

The purpose of this change form is to highlight revisions to the Uniform Service Coding Standards (USCS) Manual. Unless otherwise noted, the State (HCPF and OBH) has agreed that it will accept coding provided under the previous edition through March 31, 2021. Providers must implement the April 2021 edition by April 1, 2021 for dates of service April 1st and thereafter, regardless of submission date.

| Change | Reason for the Change |
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| Reorganized Section VII. Procedure Codes, including moving Targeted Case Management, Rehabilitation Services, and Vocational Services under "Treatment", and created a "Support Services" section. | To align this section in order and content with the 10 primary procedure categories that are listed under I.b. Manual Format and identified at the top of each coding page. |
| Deleted or replaced references to "face-to-face" with "direct contact" throughout the manual | To further provide consistency throughout the manual with the Telemedicine Policy that allows for clinician/RAE discretion on mode of delivery. |
| Changed "face-to-face" with "follow up" encounter in the notes section for codes 99441-3 | To further align language and intent of guidance with our Telemedicine Policy. |
| Deleted endnote in Allowed Modes of Delivery in Section VIII. | References were out of date/irrelevant since we updated the mode of delivery options on 1/1/21 |
| Updated the titles and descriptions for Certified Addiction Technician (CAT) and Certified Addiction Specialist (CAS) and LAC. | Name changes and scope of work were made in previous legislation and took effect April 1, 2021 |
| Removed CAC I, CAC II, CAC III from every coding page and added CAT, CAS on pages where those providers are permitted under the Staff Requirements Section | To align with the name changes per legislation |
| CAT was checked (allowed) to provide for H0006 on OBH page ONLY. CAT/CAS were checked (allowed) to provide for H2027 on OBH page ONLY. CAS was checked (allowed) to provide services on H0032 on OBH page only | The scope in services for these provider types was expanded along with the name change so OBH is allowing these providers to use these codes. |
| Deleted the disclaimer "**Do not submit this code until a State-defined purpose is determined." On code H1011. | OBH has reviewed this statement and has intentions to define the purpose of this code. |
| Deleted the Staff Requirement section for codes H0017, H0018 and H0019 (day rate/milieu codes) | This was creating confusion and billing for these services can be done under the facility instead of a provider |
| Added guidance to Revenue Code 0906 footnote to state " ** For Substance Use Disorder (SUD) diagnoses only - revenue code must be billed without procedure code." | Consistent with the new SUD benefit, this insures claims are billed properly |
| Updated the time ranges for 99201-99215 in Appendix B | This should have been done in the January edition to align with new E/M standards. |
| Updated the code span to remove 99201 on pages 52/53 | This should have been done in the January edition to align with new E/M standards. |
| Deleted parenthetical details for Mode of Treatment under Technical Documentation Standards | To align with edits from 1/1/21 regarding video conference, telephone, etc. on each coding page |