

Billing Guide for BHRS Assessment and Initial Treatment Levels of Care (LOC)

LOC I & II	LOC Description	Staff qualified to provide the service	Maximum Hours/Units per day	Authorization Period	Number of Units to be Authorized	Rate
400-126	BHRS Assessment	BSC (Doctoral or Master's Level), MT	6 hours/24 units per day	15 business days	400	\$16.85 per 15-minute unit/\$67.40 per hour
400-127	BHRS Initial Treatment	BSC (Doctoral or Master's Level), MT, TSS	12 hours/48 units per day	30 business days	1500	\$16.85 per 15-minute unit/\$67.40 per hour
400-128	BHRS Assessment-Autism	BSC-A (Doctoral or Master's Level), MT	6 hours/24 units per day	15 business days	400	\$16.85 per 15-minute unit/\$67.40 per hour
400-129	BHRS Initial Treatment-Autism	BSC-A (Doctoral or Master's Level), MT, TSS	12 hours/48 units per day	30 business days	1500	\$16.85 per 15-minute unit/\$67.40 per hour
400-130	BHRS Assessment-ABA	BSC-A (Doctoral or Master's Level)	6 hours/24 units per day	30 business days	750	\$35.00 per 15-minute unit/\$140.00 per hour
400-131	BHRS Initial Treatment-ABA	BSC-A (Doctoral or Master's Level), TSS	12 hours/48 units per day	45 business days	2500	\$16.85 per 15-minute unit/\$67.40 per hour
400-132	STS Assessment	MT	6 hours/24 units per day	15 business days	400	\$16.85 per 15-minute unit/\$67.40 per hour
400-133	STS Initial Treatment	MT, TSS	6 hours/24 units per day	30 business days	1500	\$16.85 per 15-minute unit/\$67.40 per hour

Authorization Specifications

- All LOCs will require prior authorization by your assigned CBH Care Manager.
- Authorizations for each LOC will be generated based on the Authorization Period and Number of Units to be Authorized as noted.
- Authorization periods are based on business days and may vary due to the number of weekend days in the authorization period (the authorization period will be adjusted to account for Federal holidays).
- CBH will generate authorizations for the above levels of care, beginning on the start date requested, provided the Written Order is submitted to CBH within five business days of the start date. Any Written Orders submitted past five business days of the start date requested will have authorizations generated beginning on the date of the request.

Documentation Standards

- LOCs can be provided by multiple staff, documentation should be consistent with CBH documentation standards for BHRS. For example, if a member is authorized for LOC 400-126 and receives one hour of BSC and two hours of MT services, there should be separate notes completed by the BSC and MT for services provided under that authorization.

Billing Specifications

- The billing sentence for each BHRS Assessment and Initial Treatment Level of Care is summarized below. Services must be billed consistent with the level of staff providing the service. Example: a provider enrolled as a Provider Type 08/Specialty 110 receives an authorization for LOC 400-126 and provides a CBH member with one hour of Master's Level BSC and two hours of MT during the initial date of service. The provider should submit a claim for four units of BSC using H0032/HO and eight units of MT using H2019/UB. Services should be documented in the member's chart as referenced above.
- There is an expectation that providers will bill for at least one hour of Master's level (BSC or MT) professional services when delivering the Initial Treatment.

Billing Sentences for LOC 400-126 BHRS Assessment

BEHAVIORAL SPECIALIST CONSULTANT							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	810	H0032	HP		Mental Health Service Plan Development by Non-physician (BSC - Doctoral Level)	15 min	11, 12, 23, 99
11	559, 444, 448, or 452	H0032	HP		Mental Health Service Plan Development by Non-physician (BSC - Doctoral Level)	15 min	11, 12, 23, 99
08	810	H0032		HO	Mental Health Service Plan Development by Non-physician (BSC - Master's Level)	15 min	11, 12, 23, 99
11	559, 444, 448, or 452	H0032		HO	Mental Health Service Plan Development by Non-physician (BSC - Master's Level)	15 min	11, 12, 23, 99
19	559	H0032	HP		Mental Health Service Plan Development by Non-physician (BSC - Doctoral Level)	15 min	11, 12, 23, 99
19	559	H0032		HO	Mental Health Service Plan Development by Non-physician (BSC - Master's Level)	15 min	11, 12, 23, 99
MOBILE THERAPY							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	809	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
11	549, 443, 447, or 451	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
19	549	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99

Billing Sentences for LOC 400-127 BHRS Initial Treatment

BEHAVIORAL SPECIALIST CONSULTANT							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	810	H0032	HP		Mental Health Service Plan Development by Non-physician (BSC - Doctoral Level)	15 min	11, 12, 23, 99
11	559, 444, 448, or 452	H0032	HP		Mental Health Service Plan Development by Non-physician (BSC - Doctoral Level)	15 min	11, 12, 23, 99
08	810	H0032		HO	Mental Health Service Plan Development by Non-physician (BSC - Master's Level)	15 min	11, 12, 23, 99
11	559, 444, 448, or 452	H0032		HO	Mental Health Service Plan Development by Non-physician (BSC - Master's Level)	15 min	11, 12, 23, 99
19	559	H0032	HP		Mental Health Service Plan Development by Non-physician (BSC - Doctoral Level)	15 min	11, 12, 23, 99
19	559	H0032		HO	Mental Health Service Plan Development by Non-physician (BSC - Master's Level)	15 min	11, 12, 23, 99
MOBILE THERAPY							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	809	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
11	549, 443, 447, or 451	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
19	549	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99

THERAPEUTIC STAFF SUPPORT							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	808	H2021	UB		Community-based Wraparound Svcs (TSS)	15 min	12, 23, 99
11	548, 442, 446, or 450	H2021	UB		Community-based Wraparound Svcs (TSS)	15 min	12, 23, 99
19	548	H2021	UB		Community-based Wraparound Svcs (TSS)	15 min	12, 23, 99

Billing Sentences for LOC 400-128 BHRS Assessment-Autism

BEHAVIOR SPECIALIST CONSULTANT FOR CHILDREN WITH AUTISM SPECTRUM DISORDER							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	558	H0046	HP		Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Doctoral Level)	15 min	11, 12, 23, 99
11	558	H0046	HP		Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Doctoral Level)	15 min	11, 12, 23, 99
08	558	H0046		HO	Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Master's Level)	15 min	11, 12, 23, 99
11	558	H0046		HO	Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Master's Level)	15 min	11, 12, 23, 99
19	558	H0046	HP		Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Doctoral Level)	15 min	11, 12, 23, 99
19	558	H0046		HO	Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Master's Level)	15 min	11, 12, 23, 99
MOBILE THERAPY							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	809	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
11	549, 443, 447, or 451	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
19	549	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99

Billing Sentences for LOC 400-129 BHRS Initial Treatment-Autism

BEHAVIOR SPECIALIST CONSULTANT FOR CHILDREN WITH AUTISM SPECTRUM DISORDER							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	558	H0046	HP		Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Doctoral Level)	15 min	11, 12, 23, 99
11	558	H0046	HP		Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Doctoral Level)	15 min	11, 12, 23, 99
08	558	H0046		HO	Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Master's Level)	15 min	11, 12, 23, 99
11	558	H0046		HO	Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Master's Level)	15 min	11, 12, 23, 99
19	558	H0046	HP		Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Doctoral Level)	15 min	11, 12, 23, 99
19	558	H0046		HO	Mental health services, not otherwise specified (Behavior Specialist Consultant for Children with Autism Spectrum Disorder BSC-ASD - Master's Level)	15 min	11, 12, 23, 99
MOBILE THERAPY							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	809	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
11	549, 443, 447, or 451	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
19	549	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
THERAPEUTIC STAFF SUPPORT							
Provider Type	Specialty Code	Billing Code			Service Description	Unit of Measure	Place of Service
08	808	H2021	UB		Community-based Wraparound Svcs (TSS)	15 min	12, 23, 99
11	548, 442, 446, or 450	H2021	UB		Community-based Wraparound Svcs (TSS)	15 min	12, 23, 99
19	548	H2021	UB		Community-based Wraparound Svcs (TSS)	15 min	12, 23, 99

Billing Sentences for LOC 400-130 BHRS Assessment-ABA

BEHAVIORAL SPECIALIST CONSULTANT - APPLIED BEHAVIORAL ANALYSIS (ABA) TO CHILDREN WITH AUTISM SPECTRUM DISORDERS							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	558	H0046	HO	HA	Mental health services, not otherwise specified (BSC-ASD Master's Level [ABA])	15 min	11, 12, 23, 99
11	558	H0046	HO	HA	Mental health services, not otherwise specified (BSC-ASD Master's Level [ABA])	15 min	11, 12, 23, 99
19	558	H0046	HO	HA	Mental health services, not otherwise specified (BSC-ASD Master's Level [ABA])	15 min	11, 12, 23, 99
08	558	H0046	HP	HA	Mental health services, not otherwise specified (BSC-ASD Doctoral Level [ABA])	15 min	11, 12, 23, 99
11	558	H0046	HP	HA	Mental health services, not otherwise specified (BSC-ASD Doctoral Level [ABA])	15 min	11, 22, 23, 99
19	558	H0046	HP	HA	Mental health services, not otherwise specified (BSC-ASD Doctoral Level [ABA])	15 min	11, 12, 23, 99
11	561	H0046	HO	HA	Mental health services, not otherwise specified (BSC-ASD Master's Level [ABA])	15 min	11, 12, 23, 99

Billing Sentences for LOC 400-131 BHRS Treatment-ABA

BEHAVIORAL SPECIALIST CONSULTANT - APPLIED BEHAVIORAL ANALYSIS (ABA) TO CHILDREN WITH AUTISM SPECTRUM DISORDERS							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	558	H0046	HO	HA	Mental health services, not otherwise specified (BSC-ASD Master's Level [ABA])	15 min	11, 12, 23, 99
11	558	H0046	HO	HA	Mental health services, not otherwise specified (BSC-ASD Master's Level [ABA])	15 min	11, 12, 23, 99
19	558	H0046	HO	HA	Mental health services, not otherwise specified (BSC-ASD Master's Level [ABA])	15 min	11, 12, 23, 99
08	558	H0046	HP	HA	Mental health services, not otherwise specified (BSC-ASD Doctoral Level [ABA])	15 min	11, 12, 23, 99
11	558	H0046	HP	HA	Mental health services, not otherwise specified (BSC-ASD Doctoral Level [ABA])	15 min	11, 22, 23, 99
19	558	H0046	HP	HA	Mental health services, not otherwise specified (BSC-ASD Doctoral Level [ABA])	15 min	11, 12, 23, 99
11	561	H0046	HO	HA	Mental health services, not otherwise specified (BSC-ASD Master's Level [ABA])	15 min	11, 12, 23, 99
THERAPEUTIC STAFF SUPPORT							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	800, 804, or 808	H2021	UB	HA	Community-based Wraparound Svcs (TSS [ABA])	15 min	12, 23, 99
11	442, 446, 450, or 548	H2021	UB	HA	Community-based Wraparound Svcs (TSS [ABA])	15 min	12, 23, 99
19	548	H2021	UB	HA	Community-based Wraparound Svcs (TSS [ABA])	15 min	12, 23, 99
11	562	H2021	UB	HA	Community-based Wraparound Svcs (TSS [ABA])	15 min	12, 23, 99

Billing Sentences for LOC 400-132 STS Assessment

MOBILE THERAPY							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	809	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
11	549, 443, 447, or 451	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
19	549	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99

Billing Sentences for LOC 400-133 STS Initial Treatment

MOBILE THERAPY							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	809	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
11	549, 443, 447, or 451	H2019	UB		Therapeutic Behavioral Svcs (MT)	15 min	12, 99
THERAPEUTIC STAFF SUPPORT							
Provider Type	Specialty Code	Billing Code	Price Modifier	Info Modifier	Service Description	Unit of Measure	Place of Service
08	808	H2021	UB		Community-based Wraparound Svcs (TSS)	15 min	12, 23, 99
11	548, 442, 446, or 450	H2021	UB		Community-based Wraparound Svcs (TSS)	15 min	12, 23, 99

Key

Place of Service codes

11 = Office

12 = Home

23 = Emergency Room - Hospital

99 = Other

Modifiers

HA = Child/adolescent program

HO = Master's degree level

HP = Doctoral level

UB = Medicaid pricing modifier