



November 2005

## Psychological Services Effective January 1, 2006

Medical Bulletin  
05-021

### **This bulletin supersedes current information in the EqualityCare Manual**

There are **NO** changes to psychiatric services as described in the EqualityCare Manual.

Due to a change in the payer of psychological services for HCBS Waivers effective July 1, 2005 the following changes are being made to psychological services.

#### **Provider Information**

EqualityCare covers medically necessary psychological services if provided by a licensed psychologist. The psychologist can be independent or part of an agency. To be able to bill under EqualityCare, the psychologist must have an EqualityCare provider number through ACS.

- If a psychologist has only an EqualityCare provider number, there will be no change in the provider number.
- If a psychologist has only a DD provider number, a new provider number will be issued. The current provider enrollment will be used to set up this new provider number. If additional paperwork is required, the psychologist will be contacted.
- If a psychologist has both a DD and EqualityCare provider number, the DD provider number will become inactive on January 1, 2006. Beginning January 1, 2006, only the EqualityCare provider number should be used. If you are not sure which provider number to use, please contact Christine Bates at 307-777-3594 or at [cbates@state.wy.us](mailto:cbates@state.wy.us).



EqualityCare will also cover medically necessary psychological services provided by the following mental health professionals, if they are directly supervised by a licensed psychologist:

- a licensed professional counselor,
- a licensed clinical social worker,
- a licensed marriage and family therapist,
- a licensed advanced practitioner of nursing (specialty area of psychiatric/mental health),
- a provisionally licensed person by the Mental Health Professions Licensing Board pursuant to the Mental Health Professions Practice Act (Wyo. Stat. §§ 33-38-101 through 113),
- a psychological resident as defined by the Wyoming State Board of Psychology Rules and Regulations (Wyo. Stat. §§ 33-27-113 through 123), or
- a certified social worker or a certified mental health worker, certified by the Mental Health Professions Licensing Board pursuant to the Mental Health Professions Practice Act (Wyo. Stat. §§ 33-38-101 through 113),

**Supervision** means the ready availability of the supervising psychologist for consultation and direction of the activities of the mental health professional by telecommunication as sufficient to show ready availability when such contact is sufficient to provide quality medical care. The supervising psychologist shall maintain the final responsibility for the care of the patient and the performance of the mental health professional(s) he/she is supervising.

### **Non-covered Services**

H0004 – Psychological Services through an HCBS Waiver: Effective January 1, 2006, this code will no longer be covered.

### **Covered Services**

H0031 – Clinical Assessment: Contact with the client and/or collaterals as necessary, for the purposes of completing an evaluation of the client's mental health/substance abuse disorder(s) and treatment needs, including psychological testing if indicated, and establishing a DSM (latest edition) diagnosis, per 15 minutes. (Services for codes 96100, 96115 and 96117 would be included under this code.)

DD/ABI definition: Contact with the client and/or collaterals as necessary, for the purposes of gathering information, completing an evaluation of the client's mental health/cognitive disorder(s) (i.e. mental retardation, brain injury or a related condition) including planning of treatment needs, including psychological testing if indicated, and

establishing a DSM (latest edition) diagnosis, per 15 minutes. (Services for codes 96100, 96115 and 96117 would be included under this code.)

## **Covered Services - Continued**

H2019 – Office-based individual/family therapy services: An office-based contact with a client and/or collaterals for the purpose of developing and implementing a treatment plan for an individual client or family. The service shall be targeted at reducing or eliminating specific symptoms or behaviors that are identified in the treatment plan, per 15 minutes.

H2021 – Community-based individual/family therapy services: Contact outside the psychologist's office with the client and/or collaterals as necessary, for the purpose of developing and implementing the treatment plan for the client, per 15 minutes.

H2019HQ – Group Therapy: Contact with two or more unrelated clients and/or collaterals as necessary, for the purpose of implementing each client's treatment plan, per 15 minutes.

## **Payment Rates**

H0031	\$17.50 per 15 minutes
H2019	\$17.50 per 15 minutes
H2021	\$22.50 per 15 minutes
H2019HQ	\$8.75 per 15 minutes

Report writing time is limited to three hours. There are no other limits on the number of units for the above listed procedures.

## **Initial Assessments**

Initial assessments to determine a client's eligibility and/or treatment needs (for mental health, substance abuse, developmental disabilities, acquired brain injury) can be billed for any person requesting the services, as long as it reasonably appears that the person would need these services and prior authorization is received (see below). EqualityCare will pay for the assessment, with the above codes and rates, regardless of eligibility for EqualityCare.

If a person does not have EqualityCare benefits and requests an assessment, contact will need to be made with the DDD at 307-777-7115 to obtain temporary eligibility for that person. The following information will need to be provided:

- Suspected mental health/substance abuse/developmental disability/acquired brain injury information
- Person's name
- Person's address
- Person's social security number

- Person's date of birth
- Projected completion of assessment

## **Subsequent Assessments**

Subsequent assessments for the purpose of proving continuing eligibility for HCBS Waivers will NOT be covered through EqualityCare. Subsequent assessments will need to be billed through the individual waivers following their guidelines for pre-approval and payment.

The payment rates through the HCBS Waivers will be consistent with the rates listed above.

## **Other psychological services**

Other psychological services including but not limited to counseling, staff training for a specific client, and behavior/treatment plan writing/review, can be billed under the above codes and paid at the above rates.

General training (not client specific) for all staff is **NOT** covered.

## **Documentation Requirements**

Documentation should:

- Identify the covered services provided;
- Identify the date, length of time, and location of the service;
- Identify all persons involved;
- Contain a narrative report of the client's condition, the issues addressed, the treatment interventions, and the client's progress toward defined goals; and
- Contain the full signature, including licensure, of the clinical professional involved.

**Post-payment reviews will be completed.**

## **Billing**

Electronic billing for psychological services is not required but is strongly encouraged.

If a psychologist was billing electronically for HCBS Waiver services, they can continue to do so.

For providers who previously only billed HCBS Waivers: Starting January 1, 2006, a

diagnosis code will be required on each claim, whether it is billed electronically or hardcopy.

If billing hardcopy, the CMS-1500 is the only acceptable form.

### **Third Party Liability/Primary Insurance**

Information about third party coverage is available through the eligibility verification system. If the client shows you a different proof of eligibility, you must ask if the client is covered by other insurance that might help to pay for your services. EqualityCare is always the payer of last resort except for 100 percent federally funded programs such as Indian Health Services and the Ryan White Foundation. You must bill all other potential payers before billing EqualityCare.


For further information regarding Third Party Liability, please refer to your EqualityCare *General Provider Information Manual*, Chapter 8.

### **Questions**

If you have questions concerning this information, please contact Christine Bates at 307-777-3594 or at [cbates@state.wy.us](mailto:cbates@state.wy.us).



Wyoming Department of Health  
Public Health Insurance Program



Pharmacy  
Group  
6530

## Important Changes! Please read!



**ACS, Inc**  
P.O. Box 667  
Cheyenne, WY 82003-  
0667

PHONE:  
(800) 251-1268

IN CHEYENNE:  
(307) 772-8401

FAX:  
(307) 772-8405

We're on the Web!

<http://wyequalitycare.acs-inc.com>