To: To All Physicians, Mental Health Providers, Clinics, and Community Mental Health Centers

Subject: Clarification of Mental Health Modifiers, Mental Health Clinics, and Community Mental Health Centers

Overview

The Office of Medicaid Policy and Planning (OMPP) is implementing use of the following modifiers and providing further clarification about billing mental health services rendered by mid-level practitioners under the supervision of a physician, psychiatrist, or health service provider in psychology (HSPP). These modifiers are listed in field 24D of the *CMS-1500* claim form. This bulletin outlines the modifiers that must be used with appropriate procedure codes for claims billed for dates of service on or after **January 1, 2004**.

Billing

Modifiers AK, AL, AY, AV, and YK were previously used for billing nurse practitioner services and clinical nurse specialists services, and were end-dated as of December 31, 2003. Use of modifiers AH and AJ were not discontinued, but the narratives for the modifiers changed. Modifier SA is a 2002 modifier now being used by the Indiana Health Coverage Programs (IHCP) to describe nurse practitioner services. The identified modifiers for billing mental health services are described in Table 1.

Note: When modifier SA is used alone, it refers to nurse practitioner services or clinical nurse specialist services, but when used with modifier HE, it refers to nurse practitioner or clinical nurse specialist in a mental health arena.

| Modifier billed prior to 1/1/04 | Modifier Description prior to 1/1/04 | Modifier billed after 1/1/04 | Modifier Description after 1/1/04 | | |
|---------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------|--|--|
| АН | Clinical psychologist services and independent practice school psychologist, mid-level practitioner | AH or | Clinical psychologist (only) | | |
| | | 01 | | | |
| | | HE | Mid level practitioner | | |
| AJ | Clinical social worker services and social worker, mid-level practitioner, certified nurse specialist (CNS) for mental health services | AJ | Clinical social worker (only) | | |
| | | or | | | |
| | | HE | Mid level practitioner | | |

| Table 1 – Changes in Mental Health Modifiers |
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| Modifier billed prior to 1/1/04 | Modifier Description prior to 1/1/04 | Modifier billed after 1/1/04 | Modifier Description after 1/1/04 |
|------------------------------------|-------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------|
| AK | Nurse practitioner, team member service in a rural area | HE in conjunction with SA | Services provided by a nurse practitioner or clinical nurse specialist |
| | | | or |
| | | SA (only) | Nurse practitioner or clinical nurse specialist (NP/CNS) in a non mental health arena |
| AL | Nurse practitioner, non rural team member | HE in conjunction with SA | Services provided by a nurse practitioner or clinical nurse specialist |
| | | | or |
| | | SA (only) | NP/CNS in a non mental health arena |
| AV | Nurse practitioner, non team member service in a rural area | HE in conjunction with SA | Services provided by a nurse practitioner or clinical nurse specialist |
| | | | or |
| | | SA (only) | NP/CNS in a non mental health arena |
| AY | Clinical nurse specialist | HE in conjunction with SA | Services provided by a nurse practitioner or clinical nurse specialist |
| | | | or |
| | | SA (only) | NP/CNS in a non mental health arena |
| ҮК | Nurse practitioner, team member service in a non rural area | HE in conjunction with SA | Services provided by a nurse practitioner or clinical nurse specialist |
| | | | or |
| | | SA (only) | NP/CNS in a non mental health arena |
| N/A | N/A | HW | Medicaid Rehabilitation Option (MRO) services |

Table 1 – Changes in Mental Health Modifiers

Claims for mid-level practitioner services billed with the modifiers listed in Table 1 will reimburse 75 percent of the IHCP-allowed amount for the procedure code identified. Claims for dates of service on or after January 1, 2004, that were billed for mid-level practitioner services without using a modifier and that were paid at 100 percent of the fee schedule, must be resubmitted as adjustments with the applicable modifiers added.

In addition to the modifiers listed in Table 1 that are used to identify the qualifications of the individual rendering the service, Community Mental Health Centers must continue to use the HW modifier to denote MRO services.

Additional Information

Direct questions about this bulletin to the Customer Assistance Unit at (317) 655-3240 in the Indianapolis local area or 1-800-577-1278.

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