



COLORADO

Department of Health Care
Policy & Financing

HCPF Behavioral Health Crisis Services Hospital Billing Guidance

August 2023

Background:

As of July 1, 2023 the Dept. of Health Care Policy and Financing (HCPF) has updated the [Mobile Crisis Response \(MCR\)](#) services as part of the behavioral health crisis continuum of Medicaid covered services. MCR aims to meet members where they are, in the community, and problem-solve a safe plan with the information available on scene. The updated MCR definition was developed based on federal funding requirements, best practices in the field, and creating a standard process for this specialized and essential service.

Per the [MCR service definition](#), Medicaid cannot reimburse MCR services delivered in facilities, including hospitals, that are required to have crisis services available. While **MCR billing has changed, Medicaid continues to cover other crisis response services, including those that can be billed in a facility setting.** HCPF recognizes that there are existing workforce limitations, especially in rural hospitals that have historically been filled by discrete contracts with crisis providers. Below is an overview of how hospitals can bill for crisis services that are allowable in a hospital setting through multiple strategies. Additional information about billing of all crisis services is available in the [State Behavioral Health Services Billing Manual 2023](#).

Emergency Room Contracted Crisis Services Billing:

Emergency Rooms are able to use Contracted Crisis Services Providers which are under contract or have an agreement to deliver services on behalf of the hospital. These providers have access to medical consultation and intervention and have documentation responsibilities in accordance with their professional role and contract terms. Emergency Room Contracted Crisis Services Providers may operate independently (unlike the two-member team requirement of an MCR provider). The contracted provider must have appropriate training and credentials to assess, triage, and resolve crisis situations; they must be responsive to a crisis in a timely manner; and are required to coordinate care for members needing additional services outside of the crisis event.

Hospitals that do not have adequate staffing or are unable to respond to behavioral health crises at their facility may contract with external behavioral health providers to provide these services to Health First Colorado members.

Example of the types of Behavioral Health Providers include:

- Community Mental Health Centers
- Independent Licensed Behavioral Health Providers or groups



Professional services, when appropriate, may be billed to the Regional Accountable Entity (RAE) or through fee-for-service on a CMS 1500/837P claim.

Billing Considerations for Contracted Providers billing the RAEs:

- The contracted provider must be enrolled in Medicaid and contracted with the member's RAE.
- The contracted provider will bill the service on a professional claim (CMS 1500/837P).
- Crisis services that may be included in a provider's contract with the RAE are:
 - 90839 Psychotherapy for crisis, first 60 mins
 - 90840 Psychotherapy for crisis add-on, each additional 30 mins
 - H2011 Crisis intervention service, per 15 mins
 - S9485 Crisis intervention mental health services, per diem (mental health services only)
 - Codes allowed are dependent on RAE contracts with providers; please see most recent version of APPENDIX I: PROCEDURE CODES COVERED UNDER THE MEDICAID CAPITATED BEHAVIORAL HEALTH BENEFIT in the [State Behavioral Health Services Billing Manual](#) for other potential coding options.
- These services can be provided in-person or via telehealth when clinically appropriate and as approved by the RAE.
- Reimbursement is negotiated between the contracted provider and the RAE.

Emergency Room Hospital Crisis Services Billing:

Hospitals may continue to bill for crisis services provided in their facility on a UB-04 Institutional Claims. Reimbursement for the services provided by the hospital is included in the Enhanced Ambulatory Patent Group (EAPG) and All Patients Refined Diagnosis Related Groups (APR-DRG) payment methodologies. Please see [Inpatient/Outpatient \(IP/OP\) Billing Manual](#) for additional guidance.

Mobile Crisis Response (MCR) Billing:

[MCR Provider Type 95/772](#) use 90839 ET for the first 60 minutes of contact + H2011 ET for each additional 15 mins of service. See [State Behavioral Health Services Billing Manual](#) for additional guidance. To provide MCR services, the provider must enroll as the MCR provider type 95/772 and have a contract with RAE & ASO, per the MCR enrollment requirements.

Resources

[State Behavioral Health Services Billing Manual](#)
[Inpatient/Outpatient \(IP/OP\) Billing Manual](#)

For more information contact

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Hospital-related questions: diva.wood@state.co.us or jessica.short@state.co.us

Policy-related questions: HCPF_CrisisServices@state.co.us

