COLORADO
Department of Health Care
Policy & Financing

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Colorado System of Care (CO-SOC) Provider Enrollment & Billing Guidance

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Overview

The Colorado Department of Health Care Policy and Financing (HCPF) is working toward expanding and improving implementation of the Colorado System of Care (CO-SOC) that includes intensive in-home and community-based mental health services, intensive care coordination, mobile crisis intervention, and stabilization services. This will support Colorado Medicaid beneficiaries under the age of 21 for whom these services are medically necessary. The improved services will be culturally relevant, family-centered, and child-driven so that these services are provided in the most integrated and least restrictive setting.

CO-SOC Services

CO-SOC Services include the following:
- Enhanced Standardized Assessment (ESA)
- Enhanced Multi-Systemic Therapy (EMST)
- Enhanced Functional Family Therapy (EFFT)
- Enhanced High Fidelity Wraparound (EHFW)

These services are covered regardless of diagnosis, as long as a member meets program criteria and are medically necessary. Information regarding Medical Necessity Criteria, Exclusion Criteria, Continued Stay Criteria, and Discharge Criteria is found on the [Behavioral Health Policies, Standards, and Billing References webpage](#).

Provider Enrollment Guidance

HCPF will not create new provider types for providers that will perform CO-SOC services, as most of these providers participate in other spaces. Instead, HCPF will allow appropriate billing providers to add a CO-SOC flag to their Medicaid enrollment that will allow them to be reimbursed for the CO-SOC services. While this functionality is being built, the Workforce Capacity Center will host an updated list of allowable CO-SOC providers.

These enhanced services cannot be billed by Comprehensive Safety Net Providers (CSNPs), Federally Qualified Health Centers (FQHCs) or Rural Health Clinics (RHCs); these providers are required to have a separate enrollment as a provider type 77-388 or 77-389 to bill for CO-SOC services. HCPF will assist in expediting new provider type 77-388 or 77-389 enrollments for providers intending to offer CO-SOC services.

Individual provider types 37-520 and 38-521 can also bill for CO-SOC services.

CO-SOC Billing Guidance

Service Name	Code	Mod	Rate	Billing Providers	Rendering Providers	Place Of Service
Enhanced Standardized Assessments (ESA)	H2000	HA	$935.11 (single encounter)	77-388; 77-389; 37-520; 38-521	37-520; 38-521	02, 03, 04, 05, 06, 07, 08, 09, 10, 11,12, 15, 13, 14, 15, 16, 18, 21, 22, 23, 27, 31, 32, 33, 34, 49, 50, 51, 52, 55, 57, 72, 99
Enhanced Multisystemic Therapy (EMST)*	T2022	HA	$2625.69 (monthly encounter)	77-388; 77-389; 37-520; 38-521	37-520; 38-521	02, 03, 04, 05, 06, 07, 08, 09, 10, 11,12, 15, 13, 14, 15, 16, 18, 21, 22, 23, 27, 31, 32, 33, 34, 49, 50, 51, 52, 55, 57, 72, 99
Enhanced Functional Family Therapy (EFFT)**	T2022	HK	$2500.33 (monthly encounter)	77-388; 77-389; 37-520; 38-521	37-520; 38-521	02, 03, 04, 05, 06, 07, 08, 09, 10, 11,12, 15, 13, 14, 15, 16, 18, 21, 22, 23, 27, 31, 32, 33, 34, 49, 50, 51, 52, 55, 57, 72, 99

Service Name	Code	Mod	Rate	Billing Providers	Rendering Providers	Place Of Service
Enhanced High Fidelity Wraparound Services (EHFW), per Month	T2022	HT	$1150.00 (monthly encounter)	77-388; 77-389; 37-520; 38-521	37-520; 38-521	02, 03, 04, 05, 06, 07, 08, 09, 10, 11,12, 15, 13, 14, 15, 16, 18, 21, 22, 23, 27, 31, 32, 33, 34, 49, 50, 51, 52, 55, 57, 72, 99

Additional Billing Guidance:

- T2022 HT can only be billed once per member per month.
- T2022 HK OR HA can be billed once per member for each month the member receives a T2022 HT.
- MST services can be billed by CSNPs, FQHCs or RHCs under Multisystemic Therapy (MST) H2033 and included on their respective cost reports.
- FFT services can be billed by CSNPs, FQHCs or RHCs under Functional Family Therapy (FFT) H0036 +HA or H0037 +HA and included on their respective cost reports.

For more information contact
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