

**Office of Mental Health Programs**

**Therapeutic and Evaluative (T&E) Mental Health  
Services for Expanded EPSDT**

**Provider Training Webinar**

**December 7, 2016**

**1:30 p.m. -3:30 p.m.**



MISSISSIPPI DIVISION OF  
**MEDICAID**

# Policy/Provider Guidance

- Currently the Mississippi Medicaid State Plan, Section 3, Attachment 3.1-A, Exhibit 4b, pages 4-5 with regard to Rehabilitative Services is still in effect.
- An informative guidance document for providers is available via a link under the Therapeutic and Evaluative Mental Health Services (T&E) heading on our website.
- Billing Guidelines are updated annually effective July 1<sup>st</sup> and are located on our website under Fee Schedules and Rates.

# New Provider Types

- Effective January 1, 2016, **Licensed Professional Counselors (LPCs)** began enrolling as individual Medicaid providers.
- Effective July 1, 2016, **Board Certified Behavior Analysts (BCBAs)** began enrolling as Medicaid providers.

# Helpful Information

- **HA** modifier should be placed on all T&E claims in the **1st** modifier position.
- T&E providers will not be reimbursed for services provided to adults or for services provided by anyone other than themselves.
- Services provided to the same beneficiary on the same date of service should be billed on one claim form.
- Psychological Evaluations must be completed by a licensed psychologist & should include any recommendations for placement or therapy services, etc.

# National Correct Coding Initiative (NCCI)

- NCCI edit files are updated every quarter.
- Providers should always check NCCI edits to ensure certain codes can be billed together.
- DOM cannot tell providers which codes to bill or which modifiers to use.

# NCCI Edits Overview

- The CMS NCCI promotes national correct coding methodologies and reduces improper coding which may result in inappropriate payments of Medicare Part B and Medicaid claims.
- **Please note the Medicaid NCCI program is different than the Medicare NCCI program.**
- Medicaid NCCI Edit files and reference documents can be found at this link: <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Data-and-Systems/National-Correct-Coding-Initiative.html>

# NCCI Edits

- The NCCI contains two types of edits:
  - ▶ NCCI procedure-to-procedure (PTP) edits define pairs of HCPCS/CPT codes that should not be reported together for a variety of reasons. The purpose of the PTP edits is to prevent improper payments when incorrect code combinations are reported.
  - ▶ Medically Unlikely Edits (MUEs) define for each HCPCS/CPT code the maximum units of service (UOS) that a provider would report under most circumstances for a single beneficiary on a single date of service.
- The Medicaid NCCI program consists of six methodologies with mental health services falling under the PTP edits for practitioner and ambulatory surgical center services.

# NCCI Edits

- For an NCCI Edit the ***most appropriate*** modifier should be placed in the **2<sup>nd</sup>** modifier position, which can be found on the NCCI Edit page. You may also find the most appropriate modifier by referencing the most current CPT Code Book.
- “How to Use the Medicare National Correct Coding Initiative (NCCI) Tools” at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/How-To-Use-NCCI-Tools.pdf> provides useful information on pages 4 - 6 about the column 1/column 2 code pairs. Page 13 provides useful information on how to filter the edits.



# Autism Spectrum Disorder (ASD)

- Centers for Medicare and Medicaid Services (CMS) guidance effective September, 2014:
  - ▶ Services should not be provided as a waiver.
  - ▶ Applied Behavior Analysis (ABA) is one treatment modality for ASD, but others can be used for people diagnosed with ASD.
  - ▶ CMS is not endorsing or requiring any particular treatment modality for ASD.

# DOM and ASD

- State Plan Amendment (SPA) is currently in the Governor's Office awaiting review and approval.
- Upon approval by the Governor it will be submitted to CMS for final review and approval.
- The proposed effective date is January 1, 2017, pending CMS approval.

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# Questions?



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