540.
ET	Crisis Intervention	Use this modifier to categorize the service as crisis intervention. Only applies to codes 96202, 96203, 97550, 97551, 97552, G0323, G0541, G0542, G0543, G0539, and G0540.

ADD-ON CODES:

- ✓ Updated the Add-On Code, T2007, Mobile Crisis Transporting Time, from 15 to 30-minute increments

PROCEDURE CODES:

- ✓ Added Enhanced Community Health Worker Services Section and service codes:

98960, Education and training for patient self-management, face-to-face with the patient, per 30 minutes,	G0019, Community health integration services, per 60 minutes
98961, Education and training for patient self-management, face-to-face with the patient, 2-4 patients	G0022, Community health integration services, each additional 30 minutes
98962, Education and training for patient self-management, face-to-face with the patient, 5-8 patients, 98962	

- ✓ Added Caregiver Training Services Section and services codes that are effective for dates of service starting July 1, 2025:

96202, Multiple-family group behavior management/ modification training for parent(s)/guardian(s)/ caregiver(s), without the patient present, face-to-face with multiple sets of parent(s)/guardian(s)/ caregiver(s); initial 60 minutes	G0541, Caregiver training in direct care strategies and techniques to support care for patients with an ongoing condition or illness and to reduce complications (including, but not limited to, techniques to prevent decubitus ulcer formation, wound care, and infection control), without the patient present, face-to-face; initial 30 minutes, G0541
97550, Caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community (e.g., activities of daily living [ADLs], instrumental ADLs [iADLs], transfers, mobility, communication, swallowing, feeding, problem solving, safety practices), without the patient present, face to face; initial 30 minutes	G0543, Group caregiver training in direct care strategies and techniques to support care for patients with an ongoing condition or illness and to reduce complications (including, but not limited to, techniques to prevent decubitus ulcer formation, wound care, and infection control), without the patient present, face-to-face with multiple sets of caregivers; 45 mins

<p>97552, Group caregiver training in strategies and techniques to facilitate the patient’s functional performance in the home or community (eg, activities of daily living [ADLs], instrumental ADLs [iADLs], transfers, mobility, communication, swallowing, feeding, problem solving, safety practices) (without the patient present), face to face with multiple sets of caregivers; 45 mins</p>	<p>G0539, Caregiver training in behavior management/ modification for caregiver(s), without the patient present, face-to-face; initial 30 minutes</p>
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- ✓ Added an Evidence Base Practice (EBP) Services section to reflect BH-CONNECT EBP services:
 - **Monthly Bundle Services:** Multisystemic Therapy (MST), H2033 (This service code is not yet available; providers will be notified once the code is active in IBHIS)
 - **Day Bundle Services:** Clubhouse Services, H2031:HE
 - **EBPs Based on Staff Time:** Functional Family Therapy (FFT), H0036 and Parent Child Interaction Therapy (PCIT) 90832:22, 90834:22, 90837:22, T2021:22, 90847:22, 90833:22, 90836:22, 90838:22
- ✓ Added RN to 96365 and 96369 which were inadvertently omitted from previous editions of the Guide
- ✓ Added LVN, LPT and students of these disciplines as an allowable discipline to the following:

<p>96372, Therapeutic, Prophylactic, or Diagnostic Injection; Subcutaneous or Intramuscular, 1-15 Minutes</p>
<p>96373, Therapeutic, Prophylactic, or Diagnostic Injection; Intraarterial, 1-15 Minutes</p>
<p>96374, Therapeutic, Prophylactic, or Diagnostic Injection; Intravenous Push, Single or Initial Substance/Drug, 15 Minutes</p>
<p>96377, Application of Onbody Injector for Timed Subcutaneous Injection, 15 Minutes</p>

- ✓ Removed T1013 as an allowable code for Peer Support Services codes H0025, Group Peer Support and H0038, Individual Peer Support
- ✓ Removed Socialization Day Service Section
 - Removed service codes: H2030:HX, Socialization Day Services and H2014, Vocational Day Services
- ✓ Removed PEI Outcome Measurement code S9986:HE:HX

If directly operated or contracted providers have questions related to this Bulletin, please email the QA Unit at QAPolicy@dmh.lacounty.gov

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