

# NetworkNotes

United Behavioral Health-Minnesota Care Advocacy Center News for Medica Network Clinicians and Facilities

Fall 2009

## Important Changes Effective July 2009

### Family Therapy Codes via Telemedicine:

Effective July 1, 2009, family therapy codes 90846 and 90847 were added to the list of services that can be reimbursed when rendered via telemedicine to a commercial member. They must be delivered through HIPAA-compliant audio video technology. (Reimbursement is already available for Minnesota Health Care Programs (MHCP) members.) Telemedicine claims are to be billed with the procedure

codes followed by the GT modifier. For further information, please go to [www.medica.com](http://www.medica.com), and search using "telemedicine".

**Telephonic Psychotherapy/Telephonic SA Treatment:** Also beginning July 1, 2009, certificate of coverage language was modified to clarify that treatment delivered over the telephone only is not covered. "Telephonic psychotherapy" and "telephonic substance abuse treatment services" will be added to the exclusion section.

**Relationship Counseling/"V" codes:** In addition, effective July 1st, relationship counseling services will not be eligible for coverage. Family psychotherapy is only covered when the primary purpose of the psychotherapy is the treatment of the patient's mental health condition. Treatment services when billed with a "v" code and no other mental health diagnosis will not be covered by Medica health plan.

## Mental Health Targeted Case Management

Effective July 1st, coverage for Mental Health Targeted Case Management (MH-TCM) for Minnesota Health Care Programs (MHCP) enrollees in managed care plans will shift from the Minnesota Department of Human Services (DHS) to the health plan. MH-TCM consists of services which help members with serious and persistent mental illness or severe emotional disturbance gain access to needed medical, social, educational, and other services as they relate to the client's mental health needs.

In the past, counties determined eligibility for targeted case management services and determined the service provider. The county-contracted providers billed DHS directly, even for clients on a managed care plan; Medica Behavioral Health is now administering this benefit for

Medica. Medica Behavioral Health will determine eligibility for the service for Medica members based on eligibility screening conducted by counties or provider agencies. We are in the process of contracting with counties and provider agencies with experience providing MH-TCM services. Claims are to be submitted to and paid by Medica Behavioral Health. There is a dedicated team of care advocates at Medica Behavioral Health who oversee this benefit in order to increase access to MH-TCM for eligible clients, support and enhance clinical quality service delivery of MH-TCM and support delivery of integrated mental health and medical services.

This benefit is available to the following Minnesota Health Care Programs members: 59xxx, 05xxx, and 07xxx groups, PMAP, MNCare, GAMC,

MSHO, or SNB, branded as Medica ChoiceCare, Medica MinnesotaCare, Dual Solution, and AccessAbility Solution. Eligible members are adults with a serious and persistent mental illness and children with emotional disturbance, as defined in state law. If you have any questions or want to refer a member for MH-TCM services, contact Medica Behavioral Health at 1-800-848-8327.