



JENNIFER KENT
DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

DATE: September 14, 2017

MHSUDS INFORMATION NOTICE NO.: 17-045

TO: COUNTY BEHAVIORAL HEALTH DIRECTORS
COUNTY DRUG & ALCOHOL ADMINISTRATORS
COUNTY BEHAVIORAL HEALTH DIRECTORS ASSOCIATION OF CALIFORNIA
CALIFORNIA COUNCIL OF COMMUNITY BEHAVIORAL HEALTH AGENCIES
COALITION OF ALCOHOL AND DRUG ASSOCIATIONS
CALIFORNIA ASSOCIATION OF ALCOHOL & DRUG PROGRAM EXECUTIVES, INC.
CALIFORNIA ALLIANCE OF CHILD AND FAMILY SERVICES
CALIFORNIA OPIOID MAINTENANCE PROVIDERS

SUBJECT: DRUG MEDI-CAL ORGANIZED DELIVERY SYSTEM HEALTHCARE COMMON PROCEDURE CODING SYSTEM (HCPCS) AND MODIFIERS

SUPERCEDES: [MHSUDS Information Notice 17-002](#)

PURPOSE

The purpose of this Information Notice is to inform the Counties of the required Healthcare Common Procedure Coding System (HCPCS) codes to use when claiming on the [ANSI ASC X12N 837P](#) electronic claim file.

DISCUSSION

The current practice for claiming Drug Medi-Cal (DMC) to Short Doyle/Medi-Cal (SDMC) through the Information Technology Web Services portal will be continued for claiming DMC Organized Delivery System (ODS) claims. However, there will be a variety of additional codes and modifiers needed to distinguish between the various ODS services that will now be available.

Currently, DMC uses a set of eight HCPCS codes for the State Plan services (H0004, H0005, H0015, H0018, H0019, H0020, S5000, and S5001). DMC also uses HCPCS modifiers to distinguish perinatal services from non-perinatal services (HD = perinatal), and to distinguish NTP from non-NTP services (HG = NTP). Additionally, in any case where a multiple claim of service on the same date was appropriate, there were three modifiers used (59 - Distinct Procedural Service, 76 - Repeat Procedure by Same person, 77 - Repeat Procedure by Different person).

Once a county has opted in to the DMC-ODS Pilot, the old codes and modifiers will not be sufficient to approve the claim in the SDMC system. New combinations of HCPCS codes and modifiers must be submitted on the 837P claim file. The following chart includes all of the codes and modifiers needed to submit claims to SDMC for the DMC-ODS services.

DMC ODS HCPC Codes and Modifiers

ODS ODF			
H0004	Individual Counseling	U7	
H0005	Group Counseling	U7	
H0006	Case Management	U7	
G9008	Physician Consultation	U7	
H0014	Ambulatory Withdrawal Management 1-WM	U7	U4
H0014	Ambulatory Withdrawal Management 2-WM	U7	U5
H2010	Medication Assisted Treatment (MAT)	U7	
S5000	Medication Assisted Treatment (MAT) generic drug	U7	
S5001	Medication Assisted Treatment (MAT) brand name drug	U7	
H0004	Recovery Services - Individual Counseling	U6	U7
H0005	Recovery Services - Group Counseling	U6	U7
H0006	Recovery Services - Case Management	U6	U7
T1012	Recovery Services – Recovery Monitoring/Substance Abuse Assistance	U6	U7
ODS IOT			
H0015	Intensive Outpatient Treatment	U8	
H0006	Case Management	U8	
G9008	Physician Consultation	U8	
H0014	Ambulatory Withdrawal Management 1-WM	U8	U4
H0014	Ambulatory Withdrawal Management 2-WM	U8	U5
H2010	Medication Assisted Treatment (MAT)	U8	
S5000	Medication Assisted Treatment (MAT) generic drug	U8	
S5001	Medication Assisted Treatment (MAT) brand name drug	U8	
H0004	Recovery Services - Individual Counseling	U6	U8
H0005	Recovery Services - Group Counseling	U6	U8
H0006	Recovery Services - Case Management	U6	U8
T1012	Recovery Services – Recovery Monitoring/Substance Abuse Assistance	U6	U8
ODS PH			
S0201	Partial Hospitalization	UB	
H0006	Case Management	UB	
G9008	Physician Consultation	UB	
H0014	Ambulatory Withdrawal Management 1-WM	UB	U4
H0014	Ambulatory Withdrawal Management 2-WM	UB	U5
H2010	Medication Assisted Treatment (MAT)	UB	
S5000	Medication Assisted Treatment (MAT) generic drug	UB	

S5001	Medication Assisted Treatment (MAT) brand name drug	UB	
H0004	Recovery Services - Individual Counseling	U6	UB
H0005	Recovery Services - Group Counseling	U6	UB
H0006	Recovery Services - Case Management	U6	UB
T1012	Recovery Services – Recovery Monitoring/Substance Abuse Assistance	U6	UB
ODS OTP/NTP			
H0004	Individual Counseling	UA	HG
H0005	Group Counseling	UA	HG
H0006	Case Management	UA	HG
G9008	Physician Consultation	UA	HG
H0020	Methadone Dosing	UA	HG
S5000	Medication Assisted Treatment (MAT) generic drug	UA	HG
S5001	Medication Assisted Treatment (MAT) brand name drug	UA	HG
H0004	Recovery Services - Individual Counseling	U6	UA
H0005	Recovery Services - Group Counseling	U6	UA
H0006	Recovery Services - Case Management	U6	UA
T1012	Recovery Services – Recovery Monitoring/Substance Abuse Assistance	U6	UA
ODS 3.1 RES			
H0019	Residential	U1	
H0006	Case Management	U1	
G9008	Physician Consultation	U1	
H2010	Medication Assisted Treatment (MAT)	U1	
S5000	Medication Assisted Treatment (MAT) generic drug	U1	
S5001	Medication Assisted Treatment (MAT) brand name drug	U1	
H0004	Recovery Services - Individual Counseling	U6	U1
H0005	Recovery Services - Group Counseling	U6	U1
H0006	Recovery Services - Case Management	U6	U1
T1012	Recovery Services – Recovery Monitoring/Substance Abuse Assistance	U6	U1
ODS 3.3 RES			
H0019	Residential	U2	
H0006	Case Management	U2	
G9008	Physician Consultation	U2	
H2010	Medication Assisted Treatment (MAT)	U2	
S5000	Medication Assisted Treatment (MAT) generic drug	U2	
S5001	Medication Assisted Treatment (MAT) brand name drug	U2	
H0004	Recovery Services - Individual Counseling	U6	U2

H0005	Recovery Services - Group Counseling	U6	U2
H0006	Recovery Services - Case Management	U6	U2
T1012	Recovery Services – Recovery Monitoring/Substance Abuse Assistance	U6	U2
ODS 3.5 RES			
H0019	Residential	U3	
H0006	Case Management	U3	
G9008	Physician Consultation	U3	
H2010	Medication Assisted Treatment (MAT)	U3	
S5000	Medication Assisted Treatment (MAT) generic drug	U3	
S5001	Medication Assisted Treatment (MAT) brand name drug	U3	
H0004	Recovery Services - Individual Counseling	U6	U3
H0005	Recovery Services - Group Counseling	U6	U3
H0006	Recovery Services - Case Management	U6	U3
T1012	Recovery Services – Recovery Monitoring/Substance Abuse Assistance	U6	U3
ODS 3.2 WM			
H0012	Residential Withdrawal Management 3.2-WM	U9	
H0006	Case Management	U9	
G9008	Physician Consultation	U9	
H2010	Medication Assisted Treatment (MAT)	U9	
S5000	Medication Assisted Treatment (MAT) generic drug	U9	
S5001	Medication Assisted Treatment (MAT) brand name drug	U9	

It will be necessary to submit claims for youth (under 21 years old) with the HA modifier. It will also be necessary to submit claims for pregnant and perinatal services using the HD modifier (current practice for DMC billing).

Each claim will include one of the HCPCS codes listed depending on the facility and service claimed. Additionally, the modifiers will need to establish the level of care (U codes) and distinguish between Narcotic Treatment Program (NTP) and non-NTP (HG = NTP), between youth and adult (HA = youth), as well as between perinatal and non-perinatal (HD = perinatal). The Medication Assisted Treatment (MAT) claims also need to include the National Drug Code for the medications that are administered in the NTP setting (buprenorphine, disulfiram, and naloxone); and in the cases where the county has set a rate for MAT non-NTP medications.

Due to the changes to same day billing requirements for the DMC-ODS ([Information Notice 17-039](#)), there will be no need for multiple billing override codes on these claims.

The use of U codes to distinguish between the different levels of care in the DMC-ODS provides the needed data point allowing tracking for the additional services (case management, physician consultation, withdrawal management, and recovery services). It

will be very difficult to distinguish these services without the U codes due to the likelihood that a single facility will have multiple levels of care available. For example, DHCS needs to know the difference between case management for the Outpatient Drug Free (ODF) level of care versus for the Intensive Outpatient Treatment (IOT) level of care. Since the case management HCPCS code will be the same at the ODF or the IOT level of care, or at any level of care. It is necessary to identify where the service took place using the level of care U code.

Here are a few examples for how to combine HCPCS codes and modifiers for claims:

1. If a perinatal adult beneficiary is served in an ODS-ODF facility and receives a case management service, the claim would need to include these codes and modifiers – H0006|U7|HD.
2. If a non-perinatal youth beneficiary is served in a level 3.5 residential facility and there is a physician consultation that needs to be claimed, the codes and modifiers would be – G9008|U3|HA.
3. If an adult beneficiary has completed treatment at an IOT facility and has transitioned into recovery services at that same facility, when this beneficiary receives a recovery monitoring service the codes and modifiers would be – T1012|U6|U8.

The combination of HCPCS codes and modifiers are highly structured and required for approval and reimbursement for all DMC-ODS claims. The SDMC claims adjudication process will be programmed to evaluate the combinations of codes to ensure the correct combinations for each service. For example, if a youth services claim is submitted with the “HA” modifier, the system will validate if the beneficiary was under the age of 21 on the date of service. Most of the current validations for DMC claims will remain in place, for example any pregnant or post-partum beneficiary would need to have the pregnancy indicator on the claim for perinatal services.

There is a specific DMC-ODS chapter added to the [Drug Medi-Cal Billing Manual](#) with additional information about submitting claims for ODS services. We anticipate the publication of a DMC-ODS specific companion guide. Until the companion guide is available, this initial document establishes the HCPCS codes and modifiers that will be required for claiming DMC ODS claims to SDMC using the 837P electronic file.

QUESTIONS/MAINTENANCE

Questions regarding this Information Notice should be addressed to Marco Zolow, Health Program Specialist, Program, Policy, and Fiscal Division at marco.zolow@dhcs.ca.gov.

Sincerely,

Original signed by

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Mental Health & Substance Use Disorder Services