

The purpose of this change form is to highlight revisions to the State Behavioral Health Services (SBHS) Billing Manual. Unless otherwise noted, the State (HCPF and BHA) has agreed that it will accept coding provided under the previous edition through March 31, 2024. Providers must implement the April edition by April 1, 2024 for dates of service April 1st and thereafter, regardless of submission date.

Change	Reason for the Change
Added RN, LPC, LMFT, LCSW, LPN, and Licensed EdD/PhD/PsyD as service providers; edited language on H0020	Provider feedback requested that these providers be included as service providers.
Added H0036 HA and H0037 HA to appendix H and I	To clarify these codes can be used in multiple ways when distinguished by a modifier.
Added H0019 HB to appendix H and I	HB modifier differentiates Adult Mental Health Transitional Living from a QRTP
Added H0046 to Appendix H and I	H0046 was accidentally left off in previous editions
Added PT 64/373 to H0015	This is a new PT/ST specifically for IOP ASAM 2.1 created effective Jan 1, 2024
Added PT 78 to all appropriate coding pages	PT 78 is new Comprehensive Provider, added new PT to bill for appropriate procedure codes effective July 1
Added PT 78/887 Comprehensive Provider to appendix	PT 78 is new Comprehensive Provider
Changed language for H0023 on Appendix H and I where drop in was associated with H0023	Removed references to Drop In on procedure code pages for H0023
Added H0018 CSU, H0017 ATU and H0019 QRTP and H0019 AMHTL to Appendix H and I	To clarify the specific services these codes are used for.
Updated the HO Modifier policy	HO modifier policy updated to align with changes in Medicare policy regarding eligible providers.
Added allowable services outside of the H2036 per diem	Per policy allowing MAT and psychological evaluations to be billed separately on the same date as per diem treatment code