


Memo

Date: June 24, 2024

To: Alameda County Specialty Mental Health Services (SMHS) and Drug Medi-Cal Organized Delivery System (DMC-ODS)

From: Torfeh Rejali, Quality Assurance Division Director *Torfeh Rejali*
Lisa Moore, Billing & Benefits Support Unit Director
Tom MacMillan | Information Systems Deputy Director 

Subject: Procedure Code Changes for Prolonged Service Codes Effective FY 2024-25

This memo is to inform providers of revised DMC-ODS and SMHS procedure codes for prolonged service codes that were published by the California Department of Health Care Services (DHCS) and will be effective in Fiscal Year (FY) 2024-2025 (July 1, 2024-June 30, 2025).

Background

As part of Medi-Cal's CalAIM payment reform changes, DHCS continues to refine procedure codes for SMHS and DMC-ODS. DHCS recently published an update to the SMHS Billing Manual for services rendered in FY 2024-2025 and we expect an update to the DMC-ODS Billing Manual shortly. Additionally, FY 2024-2025 service tables have been published for both SMHS and DMC-ODS. DHCS billing manuals and service tables are available on the [DHCS MedCCC Library website](#).

Impact on ACBHD's System of Care

The three tables below provide an overview of the procedure code changes in FY 2024-2025 and impact to Alameda County providers. Providers using their agency Electronic Health Records should reference the DHCS billing manuals, service tables, and the [DHCS FAQs](#) directly for detailed information needed to update their systems.

Data Entry for July 2024 Services

To allow time for the County systems to be appropriately updated, providers are asked to pause SmartCare July 2024 service entries until **July 22, 2024**.

Clinician's Gateway users do not need to pause entries but will select the primary codes for the full duration, and do not need to select additional prolonged service codes. SmartCare (SC) enhancement will automate prolonged service add-on codes. See Table 1 for more details. Service transfers from Clinician's Gateway to SmartCare will be held until after completion of SC enhancement to ensure accurate service claiming from ACBHD to DHCS.

ACBHD will issue further guidance for invoice submission for July 2024 and beyond in a separate communication.

Table 1. Overview of Changes

Change Effective FY 24-25	Clinician's Gateway (CG)/SmartCare (SC) Changes	Impact to Providers Using CG and/or SC
<p>G2212 will no longer be an acceptable prolonged service code for claims with dates of service after June 30, 2024. Service lines submitted for G2212 with dates of service after June 30, 2024, will be denied.</p>	<p>G2212 will show as expired effective 7/1/24 but can continue to be used for claiming of services prior to that date.</p>	<p>Do not use G2212 to prolong services rendered after 6/30/24.</p> <p>SC is being enhanced to allow automation of all prolonged service add-on codes.</p>
<p>Time associated with certain codes will change (see Table 2).</p>	<p>Current codes with existing timeframes will show as expired effective 7/1/24.</p> <p>Codes with new timeframes will be added and effective on 7/1/24.</p>	<p>Use codes with new timeframes for services rendered 7/1/24 and forward.</p> <p>Use current codes for services rendered prior to 7/1/24.</p>
<p>Assessment services that exceed the maximum time allowed for the following procedure codes must be billed using T2024 substitution instead of the primary code: 90791, 90792, 90885, 90865, 96105, 96110, 96125, 96127, 96146.</p>	<p>SC will be programmed to automatically bill using the correct code when services exceed the maximum time allowed for code.</p> <p>CG/SC will not block users from entering these primary codes even if the service time exceeds the maximum time allowed for code.</p>	<p>Use the primary code and enter the actual direct service time, even if it exceeds the maximum time allowed for code.</p> <p>SC will automatically substitute T2024, as appropriate.</p>
<p>Therapy services that exceed the maximum time allowed for the following procedure codes must be billed using T2021 substitution instead of the primary code: 90837, 90838, 90845, 90846, 90847, 90849, 90853, 90870, 90880.</p>	<p>SC will be programmed to automatically bill using the correct code when services exceed the maximum time allowed for code.</p> <p>CG/SC will not block users from entering these primary codes even if the service time exceeds the maximum time allowed for code.</p>	<p>Use the primary code and enter the actual direct service time, even if it exceeds the maximum time allowed for code.</p> <p>SC will automatically substitute T2021, as appropriate.</p>

<p>New prolonged service codes are introduced and should be used to add time to Evaluation and Management (E/M) Codes (see Table 3)</p>	<p>SC will be programmed to add the appropriate prolonged service code when E/M services exceed time allowed for code.</p> <p>CG/SC will not block users from entering direct service time that exceeds the maximum time allowed for code.</p>	<p>Use the primary code and enter the actual direct service time, even if it exceeds the maximum time allowed for code.</p> <p>SC will automatically add the appropriate prolonged service code when claiming.</p>
---	--	--

Table 2. Changes in Time Associated with Therapy and Assessment Codes

Code(s)	Minutes Associated with Code - FY23-24	Minutes Associated with Code - FY24-25	Maximum Minutes Allowed- FY24-25
90791, 90792, 90885, 96110, 96127, 96146	15	60	67
90865	15	90	97
90845	15	45	52
90849	15	84	91
90853	15	50	57
90870	15	20	27
96105, 96125, 90837, 90880	60	60	67
90847	50	50	57

Table 3. Prolonged Codes for E/M Services

Prolonged Code	SMHS Procedure Codes That May Be Used with This Prolonged Code	DMC-ODS Procedure Codes That May Be Used with This Prolonged Code
G0316	99223, 99233, 99236	99236
99415	99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215	99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
99416	99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99415	99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215
99417	99245, 99345, 99350	99345, 99350
99418	99255, 99306, 99310	99306, 99310

Action Required

Please share this information with your teams, as appropriate.

For questions, please contact gata@acgov.org or ACBHD Billing and Benefits Support Unit.