

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 Sept 30, 2021. Providers must implement the Oct 2021 edition by Oct 1, 2021 for dates of service Oct 1st and thereafter, regardless of submission date.

Change	Reason for the Change
Created New H0019 page for Qualified Residential Treatment Programs (QRTPs)	Per federal legislation this new provider type/service is effective October 1
Created New joint OBH/Medicaid H0018 page for Crisis Services Unit (CSU) – removed this modifier guidance from the existing H0018 page	Operationalizing coding manual guidelines that provide a distinct page for any distinct Code/Modifier pairings to provide clarity
Deleted the CSU billing option from H0019	CSU services are not allowable for longer than 30 days and should not have been indicated on the H0019 page
Removed the "Mode of Delivery" Section from Residential Code Pages H0017, H0018, H0019	This criterion is not relevant for a residential setting/code that pays a per diem.
Removed the "Mode of Delivery" section from ACT (H0039/40) per diem/15 min and Team-based codes (H0036/37)) on both OBH and Medicaid pages	This criterion is not relevant for a residential setting/team-based code that pays a per diem.
Removed the "Staff Requirements" section from ACT (H0039/40) per diem/15 min and Team-based codes (H0036/37)) on both OBH and Medicaid pages	This is consistent with other coding pages that are team-based or milieu-based services.
A paragraph explaining OBH telemedicine policy was added to section II. C.	The existing policy was focused on Medicaid primarily and this new language makes explicit OBHs alignment.
A "Per Diem Procedure Codes" subpoint was added to the Time/Untimed Code guidance section	This is intended to align billing practice for providers and ensure consistent reimbursement practice by the RAEs
Deleted the 3.2 WM Partial Per Diem coding page	This was creating confusion among providers and the RAEs agreed and requested it be deleted.