

**MAGELLAN UNIVERSAL SERVICES LIST - Florida Medicaid Child Welfare**

Service Name & Detailed Magellan Description (see column heading explanations at end of this document)	Codes Used to Determine Reimbursement	UB-04 Revenue Codes	UB-04 Type of Bill Codes	UB-04 or CMS 1500 CPT/HCPCS Assigned by CMS	CMS 1500 Place of Service Codes
<b>1. HOSPITALIZATION</b>					
<p><b>1.1 Hospitalization, Psychiatric.</b> Includes care delivered in Psychiatric unit of general hospital, Free-standing psychiatric hospital, and State hospital/Institutions. A psychiatric inpatient service that provides assessment, medical management and monitoring, and short-term intensive treatment and stabilization to individuals experiencing acute episodes of mental illness.</p>	Revenue code ICD-9 CM code Date of birth	<b>0114</b> Psychiatric R&B <b>0124</b> Private <b>0134</b> Semi-Private <b>0144</b> Deluxe <b>0154</b> Ward <b>0204</b> Intensive Care Psych	<b>11X</b> Hospital - Inpatient (including Medicare Part A) <b>12X</b> Hospital - Inpatient (including Medicare Part B)	Applicable CPT Codes for Contracts Exclusive of Professional Services	
<p><b>1.2 Hospitalization, Eating Disorder.</b> Acute behavioral, psychiatric and medical services provided in a discreet unit to individuals experiencing an eating disorder. Services include medical management/monitoring, evaluation, psychopharmacology structured meals, individual, group and nutritional therapies. Enteral feeding is also available to individuals experiencing medical imbalance, significant weight loss or the need for gradual re-introduction to food.</p>	Revenue code ICD-9 CM code Date of birth	<b>0114</b> Psychiatric R&B <b>0124</b> Private <b>0134</b> Semi-Private <b>0144</b> Deluxe <b>0154</b> Ward <b>0204</b> Intensive Care Psych	<b>11X</b> Hospital - Inpatient (including Medicare Part A) <b>12X</b> Hospital - Inpatient (including Medicare Part B)	Applicable CPT Codes for Contracts Exclusive of Professional Services	
<p><b>1.3 23 Hour Observation Bed, Psychiatric (applicable for CSU's only).</b> Facility based crisis stabilization that provides a medically safe environment for a period of up to 23 hrs, available to individuals experiencing a crisis or acute Psychiatric emergency conditions.</p>	Revenue code HCPCS H0035 ICD-9 CM code Date of birth	<b>0762</b> Observation Room	<b>13X</b> Hospital - Outpatient		
<p><b>1.4 Hospitalization, Crisis Stabilization Unit (CSU).</b> Crisis Stabilization Units (CSUs) provide brief psychiatric intervention, primarily for low-income individuals with acute psychiatric conditions. Inpatient stays average 3 to 14 days, resulting in return to the patient's own home or placement in a long-term mental health facility or other living arrangements.</p>	Revenue code HCPCS code ICD-9 CM code Date of birth Type of bill code	<b>0114</b> Psychiatric R&B <b>0124</b> Private <b>0134</b> Semi-Private <b>0144</b> Deluxe <b>0154</b> Ward <b>0204</b> Intensive Care Psych	<b>11X</b> Hospital - Inpatient (including Medicare Part A) <b>12X</b> Hospital - Inpatient (including Medicare Part B)	<b>S9485</b> Crisis intervention, mental health, per diem	

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<b>2. SUPERVISED LIVING</b>					
<p><b>2.1 Out-of-Home Respite Care.</b> This is a community-based service that is for short term environmental/symptom stabilization related to mental health symptoms. Such services are intended to be used for one to three continuous 24-hour periods, not to exceed 72 hours. Services are provided by professional or paraprofessional staff in a safe environment and can be planned or in response to an urgent need for environmental intervention.</p>	Revenue code HCPCS ICD-9 CM code Date of birth	<b>0660</b> Respite Care	23X Skilled nursing - Outpatient 86X Special Facility - Residential Facility	<b>H0045</b> Respite care services, not in the home, per diem	
<p><b>2.2 Specialized Therapeutic Foster Care, Level I</b> This service is characterized by close supervision of the child within a specialized therapeutic foster home. Services must include clinical interventions by the specialized therapeutic foster parent(s), a clinical staff person, and a psychiatrist.</p>		<b>1003</b> Supervised Living		<b>S5145</b> Foster care, therapeutic, child, per diem	
<p><b>2.3 Specialized Therapeutic Foster Care, Level II.</b> This service is characterized by frequent and intense contact between the specialized therapeutic foster parents, the child, and the professional staff. Level II is intended to provide a high degree of structure, support, supervision and clinical intervention.</p>		<b>1003</b> Supervised Living		<b>S5145</b> Foster care, therapeutic, child, per diem and <b>HE</b> modifier	
<p><b>2.4 Specialized Therapeutic Foster Care, Crisis Intervention.</b> Specialized therapeutic foster care services may be used for crisis intervention for a child for whom placement must occur immediately in order to stabilize a behavioral, emotional or psychiatric crisis. The child must be in foster care or commitment status and meet Level I or Level II criteria.</p>		<b>1003</b> Supervised Living		<b>S5145</b> Foster care, therapeutic, child, per diem and <b>HK</b> modifier	
<p><b>2.5 Therapeutic Group Care Services.</b> Therapeutic group care services are community-based psychiatric residential treatment services intended to provide a high degree of structure, support, supervision, and clinical intervention in a home-like setting for children and adolescents with moderate to severe emotional disturbances. These services are appropriate for children and adolescents who are ready for step-down from a more restrictive residential treatment program or for those who require more intensive community-based treatment to avoid placement in a more restrictive residential treatment setting.</p>		<b>1003</b> Supervised Living		<b>H0019</b> Behavioral health; long-term residential (non-medical, non-acute care in a residential treatment program where stay is typically longer than 30 days), without room and board, per diem.	

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<b>3. OUTPATIENT</b>					
<p><b>3.1 Outpatient Psychotherapy.</b> Therapy services typically provided in an outpatient office setting. Services may include but are not limited to initial diagnostic interview, individual and group psychotherapy and pharmacological management.</p>	<p>CPT code ICD-9 CM code Date of birth</p>	<p><b>0914</b> Individual Therapy <b>0915</b> Group Therapy <b>0916</b> Family Therapy</p>		<p>Applicable CPT Codes for Professional Services  Organizational providers must submit a license level HIPAA modifier for the rendering provider.</p>	<p><b>11</b> Office <b>22</b> Outpatient Hospital</p>
<p><b>3.2 Therapeutic behavioral On-Site Services.</b> TBOS are community services and natural supports for children with SED. Services include teaching problem-solving skills, behavioral strategies and normalization activities.</p>	<p>HCPCS code ICD-9 CM Code Date of birth</p>			<p>Therapeutic behavioral on-site svcs, therapy: <b>H2019 HO</b> (masters degree level)  Therapeutic behavioral on-site svcs, therapeutic support: <b>H2019 HN</b> (bachelors degree level)  Therapeutic behavioral on-site svcs, behavior mgmt: <b>H2019 HM</b> (less than bachelors degree level)</p>	
<b>4. COMMUNITY SUPPORT</b>					
<p><b>4.1 Targeted Case Management.</b> This service is provided to children with serious emotional disturbances (SEDs) and adults with severe and persistent (SPMI) mental illness and incorporate the principles of a strengths-based approach that stresses building on the strengths of individuals that can be used to resolve current problems and issues.</p>	<p>HCPCS ICD-9 CM code Date of birth</p>			<p>Children &amp; Adol: <b>T1017</b> Targeted Case Management, each 15 minutes &amp; <b>HA</b> modifier</p>	
<p><b>4.2 Intensive Case Management, team services.</b> This service is intended to provide case management to highly recidivistic adults with SPMI to help them remain in the community and avoid institutional care.</p>	<p>HCPCS Modifier ICD-9 CM code Date of birth</p>			<p><b>T1017</b> Targeted Case Management, each 15 minutes &amp; <b>HK</b> modifier</p>	
<p><b>4.3 Psychosocial Rehabilitation Services.</b> These services assist enrollees in functioning within the limits of a disability resulting from a mental illness. Services include a range of social, educational, vocational, behavioral and cognitive interventions. They may include skills training and assistance in finding housing or employment.</p>	<p>HCPCS ICD-9 CM code Date of birth</p>			<p><b>H2017</b> Psychosocial Rehabilitation Services, per 15 minutes</p>	
<p><b>4.4 Respite Care - In Home.</b> This is a home-based service that is for short-term environmental/symptom stabilization related to mental health symptoms. Such services are intended to be used for one to three continuous 24-hour periods, not to exceed 72 hours. Services are provided by professional or paraprofessional staff in a safe environment and can be planned or in response to an urgent need for environmental intervention.</p>	<p>HCPCS ICD-9 CM code Date of birth</p>	<p><b>0660</b> - Respite Care</p>		<p><b>S9125</b> In home respite care, per diem</p>	<p><b>12</b> Home</p>
<p><b>4.5 Comprehensive Behavioral Health Assessment.</b> This service is an in-depth and detailed assessment of the child's emotional, social, behavioral, behavioral and developmental functioning with the family home, school and community. A comprehensive behavioral health assessment must include direct observation of the child in the home, school and community, as well as in the community.</p>	<p>HCPCS ICD-9 CM code Date of birth</p>			<p><b>H0031</b> Mental health assessment, by non-physician &amp; <b>HA</b> modifier</p>	

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