

Sept. 24, 2024
MB# 24-053

MEDICAID BULLETIN

TO: Physicians

SUBJECT: Addition of Psychiatric Collaborative Care Model to Physicians Services

Effective for dates of service on or after Oct. 1, 2024, the South Carolina Department of Health and Human Services (SCDHHS) will add coverage of psychiatric Collaborative Care Model (CoCM) services for full-benefit Healthy Connections Medicaid members.

Scope of Services

CoCM is a systematic strategy for treating behavioral health conditions in a primary care setting through integration of care coordination and psychiatric consultation. The model uses a collaborative care approach with primary service delivery through the primary care provider (PCP); a psychiatric consultant who provides expert consultation and oversight for mild to moderate behavioral health issues; and a behavioral health care manager (BHCM) who acts as a liaison between the PCP, the patient and the psychiatric consultant.

CoCM requires the use of a registry, which serves as the record of a patient's admission and discharge from CoCM and is a required element for Medicaid reimbursement.

Detailed program requirements and other information, such as provider and patient eligibility, service components and registry and billing guidance, will be published in the [Physicians Services Provider Manual](#) by Oct. 1, 2024.

Billing Guidance

Claims for CoCM services must be billed under the PCP's name and provider number as the rendering provider. The PCP practice is responsible for payment of the psychiatric consultant and the BHCM. Medicaid enrollment is not required for the BHCM or psychiatric consultant.

CoCM does not replace use of evaluation and management codes or other office services for direct patient care.

CoCM may be delivered by advanced practice providers, within their scope of practice, for both the PCP and psychiatric consultant components. However, time spent during an encounter for an evaluation and management service cannot be counted towards monthly billing time for CoCM. The Medicaid base rates will apply to the calculations for the advanced practice providers' rates and qualifying providers' enhanced rates, as currently indicated in the [Physicians Services Provider Manual](#) and [Physician Fee Schedules](#), which are available on the agency's website.

Procedure codes, service limits and base rates for CoCM are shown below.

Service Code	Description	Frequency	Medicaid Base Rate
99492	First 70 minutes in the first calendar month of BHCM activities, in consultation with a psychiatric consultant and directed by the treating physician. Can be billed with 99494 as an add-on code if more time is required.	1 per year	\$111.16
99493	First 60 minutes in a subsequent month for BHCM activities, in consultation with a psychiatric consultant and directed by the treating physician. Can be billed with 99494 as an add-on code if more time is required.	1 per month	\$102.16
99494	Each additional 30 minutes in a calendar month of BHCM activities, in consultation with a psychiatric consultant and directed by the treating physician. An add-on code must be billed with either 99492 or 99493.	4 per month	\$43.21
G2214	Initial or subsequent psychiatric collaborative care management, first 30 minutes in a month of BHCM activities, in consultation with a psychiatric consultant and directed by the treating physician. Code billed when the patient's total billable minutes are less than what is required to bill 99493. <i>Cannot be billed in same month as 99492, 99493 or 99494.</i>	1 per month	\$37.96

Training and resources on CoCM will be provided to interested providers at a later date.

South Carolina's Medicaid managed care organizations (MCOs) are responsible for the authorizations, coverage and reimbursement related to the services described in this bulletin for Healthy Connections Medicaid members who are enrolled in an MCO.

Providers should direct any questions related to this bulletin to the Provider Service Center (PSC). PSC representatives can be reached at (888) 289-0709 from 7:30 a.m.-5 p.m. Monday-Thursday and 8:30 a.m.-5 p.m. Friday. Providers can also submit an online inquiry at: <https://www.scdhhs.gov/providers/contact-provider-representative>.

Thank you for your continued support of the South Carolina Healthy Connections Medicaid program.

/s/
Robert M. Kerr