

### Exhibit I-5, Capitated Behavioral Health Benefit Covered Services & Diagnoses

**Reimbursed under the behavioral health capitation, when the service is for a covered behavioral health diagnosis and is billed by a Behavioral Health Specialty Provider, non-physician practitioner group, or an FQHC or RHC using revenue code 0900.**

*Specialty Behavioral Health Codes*

00104	Anesthesia for ECT	H0039	Assertive Comm treatment per 15min
90785	InteractiveComplexity*	H0035	MH Partial Hospitalization less 24hr.
90832	Psychotherapy-30 minutes	H0036	Comm psych treatment per 15 min
90833	Psytx pt &/or family w/e&m 30 mins	H0037	Comm psych treatment, per diem
90834	Psychotherapy-45 minutes	H0038	Self-help/peer services per 15 min
90836	Psytx pt &/or family w/e&m 45 mins	H0040	Assertive Comm treatment, per diem
90837	Psychotherapy-60 minutes	H0043	Supported housing, per diem
90838	Psytx pt &/or family w/e&m 60 mins,	H0044	Supported housing, per month
90839	Psychotherapy for crisis, first 60 mins	H0045	Respite not-in-home per diem
90840	Psychotherapy for crisis add-on, each add'l 30 mins	H2001	Rehab program 1/2 day
90846	Family psychotherapy (w/o patient)	H2012	BH day treatment, per hour
90847	Family psychotherapy (with patient)	H2014	Skills train and dev, 15 min
90849	Multiple family group psytx	H2015	Comprehen comm support per 15 min
90853	Group psychotherapy	H2016	Comprehen comm support, per diem
90870	ECT	H2017	Psysoc rehab svc, per 15 min
90875	Indv psychotherapy biofeedback 30min	H2018	Psysoc rehab svc, per diem
90876	Indv Psychotherapy biofeedback 45min	H2021	Com wrap-around sv, 15 min
96372	Ther/proph/diag inj, sc/im	H2022	Com wrap-around sv, per diem
97535	Self-care management training	H2023	Supported employ, per 15 min
97537	Community/work reintegration	H2024	Supported employ, per diem
G0176	Activity therapy 45 min or more	H2025	Supp maint employ, 15 min
G0177	Training re: care of mh problem	H2026	Supp maint employ, per diem
H0004	Behavioral Health counseling and therapy, per 15 mins	H2027	Psycho ed service, per 15 min
H0005	Alcohol and/or drug services; group counseling by a clinician	H2030	MH clubhouse per 15 min
H0006	Alcohol/Drug case management	H2031	MH clubhouse per diem
H0010	Clinically managed residential withdrawal management: ASAM level 3.2WM, per diem	H2032	Activity therapy per 15 min
H0011	Clinically managed residential withdrawal management: ASAM level 3.7WM, per diem	H2033	Multisys ther/juvenile 15 min
H0015	Alcohol/Drug intensive outpatient	H2036	Alcohol and/or other drug treatment program, per diem
H0017	BH residential w/o room/board	S5150	Unskilled respite care, per 15m
H0018	BH short term res w/o room/board	S5151	Unskilled respite care, per diem
H0019	BH long term red w/o room/board	S9445	Patient ed non-phys, indv
H0020	Methadone admin/service	S9480	Intens Outpatient psych per diem
H0033	Oral med admin observation	S9485	Crisis Interv MH per diem
H0034	Med training/support per 15 min	T1005	Respite care service 15 min
		T1017	Targeted case management
			* must be billed with psychotherapy code
			** listed separately in addition to primary procedure code

**Reimbursed under the behavioral health capitation, when the service is for an appropriate diagnosis that supports medical necessity and is billed by a Behavioral Health Specialty Provider, non-physician practitioner group or an FQHC or RHC using revenue code 0900.**

*Behavioral health codes*

90791	Diagnostic Eval w/o Medical Services	H0001	Alcohol and/or drug assessment
90792	Diagnostic Eval with Medical Service	H0002	Alcohol and/or drug screening
90887	Interpretation/explanation of psych/medical exam/data	H0023	BH outreach/Drop in
96116	Neurobehavioral status exam; first hr	H0025	BH prevention education
96121	Neurobehavioral status exam; add'l hrs**	H0031	MH assessment by non-phys
96130	Psych testing eval services; first hr	H0032	MH service plan devel bynon-phys
96131	Psych testing eval services; add'l hrs**	H2000	Comprehensive multidiscipline edu
96132	Neuropsych testing eval services; firsthr	H2011	Crisis intervention per 15 min
96133	Neuropsych testing eval services; add'l hrs**	S9453	Smoking ccess class, non-phys, per ses
96136	Psych or neuropsych test admin & scoring; 30min	S9454	Stress manage, non-phys, per ses
96137	Psych or neuropsych test admin; add'l 30 min**		
96138	Psych or neuropsych test admin, by tech; first 30min		
96139	Psych or neuropsych test admin, by tech; add'l 30min**		
96146	Psych or neuropsych test - automated		
98966	Hc pro phone call 5-10 min		
98967	Hc pro phone call 11-20 min		
98968	Hc pro phone call 21-30 min		

**Reimbursed under the behavioral health capitation when the service is provided for a covered behavioral health diagnosis, regardless of the billing provider.**

*Evaluation & Management Consultation Codes*

99242	Outpatient Consultation, at least 20 minutes	99252	Hospital Consultation, at least 35 minutes
99243	Outpatient Consultation, at least 30 minutes	99253	Hospital Consultation, at least 45 minutes
99244	Outpatient Consultation, at least 40 minutes	99254	Hospital Consultation, at least 45 minutes
99245	Outpatient Consultation, at least 55 minutes	99255	Hospital Consultation, at least 80 minutes

*Evaluation & Management Emergency Department Codes*

99281	Emergency department visit for problem that may not require health care professional	99284	Emergency department visit with moderate level of medical decision making
99282	Emergency department visit with straightforward medical decision making	99285	Emergency department visit with high level of medical decision making
99283	Emergency department visit with low level of medical decision making		

**Reimbursed through the behavioral health capitation for a covered behavioral health diagnosis when the service is billed by a Behavioral Health Specialty Provider.**

*Evaluation & Management Codes*

99202	Office or OP – New, 15 – 29 mins	99306	Initial nursing facility,45m
99203	Office or OP – New, 30 – 44 mins	99307	Subseq nursing facility, 10m
99204	Office or OP – New, 45 – 59 mins	99308	Subseq nursing facility, 15m
99205	Office or OP – New, 60 – 74 mins	99309	Subseq nursing facility, 30m
99211	Office or OP – other	99310	Subseq nursing facility, 45m
99212	Office or OP – Est, 10 – 19 mins	99315	Nursing facility discharge, 30m
99213	Office or OP – Est, 20 – 29 mins	99316	Nursing facility discharge, 30+m
99214	Office of OP – Est, 30 – 39 mins	99341	Residence visit – New, at least 15 minutes
99215	Office or OP – Est, 40 – 45 mins	99342	Residence visit – New, 30m
99221	Initial hospital care at least 40 minutes	99344	Residence visit – New, 60m
99222	Initial hospital care at least 55 minutes	99345	Residence visit – New, 75m
99223	Initial hospital care at least 75 minutes	99347	Residence visit – Est, 15m
99231	Subsequent hospital care at least 25 minutes	99348	Residence visit – Est, 30m
99232	Subsequent hospital care at least 35 minutes	99349	Residence visit – Est, 40m

99233	Subsequent hospital care at least 50 minutes	99350	Residence visit – Est, 60m
99234	Same day admit/DC, at least 45 minutes	99366	Team conf w/patient by hc pro
99235	Same day admit/DC, at least 70 minutes	99367	Team conf w/o patient byphys.
99236	Same day admit/DC, at least 85 minutes	99368	Team conf w/patient by hc pro
99238	Hospital discharge day 30 minutes or less	99441	Telephone by phys 5-10 min
99239	Hospital discharge more than 30 minutes	99442	Telephone by phys 11-20 min
99304	Initial nursing facility, 25m	99443	Telephone by phys 21-30 min
99305	Initial nursing facility, 35m		

**Evaluation & Management Add-On Codes-** Reimbursed under the behavioral health capitation when billed with an Evaluation & Management code covered under the behavioral health capitation.

90836	Psychotherapy, 45 min with pt and /or family mbr when performed with an E&M	90838	Psychotherapy, 60 min with pt and /or family mbr when performed with an E&M
90833	Psychotherapy, 30 min with pt and /or family mbr when performed with an E&M		

**The following revenue codes (in addition to those represented in Appendix Q on the Department’s website) may be covered under the capitated behavioral health benefit:**

0510	CLINIC PSYCHIATRIC CLINIC PSYCH CLINIC
0513	CLINIC PSYCHIATRIC CLINIC PSYCH CLINIC
0902	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X – AN EXTENSION OF 090X) MILIEU THERAPY BEHAVIORAL HEALTH/MILIEU THERAPY
0903	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X – AN EXTENTION OF 090X) PLAY THERAPY BEHAVIORAL HEALTH/PLAY THERAPY
0904	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X – AN EXTENSION OF 090X) ACTIVITY THERAPY BEHAVIORAL HEALTH/ACTIVITY THERAPY
0905	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X – AN EXTENSION OF 090X) INTENSIVE OUTPATIENT SERVICES – PSYCHIATRIC BEHAVIORAL HEALTH/INTENS OP/PSYCH*
0906	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X - AN EXTENSION OF 090X) INTENSIVE OUTPATIENT SERVICES - CHEMICAL DEPENDENCY BH/INTENS OP/CHEM DEP**
0907	BEHAVIORAL HEALTH TREATMENTS/SERVICES (ALSO SEE 091X - AN EXTENSION OF 090X) COMMUNITY BEHAVIORAL HEALTH PROGRAM (DAY TREATMENT) BH/COMMUNITY
0911	BEHAVIORAL HEALTH TREATMENT/SERVICES – EXTENSION OF 090X***
0912	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X PARTIAL HOSPITALIZATION - LESS INTENSIVE BH/PARTIAL HOSP
0913	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X PARTIAL HOSPITALIZATION - INTENSIVE BH/PARTIAL INTENS
0916	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X FAMILY THERAPY BH/FAMILY RX
0917	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X BIO FEEDBACK BH/BIOFEED
0918	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X TESTING BH/TESTING
0919	BEHAVIORAL HEALTH TREATMENTS/SERVICES - EXTENSION OF 090X OTHER BEHAVIORAL HEALTH TREATMENTS/SERVICES BH/OTHER
0960	PROFESSIONAL FEES (ALSO SEE 097X AND 098X) GENERAL CLASSIFICATION PRO FEE
0961	PROFESSIONAL FEES (ALSO SEE 097X AND 098X) PSYCHIATRIC PRO FEE/PSYCH
1000	BEHAVIORAL HEALTH ACCOMMODATIONS GENERAL CLASSIFICATION
1001	BEHAVIORAL HEALTH ACCOMMODATIONS RESIDENTIAL - PSYCHIATRIC
1003	BEHAVIORAL HEALTH ACCOMMODATIONS SUPERVISED LIVING*
1005	BEHAVIORAL HEALTH ACCOMMODATIONS GROUP HOME***

\* For mental health diagnoses only

\*\* For Substance Use Disorder (SUD) diagnoses only

\*\*\* For members under the age of 2

<b>Behavioral Health Specialty Provider Types</b>		
<i>Provider Type (PT)</i>	<i>Specialty Type</i>	<i>Provider Type Description</i>
35	360	Community Mental Health Center
37	520	Licensed Psychologist
38	521	Licensed Behavioral Health Clinician
63	399	Substance Use Disorder Individual*
64	477	Outpatient Substance Use Disorder Clinics
64	871	Residential SUD ASAM level 3.1 Programs
64	872	Residential SUD ASAM level 3.3 Programs
64	873	Residential SUD ASAM level 3.5 Programs
64	874	Residential SUD ASAM level 3.7 Programs
64	875	Residential SUD ASAM level 3.2WM Programs
64	876	Residential SUD ASAM level 3.7WM Programs

\*This provider type is no longer available for new enrollments

<b>Behavioral Health ICD-10-CM Code Ranges</b>	
<i>Substance Use Disorder</i>	
<i>Start Value</i>	<i>End Value</i>
F10.10	F10.26
F10.28	F10.96
F10.98	F13.26
F13.28	F13.96
F13.98	F18.159
F18.18	F18.259
F18.28	F18.959
F18.980	F19.16
F19.18	F19.26
F19.28	F19.99
<i>Mental Health Disorders</i>	
<i>Start Value</i>	<i>End Value</i>
F20.0	F42.3
F42.8	F48.1
F48.9	F51.03
F51.09	F51.12
F51.19	F51.9
F53.0	F53.1
F60.0	F64.9
F68.10	F69
F90.0	F98.4
F98.8	F99
R45.1	R45.2
R45.5	R45.82