INTENSIVE SERVICES CODE INFORMATION SHEET FOR CYF INTENSIVE SERVICE PROVIDERS

The San Francisco Behavioral Health Services (BHS) local codes for Intensive Care Coordination (ICC) and Intensive Home-Based Services (IHBS) will no longer be available in Epic. The table below outlines the most frequently used codes. These codes are found in the *Intensive Services* Section of Charge Capture when directly entering charges for services in Epic. Choosing one of these charge codes when charting directly in Epic will automatically assign the appropriate modifier on the claim.

If codes beyond those identified below are selected, the provider will need to manually add the HK modifier. Please review the <u>SMHS Billing Manual</u> and <u>BHS SMH Crosswalk</u> for additional details.

Note that Service Upload agencies will need to add the appropriate modifier on all ICC/IHBS services.

Guide to Most Frequently Used Codes for CYF Intensive Services

Charge Code and Modifier	Service Description	Min Time to Charge First Unit	Max Time to Charge First Unit	Max Units That Can be Charged	Examples of Unit/Duration Breakdown	Services Provided
90791 + HK	IHBS Psychiatric Diagnostic Evaluation, 60 Minutes	8 Min	67 Min	1	N/A	Meeting with an individual, caregiver, or significant support person to gather information to inform an assessment or re-assessment. All team members use this code to claim for relevant assessment services when a client meets criteria and is authorized for IHBS.
T2024 + HK	Assessment Substitute, 15 minutes Use Assessment Substitute code when the base service code goes beyond the maximum	68 Min	82 Min	96	2 Unit = 83- 97min 3 Unit = 98- 112min 4 Unit = 113- 127min 5 Unit = 128- 142min 6 Unit = 143- 157min 7 Unit = 158- 172min 8 Unit = 173-	For direct service of 68 minutes or more, enter 1 unit of 90791 and the appropriate number of units for T2024 (Assessment Substitute).

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	units. This code replaces G2212 for certain codes.				187min 9 Unit = 188- 202min 10 Unit=203- 217min 11 Unit=218- 232min 12 Unit=233- 247min 13 Unit=248- 262min 14 Unit=263- 277min 15 Unit=278- 292min	Meeting with an individual, caregiver, or significant support person to gather information to inform an assessment or re-assessment. All team members use this code to claim for relevant assessment services when a client meets criteria and is authorized for IHBS.	
H2000 + HK	CFT Comp Multidisciplinar y Eval, 15 minutes	8 Min	22 Min	96	2 Unit = 23- 37min 3 Unit = 38- 52min 4 Unit = 53- 67min 5 Unit = 68- 82min 6 Unit = 83- 97min 7 Unit = 98- 112min 8 Unit = 113- 127min 9 Unit = 128- 142min 10 Unit=143- 157min 11 Unit=158- 172min 12 Unit=173- 187min 13 Unit=188- 202min 14 Unit=203- 217min 15 Unit=218- 232min	Participation of the Child and Family Team. All service team members use this code to claim for participation in a CFT evaluation meeting.	

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Charge Code and Modifier	Service Description	Min Time to Charge First Unit	Max Time to Charge First Unit	Max Units That Can be Charged	Examples of Unit/Duration Breakdown	Services Provided
T1017 + HK	ICC Targeted Case Management, 15 minutes	8 Min	22 Min	96	See above	ICC service components include assessing, service planning and implementatio n, monitoring and adapting, and transition. ICC services are provided through the establishment of CFT to ensure facilitation of a collaborative relationship among a child, their family, and involved child-serving systems.
H2017 + HK	IHBS Rehabilitation, 15 minutes	8 Min	22 Min	96	See above	Meeting with the client for the purpose of coaching, skill development to support the client with managing behavioral health needs. May be with the caregiver or significant support person if services are focused on supporting the client.
H0031 + HK	IHBS Mental Health Assessment by Non-MD,15 Minutes	8 Min	22 Min	96	See above	Meeting with an individual, caregiver, or significant support person to gather information to

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Charge Code and Modifier	Service Description	Min Time to Charge First Unit	Max Time to Charge First Unit	Max Units That Can be Charged	Examples of Unit/Duration Breakdown	Services Provided
						inform an assessment or re-assessment.
H0032 + HK	IHBS Plan Development, 15 Minutes	8 Min	22 Min	96	See above	Meeting with an individual, caregiver, or significant support person to develop a care plan/client plan.

Questions: Please contact qa.bhs@sfdph.org

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