Comments for Chapter 521-Behavioral Health Outpatient Services Effective Date Jan. 15, 2018

Comment	<u>Date</u>	Comment	<u>Result</u>
<u>Number</u>	<u>Comment</u> <u>Received</u>		
1.	10/21/17	CPT Code 90853: 1 unit is listed - our request is Medicaid consider Medicare guidelines and allow multiple units per day - re: the Medicare MUE is 5 and most payers recognize more than one unit per day	No Change = This is not a limit statement. You may be authorized for more than 1 unit of 90853 per day depending on the medical necessity of the member.
2.	11/6/17	The last line of the third paragraph indicates "eligible AJ codes can be found later in the chapter." - the AJ codes haven't been included later in the manual.	Change = AJ Codes have been added
3.	11/6/17	Page 6: Third full paragraph - There will no longer be a requirement to do the OIG check monthly?	No Change = That is correct, the check will be made upon employment.
4.	11/6/17	Bulleted requirements; recommend adding Time Spent (start/stop times). Concern: Most documentation (including the 90792 on the next page of this manual revision) requires start and stop times to be included. For consistency and to provide a mechanism to ensure no overlap of direct services billed, recommendation is to also require start and stop times to be included for the 9079 services. Even though it is an event code, it is still a direct service that requires the presence of the member.	Change = Start and Stop times will be added to the documentation requirements.
	11/6/17	Page 19: Paragraph 3: Recommend breaking out the documentation requirements into a structured section rather than as providing it in paragraph form. Providers across the board struggle with including all documentation requirements in progress notes. It would be hoped that providing this information with more clarity would assist providers in meeting this documentation standard. Example format: Documentation: Psychotherapy documentation must indicate how often this service is to be provided and must follow an identifiable therapeutic strategy. Member compliance with treatment and other	Change = Corrected.

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		information must be shared with the physician or physician extender as per the Coordination of Care Agreement. Additionally, progress notes must include the following components: * Date of Service, *Place of Service, *Start and stop times of Service, *Signature with credentials, *reason/purpose for the service and relationship of the Service to the member's identified mental health treatment needs, *Symptoms and functioning of the member, *Therapeutic intervention grounded in a specific and identifiable theoretical base that provides framework for assessing change, *Member's response to the intervention and/or treatment, *Plan for continued treatment, *Group therapy notes must also include the group topic.	
	11/6/17	Add AJ Modifier as options	Change = Corrected.