Allowance of Additional Mental Health Crisis Intervention Codes via Telemedicine During COVID-19 Emergency

Effective with dates of service on or after March 12, 2020, procedure codes H2011 (Crisis Intervention at the Basic Level) and H2011 HK (Crisis Intervention at the Intermediate Level) will be allowed to be reimbursed via telemedicine (both tele-video and telephone). Billing for these two codes is contingent upon Kansas Department for Aging and Disability Services (KDADS) approval of the individual crisis protocol utilized at a specified Community Mental Health Centers (CMHC). CMHCs wanting to bill for these codes using Telemedicine contact will submit their Center’s protocol to a designated contact at KDADS who will review the plan. If approval is authorized, the approval start date (which, in some cases, will be retrospective) will be noted and documentation of that approval provided to the CMHC by KDADS. Additionally, approval notifications will be routed to all three Managed Care Organizations (MCOs) and the Kansas Department of Health and Environment (KDHE). No system changes will be initiated to deny upfront reimbursement for these two codes; however, the CMHC should keep a copy of this approval in their files should this be needed in a post pay review.

Providers will be allowed to be reimbursed for the following codes when the originating telemedicine site is in the member’s home (i.e. where the member is receiving services). No payment for the Q3014 code will be made for Place of Service (POS) 12 (home) without the physical presence of an enrolled provider.

The distant site, where the provider is delivering services, will use the appropriate Current Procedural Terminology/Healthcare Common Procedure Coding System (CPT/HCPCS) code with POS code 02.

Telemedicine services (including telephonic contact) can be made when there is verbal consent received from the patient (to be followed up by written approval) in the medical record. Audio/visual communication can only be utilized if that contact is Health Insurance Portability and Accountability Act (HIPAA) compliant.
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These updates do not change or modify the current coverage but allow for an additional delivery method.

Allowed provider types and specialties will remain unchanged. Reimbursement will be the same as a face-to-face visit. Existing National Correct Coding Initiative (NCCI) edits/limitations will remain in place and are not waived with this policy.

Per Executive Order No. 20-08: This policy will remain in force until rescinded, until May 3, 2020, or until the statewide State of Disaster Emergency proclaimed on March 12, 2020, relating to COVID-19 expires, whichever is earlier.

Note: The effective date of the policy is March 12, 2020. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Open Claims Resolution Log on the KMAP Bulletins page documents the MCO system status for policy implementation and any associated reprocessing completion dates, once the policy is implemented.