

Harmony/WellCare Covered Services and Authorization Guidelines for Community Mental Health Center (CMHC) Services

Nonparticipating providers, those who are not contracted with Harmony/WellCare, require prior authorization for all services. All providers must have an Illinois Medicaid number.

Service Name	Billing Code(s)	Prior Authorization Required	Modifier(s)	Place of Service Code(s)	Limits
Assertive Community Treatment (ACT)	H0039	Yes	Blank or HQ	11, 12, 99	Units based on Medical Necessity
Case Management-Client Centered Consultation	T1016	No	TG or HN-TG	11, 12, 99	Limited to 12 Units (3 hours) per day
Case Management-Mental Health	T1016	No	Blank or TF	11, 12, 99	Limited to 12 Units (3 hours) per day
Case Management-Transition, Linkage & Aftercare	T1016	No	HN or HO	11, 12, 99	Limited to 12 Units (3 hours) per day
Case Management-Transition, Linkage & Aftercare (Nursing Facility)	T1016	No	HN-HK or HO-HK	11, 12, 99	Limited to 12 Units (3 hours) per day
Case Management-LOCUS Assessment	H0002	No	HE	11, 12, 99	Limited to 1 per day
Community Support Group (CSG)	H2015	Yes	HM-HQ, HN-HQ, or HO-HQ	11, 12, 99	Limited to 24 Units (6 hours) per day
Community Support Individual (CSI)	H2015	Yes	HM, HN, or HO	11, 12, 99	Limited to 24 Units (6 hours) per day
Community Support Residential (CSR) Individual	H2015	Yes	HE-HM, HE-HN, or HE-HO	11	Limited to 24 Units (6 hours) per day
Community Support Residential (CSR) Group	H2015	Yes	HE-HM-HQ, HE-HN-HQ, or HE-HO-HQ	11	Limited to 24 Units (6 hours) per day
Community Support Team (CST)	H2015	Yes	HT	11, 12, 99	Limited to 24 Units (6 hours) per day
Crisis Intervention	H2011	No	Blank	11, 12, 99	Limited to 16 Units (4 hours) per day
Crisis Intervention: Pre-Hospitalization Screening	T1023	No	Blank or HT	11, 12, 99	Limited to 1 per day
Crisis Intervention: State Ops	H2011	No	HT or HK	03, 04, 12, 13, 14, 31, 32, 33, 49, 50, 71, 72, 99	Limited to 16 Units (4 hours) per day

(Table Continued)

Service Name	Billing Code(s)	Prior Authorization Required	Modifier(s)	Place of Service Code(s)	Limits
Mental Health Assessment	H0031	No	Blank, HN, HO or TG	11, 12, 99	Limited to 8 Units (2 hours) per day
Mental Health Intensive Outpatient	S9480	Yes	HO or HO-HA	11, 99	Limited to 1 per day
Psychological Evaluation	H0031	No	Blank or HN	11, 12, 99	Limited to 8 Units (2 hours) per day
Psychosocial Rehabilitation (PSR) Group	H2017	No	HM-HQ, HN-HQ, or HO-HQ	11	Limited to 32 Units (8 hours) per day
Psychosocial Rehabilitation (PSR) Individual	H2017	No	HM, HN, or HO	11	Limited to 32 Units (8 hours) per day
Psychotropic Medication Administration	T1502	No	Blank or SA	11, 12, 99	Limited to 3 events per day
Psychotropic Medication Monitoring	H2010	No	Blank, 52, or SA	11, 12, 99	Limited to 2 Units (30 minutes) per day
Psychotropic Medication Training	H0034	No	Blank, SA, HQ, or HQ-SA	11, 12, 99	Limited to 4 Units (1 hour) per day
Telepsychiatry: Originating Site	Q3014	No		11, 12, 99	Limited to 1 per day
Individual Therapy Counseling	H0004	No	Blank or HO	11, 12, 99	Limited to 8 Units (2 hours) per day
Treatment Plan Development, Review, and Modification	H0032	No	Blank or HN	11, 12, 99	Limited to 8 Units (2 hours) per day
Group Therapy	H0004	No	HQ or HO-HQ	11, 12, 99	Limited to 12 Units (3 hours) per day
Family Therapy	H0004	No	HR or HO-HR	11, 12, 99	Limited to 12 Units (3 hours) per day

This material is for educational purposes only and is not intended to dictate what codes should be used in submitting claims. Health care providers are instructed to use the most appropriate codes based upon the medical record documentation and coding guidelines. Please note that the fact that a guideline is available and/or a service has been preauthorized or pre-certified is not a guarantee of payment.

Benefits will be determined once a claim is received and will be based upon, among other things, the member's eligibility and the terms of the member's certificate of coverage applicable on the date services were rendered. If you have questions, call the number on the member's ID card for assistance or contact your Provider Relations Representative.