

Behavioral Health Fee Schedule Updates – October 2021

The Oregon Health Authority (OHA) has made the following changes to the Fee-For-Service Behavioral Health Fee Schedule posted October 2021:

General:

Added telehealth allowance through the GT modifier for all Applied Behavior Analysis services, including assessments.

Added T1013 (Sign Language or oral interpreter services) to all outpatient mental health and substance use disorder services, including Applied Behavior Analysis.

- Interpreter services for behavioral health residential treatment programs are included in the per diem rates.
- Residential providers delivering outpatient services may use T1013, in conjunction with the outpatient service, when providing concurrent interpreter services.

MH Outpatient tab:

- Updated the MH Outpatient codes to reflect retro review (RR) vs. prior authorization (PA). Only codes requiring the HK modifier and other certain specialty codes require PA. Codes where the HK modifier is allowed, but not required are noted as managed through RR/PA. A PA will only be required if the HK modifier is used. See Code Key and Help for the HK definition.
- Removed the HK modifier requirement and allowances for codes 90839 (Psychotherapy for crisis, first 60 minutes) and 90840 (Psychotherapy for crisis, each additional 30 minutes). These codes may only be used by non-residential outpatient providers.
- Added code 90869 (Transcranial magnetic stimulation treatment: Stimulates nerve cells in brain to improve symptoms of depression, subsequent session for redeterminations). The Prioritized List of Health Services covers this code effective 1/1/2021.
- Removed codes 97129 (Therapeutic interventions that focus on cognitive function: e.g., attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and 97130 (Compensatory strategies to manage the performance of an activity: e.g., managing time or schedules, initiating, organizing, and sequencing tasks, direct one-on-one patient contact) for initial and each additional 15 minutes. The Prioritized List of Health Services no longer covers these codes for behavioral health effective 1/1/2021.
- Removed code T1023 with required HK modifier. The Level of Service Inventory (LSI) is conducted by Comagine Health for current and prospective residents of mental health residential programs.
- Updated the codes indicating Peer Support Specialists as rendering providers to include Peer Wellness Specialists.

MH Residential Services tab:

- Added required modifiers HE or TG for the crisis respite services code, H0045. Only Residential Treatment Facilities, including Secure Residential Treatment Facilities, may bill for crisis respite services.

- Added a note stating that authorizations for residential per diem services will only be approved through the last full 24 hours. [Oregon Administrative Rule 410-172-0730](#) (Payment Limitations for Behavioral Health Services) states that OHA may not pay for the day of transfer or discharge. This applies to any residential per diem code with a date of admission. This does not include residential-based outpatient services that a residential provider may deliver.

Peer Delivered Services tab:

Revised the Peer Support Services tab title to Peer Delivered Services to reflect all peer services providers.

Adult MH Res Standardized Rate tab:

Updated the rates to reflect changes based on the year one review effective 7/1/2021.