

Detroit Wayne Integrated Health Network

707 W. Milwaukee St. Detroit, MI 48202-2943 Phone: (313) 833-2500 www.dwihn.org

FAX: (313) 833-2156 TTY: 711

BULLETIN NUMBER: 24-006 v2

ISSUED/REVISED: 10/10/2024

EFFECTIVE: 7/1/2024

SUBJECT: Eligibility Screening Code & Modifiers

SERVICE AFFECTED: H0002 – Brief Screening to determine Eligibility for

Behavioral Health Services (Children Providers and

CCBHC Providers)

BACKGROUND: Offering screenings to determine eligibility for behavioral health services is an important and introductory component of persons served connecting to behavioral health services. In addition to DWIHN Access Center completing screenings, there are specific situations in which Children Providers and CCBHC Providers also complete screenings.

PROCEDURE: Effective 7/1/2024 Children Providers and CCBHC Providers are to begin using the H0002 Brief Screening CPT Code when completing screenings to determine eligibility for behavioral health services. H0002 ID procedure code has been added for screenings completed for children ages 0 to 6 receiving intellectual and developmental disability services.

BILLING: CRSPs are to use the appropriate H0002 Brief Screening CPT Code (H0002) along with a specific modifier according to the special population identified in the chart below. This service does not require an authorization. In the instance where more than one special population is applicable Children Providers and CCBHC Providers are to select the most applicable modifier.

Highlighted in the chart below are updates for the following special populations:

- Intellectual and Developmental Disabilities
- Third Circuit Court / Clinical for Child Study
- CCBHC

Board of Directors



<u>In accordance to Bureau of Specialty Behavioral Health Services Telemedicine Database, Effective 5/12/2023:</u>

• **CPT Code:** H0002

- **Description:** (Behavioral Health Screening) To determine eligibility for admission to treatment program. *Audio only when determining level of care for admission and or continued authorization for current services (screening).*
- Simultaneous Audio/Visual Must Include: POS 02 or POS 10 No Modifier Required

CHARTS

| Special Population Screenings | Disability | Age Criteria | CPT Code | Modifier |
|---|------------------|--------------------------------|----------|----------|
| | Designation | | | |
| Infant Mental Health and Early Childhood | NA | 0 to 5 | H0002 | IF |
| Infant and Early Childhood Mental Health | NA | 0 to 5 | H0002 | ΙE |
| Consultation Grant (IECMHC) | | | | |
| Intellectual and Developmental Disability Services | <mark>IDD</mark> | <mark>0 to 5</mark> | H0002 | DD |
| Youth involved in Foster Care | SED / IDD | 0 to 21st birthday | H0002 | YF |
| Youth Juvenile Justice | SED / IDD | 0 to 21st birthday | H0002 | YJ |
| Juvenile Restorative Program | SED / IDD | 12 to 18 | H0002 | JR |
| Third Circuit Court / Clinic for Child Study | SED | 0 to 18 | H0002 | CU |
| Children Waiver | IDD | 0 to 21st birthday | H0002 | CW |
| SED Waiver | SED | 0 to 21st birthday | H0002 | WA |
| School Success Initiative | SED | 0 to 21 st birthday | H0002 | SI |
| CCBHC (Must be billed along with T1040) | NA | All ages | H0002 | None |

REFERENCES:

Michigan Medicaid Provider Manual

http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_42542_42543_42546_42553-87572--,00.html

Eligibility and Screening Policy

https://dwmha.policystat.com/policy/9502733/latest

Access Policy

https://dwmha.policystat.com/policy/13123573/latest/

Telemedicine Policy

https://dwmha.policystat.com/policy/10681486/latest

Michigan Mission Based Performance Indicator (MMBPI) Reporting Requirements https://dwmha.policystat.com/policy/13906196/latest

Michigan Medicaid Provider Manual

http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_42542_42543_42546_42553-87572--,00.html

https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Keeping-Michigan-Healthy/BH-DD/Reporting-Requirements/Bureau_of_Specialty_Behavioral_Health_Services-

Telemedicine_Database.pdf?rev=4f8499187fd64e758eea882605bdf5f3

MDHHS Website: SFY 2024 Behavioral Health and Provider Qualifications https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_38765---,00.html

DWIHN Rate Charts https://www.dwihn.org/rate-charts

DWIHN Coding Manual Bulletins

https://www.dwihn.org/billig-coding-bulletins

If there are any additional questions and or concerns, please contact: procedure.coding@dwihn.org

Children Provider – Special Population Eligibility Screening Guidance

Children Services Specialty Population Provider List: Providers to refer to the chart below to use the applicable specialty program H0002 code and modifier.

IF Infant Mental Health (age 0 to 5) IE Infant and Early Childhood Mental Health Consultation (age 0 to 5) DD Intellectual Developmental Disabilities (age 0 to 5 - IDD) Youth involved in Foster Care (age 0 to 21st birthday – SED / IDD) YF YJ Youth Juvenile Justice (age 0 to 21st birthday – SED / IDD) (age 12 to 18 - SED / IDD) JR Juvenile Restorative Program (age 0 to 21st birthday – SED / IDD) $\mathbf{C}\mathbf{U}$ Clinic for Child Study (age 0 to 18th birthday – IDD) CW Children Waiver (age 0 to 18th birthday – SED) WA **SED Waiver** SI School Success Initiative (age 0 to 21st birthday – SED)

| Provider Name | IF | IE | DD | YF | YJ | JR | CU | CW | WA | SI |
|--|----|----|----|----|----|----|----|----|----|----|
| All Well Being | | | X | X | | | | | | |
| America's Community Council | X | | | X | | | | | | X |
| (ACC) | | | | | | | | | | |
| ACCESS | | | | X | | | | | | X |
| Assured Family Services | X | | | X | X | | | | | X |
| Black Family Development | | | | X | | | | | X | X |
| CNS | X | | X | X | | | | | X | |
| Community Living Services (CLS) | | | X | X | | | | X | | |
| Development Center (MiSide) | X | X | X | X | | | | | X | X |
| DWIHN Community of Care | | | | X | | | | | | X |
| EastersealsMorc | | | X | X | | | | | | |
| Elmhurst Home | | | | | | | | | | |
| Hegira Health | X | X | X | X | | | | | X | X |
| Judson Center | X | | X | X | | | | X | X | |
| Lincoln Behavioral Health | X | | | X | | | | | X | |
| Neighborhood Service Organization | | | X | X | | | | | | |
| Psygenics | | | X | X | | | | | | |
| Ruth Ellis | | | | X | | | | | | |
| Southwest Counseling Solutions | X | | | X | | | | | X | X |
| (MiSide) | | | | | | | | | | |
| Starfish | X | | X | X | | | | | X | X |
| Team Wellness | | | X | X | | X | | | | X |
| The Children Center | X | | X | X | | | | | X | |
| The Guidance Center | X | X | X | X | | | | X | X | X |
| Third Circuit Court | | | | X | | | X | | | |
| Vital Health | | | X | X | | | | X | | |
| Wayne Center | | | X | X | | | | | | |

Access Screening

In supporting a no wrong door approach to community mental health services, below is a chart indicating which entity completes Brief Eligibility Screenings (H0002):

*= Either DWIHN Access Center or Provider completes the screening

| Children Services - Special Population Screenings | Disability Designation | DWIHN Access Center | Provider |
|---|---------------------------|------------------------|----------|
| Infant Mental Health and Early Childhood (IMH) | N/A | X | X |
| * | | | |
| Age 0 to 5 | NT/ A | | 37 |
| Infant and Early Childhood Mental Health Consultation | N/A | | X |
| Grant (IECMHC) | | | |
| Age 0 to 5 | | | |
| Intellectual and Developmental Disability Services | IDD | | X |
| Age 0 to 5 | | | |
| Youth involved in Foster Care * | SED / IDD | X | X |
| Age 0 to 21 st birthday | | | |
| Youth Juvenile Justice | SED / IDD | | X |
| Age 0 to 21st birthday | | | |
| Juvenile Restorative Program | SED / IDD | | X |
| Age 0 to 18 | | | |
| Clinic for Child Study | SED | | X |
| Age 0 to 21st birthday | | | |
| Children Waiver | IDD | | X |
| Age 0 to 18 th birthday | | | |
| SED Waiver | SED | | X |
| Age 0 to 18 th birthday | | | |
| School Success Initiative | SED | | X |
| Age 0 to 21 st birthday | | | |

Note: DWIHN Access Center to continue to complete eligibility screenings for youth ages 6 to 21st birthday for both SED and IDD disability designations

Instructions: Providers are to complete and submit the following documents to DWIHN Access Center via the smarthseet form:

- Consumer Enrollment Packet
- SED or IDD Screening Checklist
- MichiCANS Screener (PDF format)

Note: Effective 10/1/2024 Children Providers are expected to use the <u>MichiCANS Screener</u> in your agency electronic health record and or MHWIN to complete brief eligibility screenings.

| Screening Packet Documents | Consumer Enrollment Packet and SED / IDD Checklists are available on DWIHN |
|-----------------------------------|--|
| | Access Call Center webpage |
| | https://www.dwihn.org/DWIHN-Access-Call-Center |
| | |
| Children Special Population | https://app.smartsheet.com/b/form/336965fa2885435db00b594e4f173251 |
| Screening Submission | |
| Smartsheet Form | |

- DWIHN Access Center to review the submitted packet and enter information into MHWIN and follow up with the Provider via email with the assigned MHWIN ID#. DWIHN Access Center to open the case the same date as the screening date.
 - o If your request has not been processed within 24 hours Providers give DWIHN Access Call Center a follow up call.
 - o Incomplete relevant documents may delay the processing of your request
 - CRSP Enrollment Forms
 - Disability Designation Checklists
 - Consent / Release of Information Forms
 - Proof of Residency (Ex: Driver License)
 - Foster Care Worker Name and ID #
 - Court Order / Legal Documents

Eligibility: Eligibility for community mental health services with DWIHN requires a score of 2 or 3 with the MichiCANS Screener.

Ineligibility: If youth scores a 0 or 1 with the MichiCANS Screener and not eligible for community mental health services Children Provider to offer additional resources and supports and provide Adverse Determination Letter. Provider to also submit MichiCANS Screener and or Checklist to the smartsheet and DWIHN Access Center to provide a MHWIN ID# for the Provider to submit a claim to bill the completed screening.

DWIHN Access Call Center Contact Information:

Phone: 1-800-241-4949Fax: 1-877-909-3950

• Email: <u>AccessCenter@dwihn.org</u>

• Website: https://www.dwihn.org/DWIHN-Access-Call-Center

Billing

Below is a chart indicating which DWIHN Contract to select for authorizations and billing. There are 3 options to submit billing for eligibility screenings (H0002):

- 1. Screening section of the electronic health record
- 2. Submit a progress note
- 3. Submit a manual claim via MHWIN

| Special Population Screenings | DWIHN Contract | | |
|--|-------------------------------------|--|--|
| Infant Mental Health and Early Childhood (IMH) | MH Child Outpatient | | |
| Infant and Early Childhood Mental Health | IECMHC | | |
| Consultation Grant (IECMHC) | | | |
| Intellectual and Developmental Disability Services | DD Outpatient | | |
| Youth involved in Foster Care | MH Child Outpatient / DD Outpatient | | |
| Youth Juvenile Justice | MH Child Outpatient | | |
| Juvenile Restorative Program | Juvenile Restorative Program | | |
| Clinic for Child Study | Clinic for Child Study | | |
| (Not required to complete MichiCANS Screener) | | | |
| Children Waiver | DD Outpatient | | |
| SED Waiver | MH Child Outpatient | | |
| School Success Initiative | MH Child Outpatient | | |