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BEHAVIORAL HEALTH SERVICES BULLETIN MENTAL HEALTH CLINICAL NURSE SPECIALIST (MHCNS), MENTAL HEALTH NURSE PRACTITIONER (MHNP), AND PSYCHOLOGIST RATE CHANGE

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UPDATE

In order to address the rate inequity between psychologists and advanced practice psychiatric nurses, rates for all procedures that are billable by both types of providers have been adjusted and equalized. The new rates, effective March 1, 2017, are in the tables below. Rates for procedure codes that are billable by only one of these types of providers were not changed.

NEW REQUIRED MODIFIER FOR MHCNS AND MHNP

MHCNS and MHNP must bill the following codes using modifier SA: 90791, 90792, 90832, 90834, 90839, 90846, 90847, 90853, 90865, 90870, 90880, 90885, 99406, and 99407. Current practices regarding unit/hour limitations, documentation requirements, and precertification requirements will remain the same. MHCNS and MHNP should utilize *either* the appropriate Evaluation and Management (E/M) code *or* the appropriate behavioral health code listed below. When billing for other E/M services not listed below, the SA modifier should not be used.

RATES FOR PSYCHOLOGISTS

LICENSED PSYCHOLOGISTS AND PROVISIONALLY LICENSED PSYCHOLOGISTS					
The AH modifier must be used on all codes below					
Procedure Code	Modifier	Modifier	Max Qty.	Description	Allowed Amount
90791	AH		6	Psychiatric diagnostic eval	\$48.28
90791	U8	AH	6	Psychiatric diagnostic eval - home	\$50.95
90832	AH		1	Individual therapy – 30 mins.	\$32.20
90832	U8	AH	1	Individual therapy – home – 30 mins.	\$37.55
90834	AH		1	Individual therapy – 45 mins.	\$64.27
90834	U8	AH	1	Individual therapy – home – 45 mins..	\$74.96
90839	AH		6	Psychotherapy for Crisis – 60 mins.	\$64.14
90839	U8	AH	6	Psychotherapy for Crisis – home – 60 mins.	\$69.49
90846	AH		1	Family therapy without patient present	\$64.40
90846	U8	AH	1	Family therapy without patient present - home	\$75.10
90847	AH		1	Family therapy with patient present	\$69.88
90847	U8	AH	1	Family therapy with patient present - home	\$75.10
90853	AH		3	Group therapy (other than multi-family)	\$13.49
90880	AH		1	Hypnotherapy	\$35.04
90885	AH		1	Psychiatric eval of records-inpatient only	\$25.66
96101	AH		4	Psychological test by professional	\$64.14
96101	U8	AH	4	Psychological test by professional - home	\$64.14
96103	AH		4	Psychological test by computer	\$21.38
96103	U8	AH	4	Psychological test by computer - home	\$21.38
96105	AH		1	Assessment of Aphasia	\$37.42
96111	AH		1	Developmental testing	\$41.87
96116	AH		1	Neurobehavior status exam	\$37.42
99406	AH		1	Smoking behavior change 3-10 mins.	\$8.55
99407	AH		1	Smoking behavior change over 10 mins.	\$12.83

RATES FOR MHCNS AND MHNP

MENTAL HEALTH CLINICAL NURSE SPECIALISTS AND MENTAL HEALTH NURSE PRACTITIONERS					
The SA modifier must be used on all codes below					
Procedure Code	Modifier	Modifier	Max Qty.	Description	Allowed Amount
90791	SA		6	Psychiatric diagnostic eval	\$48.28
90791	U8	SA	6	Psychiatric diagnostic eval - home	\$50.95
90792	SA		6	Psychiatric diagnostic evaluation with medical services	\$96.30
90792	U8	SA	6	Psychiatric diagnostic evaluation with medical services - home	\$101.64
90832	SA		1	Individual therapy – 30 mins.	\$32.20
90832	U8	SA	1	Individual therapy – home – 30 mins.	\$37.55
90834	SA		1	Individual therapy – 45 mins.	\$64.27
90834	U8	SA	1	Individual therapy , home 45 mins	\$74.96
90839	SA		6	Psychotherapy for Crisis – 60 mins.	\$64.14
90839	U8	SA	6	Psychotherapy for Crisis – 60 mins. - 60 mins.	\$69.49
90846	SA		1	Family therapy without patient present	\$64.40
90846	U8	SA	1	Family therapy without patient present - home	\$75.10
90847	SA		1	Family therapy with patient present	\$69.88
90847	U8	SA	1	Family therapy with patient present - home	\$75.10
90853	SA		3	Group therapy (other than multi-family)	\$13.49
90865	SA		1	Narcosynthesis	\$96.92
90870	SA		1	Electroconvulsive therapy	\$89.57
90880	SA		1	Hypnotherapy	\$35.04
90885	SA		1	Psychiatric evaluation of records – inpatient only	\$25.66
99406	SA		1	Smoking behavior change 3-10 mins.	\$8.55
99407	SA		1	Smoking behavior change over 10 mins.	\$12.83

CODES NO LONGER COVERED FOR MHCNS AND MHNP

The following procedure codes are no longer covered for MHCNS and MHNP: 96101, 96103, 96105, 96111 and 96116.

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at <http://dss.mo.gov/mhd/> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

**Provider Communications Hotline
573-751-2896**