Integrated Managed Care Service Encounter Reporting Instructions (SERI) – Interim Guidance 11-10-2021


HCA requests that Managed Care Organizations and Behavioral Health – Administrative Service Organizations adopt the following changes effective 1/1/2022. These changes will be formally added to the next release of the SERI guide, anticipated to be released March 2022. Any additional changes in the next SERI release will be expected to be implemented July 1, 2022.

Additional pages to be added to the “Mental Health Programs” section of SERI - Effective 1/1/2022, the following program guidance is added:

Program Description

New Journeys Coordinated Specialty Care (NJ CSC) is a delivery model designed to meet the needs of those experiencing a first episode of psychosis with treatment provided as a wrap-around intensive outpatient service. Treatment provides evidence-based health and recovery support interventions for youth and young adults when first diagnosed with Severe Mental Illness (SMI)/Severe Emotional Disturbance (SED).

NJ CSC services are delivered by multi-disciplinary mental health providers who work as a team and provide treatment, rehabilitation, and supports to assist individuals to achieve their goals. The service array is provided on an outpatient basis with options for home and community settings, based on the individual’s own needs and what they identify as helping them achieve a more meaningful life. The service components include individual and/or group psychotherapy, family psychoeducation and support, medication management, and peer support.

INCLUSION

CPT® codes and descriptions only are copyright 2020 American Medical Association
• Information on this page is intended as an overview. Refer to contract and HCA/DBHR New Journeys manual for additional program information.

• The New Journeys provider must be an approved provider by HCA/DBHR to provide these services. Refer to HCA/DBHR New Journeys manual for additional information.

• Services provided by staff members of a New Journey’s team are reported with applicable CPT®/HCPCS code in the SERI guide and the modifier “HT”.

EXCLUSION

The following services are excluded from the New Journeys program:

▪ Per diem codes
▪ Day Support
▪ High Intensity Treatment

NOTES

If provider’s contract specifies a team-based case rate payment, the below procedure codes should be used (based upon 24 months of intervention):

▪ Tier 1: Engagement and outreach (T2022 HT) – intake through the first 6 months
▪ Tier 2: Recovery and Resiliency (T2023 HT) – months 7-24

<table>
<thead>
<tr>
<th>CODE</th>
<th>CPT® /HCPCS DEFINITION</th>
<th>UN / MJ</th>
<th>MOD</th>
<th>PROVIDER TYPE</th>
<th>SERVICE CRITERIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any code in this guide except that for per diem services, Day Support, or High Intensity Treatment</td>
<td></td>
<td>GT HT</td>
<td>As applicable to code selected from this guide.</td>
<td>Use modifier “HT” to identify services provided to New Journey’s participants by qualified NJ-CSC providers.</td>
<td></td>
</tr>
<tr>
<td>T2022</td>
<td>Case management, per month</td>
<td>UN (1) (1 per month)</td>
<td>HT</td>
<td></td>
<td>Tier 1 – Monthly team-based case rate for intake through first 6 months of services.</td>
</tr>
</tbody>
</table>

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Optional – To be used if provider contract specifics a team-based case rate.

<table>
<thead>
<tr>
<th>T2023</th>
<th>Targeted case management, per month</th>
<th>UN (1) (1 per month)</th>
<th>HT</th>
<th>Tier 2 – Monthly team-based case rate for months 7 through month 24 of services. Optional – To be used if provider contract specifics a team-based case rate.</th>
</tr>
</thead>
</table>

**Additional text will be added to “Intake Evaluation” under the “Mental Health Service Modalities” section of SERI, currently on page 40 –**

**Effective 1/1/2022, the following text will be added under “notes” section –**

**INTAKE EVALUATION - NOTES**

**Existing Text:**
Intake evaluations requiring more than one session to complete by a single clinician are coded with the applicable intake code and the modifier “53” to indicate the service was not completed. The final session to complete the intake is coded with applicable intake code without a modifier.

- **New:**
  For clinicians providing intake evaluations for infants and young children (birth through age five years of age), use modifier “53” to indicate when multiple intake sessions (up to 5 allowed) are needed to complete the intake. The final session to complete the intake is coded with the applicable intake code without a modifier. More information on assessments for young children can be found at [https://www.hca.wa.gov/about-hca/behavioral-health-recovery/mental-health-assessment-young-children](https://www.hca.wa.gov/about-hca/behavioral-health-recovery/mental-health-assessment-young-children).

**SERI Questions - Please email HCA MC Programs hcamcprograms@hca.wa.gov**