

Sept. 10, 2025  
MB# 25-025

## MEDICAID BULLETIN

**TO: Hospital Providers**

**SUBJECT: Updated Billing Guidance for Hospital-based Crisis Stabilization Services**

Effective Oct. 1, 2025, the South Carolina Department of Health and Human Services (SCDHHS) will update billing guidance for hospital-based crisis stabilization services initially announced in Medicaid bulletin [MB# 23-062](#).

This updated guidance is intended to streamline the billing process for providers of hospital-based crisis stabilization services delivered in Emergency Psychiatric Assessment, Treatment & Healing (EmPATH) or EmPATH-like units within hospital emergency departments.

### **Enrollment Requirement Update**

Effective Oct. 1, 2025, Medicaid-enrolled hospital providers that operate an acute care emergency department with an EmPATH or EmPATH-like unit may bill for hospital-based crisis stabilization services using their current emergency department National Provider Identifier (NPI) and Medicaid provider identification number for services rendered on or after Jan. 1, 2024.

This guidance replaces the prior requirement for hospitals to obtain a new NPI and enroll separately to bill this service. Providers must fully comply with all provider requirements including service and facility criteria listed below and in the [Hospital Services Provider Manual](#).

### **Provider Requirements Update**

To be eligible for reimbursement by SCDHHS, hospital-based crisis stabilization services must be provided in specialized hospital-based emergency departments and observational units dedicated to behavioral health. These units must be designed, constructed and operated in accordance with all applicable laws and regulations. These units also must:

- Adhere to an EmPATH philosophy (National Guidelines for Behavioral Health Crisis Care);
- Be located on the contiguous hospital campus grounds and linked to the emergency department for initial intake and/or referral;
- Contain a large, climate-controlled space to serve as a therapeutic environment;
- Provide separate adult and pediatric beds, bays or spaces;
- Provide rapid evaluation and comprehensive treatment planning by a psychiatrist or psychiatric prescribing provider;
- Ensure access to clinical and nursing staff in the milieu;
- Provide a dedicated, calming environment with a mix of recliners and open spaces with patient rooms for use based upon acuity; and
- Maintain a detailed behavioral health staff training plan.

### **Billing Guidance Update**

The hospitals that were awarded infrastructure grant funding are eligible for reimbursement of hospital-based crisis stabilization services when billed as an outpatient hospital service on an institutional claim. The hospital-based crisis stabilization services must be billed with revenue code 919 (Behavioral Health Treatment/Services) and the appropriate procedure code for the episode of care as described in the table below. Reimbursement for these services will be by procedure code and services will be reimbursed as an add-on service not subject to outpatient hospital multiplier.

<b>Procedure Code</b>	<b>Description and Limitations</b>	<b>Revenue Code</b>	<b>Rate</b>
<b>S9484</b>	Brief psychiatric emergency, per hour, up to 23 hours per patient, per crisis episode, when the patient is stabilized and discharged prior to 24 hours. Not allowed to be billed with S9485 for the same episode of care. Must be billed with Revenue Code 919.	919	\$38.17 per hour
<b>S9485</b>	Extended psychiatric emergency, per diem, up to three days per patient per crisis episode, when the length of stay is 24 hours or more. Not allowed to be billed with S9484 for the same episode of care. Must be billed with Revenue Code 919.	919	\$458 per diem

The updated policy will be published in the Hospital Services Provider Manual and will be available on the SCDHHS website by Oct. 1, 2025.

Providers should direct any questions related to this bulletin to the Provider Service Center (PSC) at (888) 289-0709 or to [behavioralhealth004@scdhhs.gov](mailto:behavioralhealth004@scdhhs.gov). The PSC's hours of operations are 7:30 a.m.-5 p.m. Monday-Thursday and 8:30 a.m.-5 p.m. Friday.

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.

Thank you for your continued partnership in supporting the South Carolina Healthy Connections Medicaid program.

/s/

Eunice Medina