

MICHIGAN PIHP/CMHSP PROVIDER QUALIFICATIONS PER MEDICAID SERVICES & HCPCS/CPT CODES¹

All providers must be: at least 18 years of age; able to prevent transmission of communicable disease; able to communicate expressively and receptively in order to follow individual plan requirements and beneficiary-specific emergency procedures, and to report on activities performed; and in good standing with the law (i.e., not a fugitive from justice, a convicted felon who is either under jurisdiction or whose felony relates to the kind of duty to be performed, or an illegal alien). Licensed professionals must act within the scope of practice defined by their licenses. "Supervision" is defined by the Occupational Regulations Section of the Michigan Public Health Code at MCL§333.16109 and, as appropriate, in the administrative rules that govern licensed, certified and registered professionals.

The following describes qualifications required in addition to the above for the identified staff.

Aide - Individual is able to perform basic first aid procedures and is trained in the beneficiary's plan of service, as applicable. Aides serving children on the Children's Waiver and the Waiver for Children with Serious Emotional Disturbance (SEDW) must also be trained in recipient rights and emergency procedures. Additionally, aides serving children on the Children's Waiver must be employees of the CMHSP or its contract agency, or be an employee of the parent who is paid through the Choice Voucher arrangement. For BHT/ABA services Behavior Technicians must also complete training in the curriculum outline in the Registered Behavior Technician (RBT) task list, but are not required to register with the BACB upon completion in order to furnish services.

Child Mental Health Professional (CMHP) - Individual with specialized training³ and one year of experience in the examination, evaluation, and treatment of minors and their families and who is a physician, psychologist, licensed or limited-licensed master's social worker, licensed or limited-licensed professional counselor, or registered nurse; **or** an individual with at least a bachelor's degree in a mental health-related field from an accredited school who is trained and has three years supervised experience in the examination, evaluation, and treatment of minors and their families; **or** an individual with at least a master's degree in a mental health-related field from an accredited school who is trained and has one year of experience in the examination, evaluation and treatment of minors and their families. For the BHT/ABA services individuals must be a BCBA or BCaBA or Psychologist working within their scope of practice with extensive knowledge and training on behavior analysis and BCBA certified by 9/30/2020.

Health Care Professional – A physician, registered nurse, physician's assistant, nurse practitioner, or dietician. Services provided must be relevant to the health care professional's scope of practice.

Mental Health Professional [Mental Health Code, Section 330.1100b(15)] - An individual who is trained and experienced in the area of mental illness or developmental disabilities and who is one of the following: a physician, psychologist, registered professional nurse licensed or otherwise authorized to engage in the practice of nursing under part 172 of the public health code (1978 PA 368, MCL 333.17201 to 333.17242), licensed master's social worker licensed or otherwise authorized to engage in the practice of social work at the master's level under part 185 of the public health code (1978 PA 368, MCL 333.18501 to 333.18518), licensed professional counselor licensed or otherwise authorized to engage in the practice of counseling under part 181 of the public health code (1978 PA 368, MCL 333.18101 to 333.18177), or a marriage and family therapist licensed or otherwise authorized to engage in the practice of marriage and family therapy under part 169 of the public health code (1978 PA 368, MCL 333.16901 to 333.16915). **NOTE:** The approved licensures for disciplines identified as a Mental Health Professional include the full, limited and temporary limited categories.

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² Evidence of specialized training would include fieldwork and/or internships associated with the academic curriculum where the student works directly with individuals with intellectual or developmental disabilities as part of that experience. The time spent in fieldwork or internship can be counted toward the one-year experience requirement and must be documented by the student's supervisor or the program's coordinator for fieldwork/internships.

³ Evidence of specialized training would include fieldwork and/or internships associated with the academic curriculum where the student works directly with persons receiving mental health services as part of that experience. The time spent in fieldwork or internship can be counted toward the one-year experience requirement and must be documented by the student's supervisor or the program's coordinator for fieldwork/internships.

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Parent Support Partner – Individual who:

- has lived experience as a parent/caregiver of a child with behavioral and mental health needs, and/or Intellectual/Developmental Disability, including autism, and
- is employed by the PIHP/CMHSP or its contract providers, **and**
- is trained in the Michigan Department of Health and Human Services approved curriculum and ongoing training model.

Peer Support Specialist - Individual in a journey of recovery who has a serious mental illness who is now receiving or has received services from the public mental health system. [This is a requirement for any Peer Support Specialist certified after July 1, 2011.] Because of their life experience, they provide expertise that professional disciplines cannot replicate. Individuals employed as Peer Support Specialists serving beneficiaries with mental illness must meet MDHHS specialized training and certification requirements. Peer Support Specialists who assist in the provision of a covered service must be trained and supervised by the qualified provider of that service. Peer Support Specialists who provide covered services without supervision must meet the specific provider qualifications.

Youth Peer Support Specialist – Individual who:

- is a young adult, ages 18 through age 26, with lived experience who received mental health services as a youth, **and**
- is willing and able to self- identify as a person who has or is receiving behavioral health services and is prepared to use that experience in helping others, **and**
- has experience receiving services as a youth in complex, child serving systems preferred (behavioral health, child welfare, juvenile justice, special education, etc.), **and**
- is employed by PIHP/CMHSP or its contract providers, **and**
- is trained in the Michigan Department of Health and Human Services approved curriculum and ongoing training model

Psychologist - References to "psychologist" in this chart and in the Medicaid Provider Manual mean a psychologist who is fully-licensed, limited-licensed or temporary limited-licensed by the State of Michigan.

Qualified Behavioral Health Professional (QBHP) – QBHP must be BCBA certified by 9/30/2020 and meet one of the following state requirements:

- Must be a physician or licensed practitioner (e.g. Advanced Practice RN, Psychologist, Clinical Social Worker, Physician Assistant, etc.) with specialized training and one year of experience in the examination, evaluation, and treatment of children with ASD.
OR
- Hold a minimum of a master's degree in a mental health-related field or a BACB approved degree category from an accredited institution who is trained and has one year of experience in the examination, evaluation, and treatment of children with ASD. Must be BCBA certified by 9/30/2020. Works within their scope of practice and have extensive knowledge and training in behavior analysis. Extensive knowledge is defined as having taken documented course work at the graduate level at an accredited university in at least three of the six following areas:
 1. Ethical considerations.
 2. Definitions & characteristics and principles, processes & concepts of behavior.
 3. Behavioral assessment and selecting interventions outcomes and strategies.
 4. Experimental evaluation of interventions.
 5. Measurement of behavior and developing and interpreting behavioral data.
 6. Behavioral change procedures and systems supports.

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³ Evidence of specialized training would include fieldwork and/or internships associated with the academic curriculum where the student works directly with persons receiving mental health services as part of that experience. The time spent in fieldwork or internship can be counted toward the one-year experience requirement and must be documented by the student's supervisor or the program's coordinator for fieldwork/internships.

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Qualified Intellectual Disability Professional (QIDP) - Individual with specialized training² or one year experience in treating or working with a person who has intellectual disability; **and** is a psychologist, physician, educator with a degree in education from an accredited program, social worker, physical therapist, occupational therapist, speech-language pathologist, audiologist, registered nurse, registered dietician, therapeutic recreation specialist, or a licensed or limited-licensed professional counselor.

An individual with a bachelor's degree in a human services field who was hired prior to January 1, 2008 and performed in the role of a QIDP prior to January 1, 2008 would also qualify. **NOTE:** If an individual was hired and performed the role of a QIDP prior to January 1, 2008 and later transfers to a new agency, his/her QIDP status will be grandfathered in to the new agency.

Qualified Mental Health Professional (QMHP) - Individual with specialized training³ or one year experience in treating or working with a person who has mental illness; **and** is a psychologist, physician, educator with a degree in education from an accredited program, social worker, physical therapist, occupational therapist, speech-language pathologist, audiologist, registered nurse, therapeutic recreation specialist, licensed or limited-licensed professional counselor, licensed or limited-licensed marriage and family therapist, or a licensed physician's assistant.

An individual with a bachelor's degree in a human services field who was hired prior to January 1, 2008 and performed in the role of a QMHP prior to January 1, 2008 would also qualify. **NOTE:** If an individual was hired and performed the role of a QMHP prior to January 1, 2008 and later transfers to a new agency, his/her QMHP status will be grandfathered in to the new agency.

Social Worker - Individual who possesses Michigan full or limited licensure as a master's social worker or a bachelor's social worker. Social workers with limited licenses must be supervised by a fully-licensed master's social worker.

Student Intern - Individual who:

- is a student in one of the following health profession training programs: counseling; marriage and family therapy; psychology; or social work which has been approved by the appropriate board, **and**
- is performing the duties assigned in the course of training, **and**
- is appropriately supervised according to the standards set by the appropriate board and the training program.

Social work student interns must be pursuing a master's degree in social work and be supervised by a Licensed Master's Social Worker in a manner that meets the requirements of a Council on Social Work Education (CSWE) accredited education program curriculum that prepares an individual for licensure.

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Substance Abuse Treatment Practitioner (SATP) - An individual who has a registered MCBAP certification development plan (Development Plan – Counselor [DP-C] – approved development plan in place), is timely in its implementation, and is supervised by a Certified Clinical Supervisor – Michigan (CCS-M) or Certified Clinical Supervisor – IC & RC (CCS); or who has a registered development plan to obtain the supervisory credential (Development Plan – Supervisor [DP-S] - approved development plan in place) while completing the requirements of the plan.

Substance Abuse Treatment Specialist (SATS) -

(1) An individual who has licensure in one of the following areas AND is working within their licensure-specified scope of practice:

Physician (MD/DO), Licensed Physician's Assistant (PA), Nurse Practitioner (NP), Registered Nurse (RN), Licensed Practical Nurse (LPN), Licensed Psychologist (LP), Limited-Licensed Psychologist (LLP), Temporary Limited-Licensed Psychologist (TLLP), Licensed Professional Counselor (LPC), Limited-Licensed Professional Counselor (LLPC), Licensed Marriage and Family Therapist (LMFT), Limited-Licensed Marriage and Family Therapist (LLMFT), Licensed Master's Social Worker (LMSW), Limited-Licensed Master's Social Worker (LLMSW), Licensed Bachelor's Social Worker (LBSW), Limited-Licensed Bachelor's Social Worker (LLBSW) **AND** they have a registered development plan leading to certification and are timely in its implementation **OR** are functioning under a time-limited exception plan approved by the regional PIHP.

OR

(2) An individual who has one of the following Michigan Certification Board of Addiction Professionals (MCBAP) or International Certification & Reciprocity Consortium (IC & RC) credentials:

Certified Alcohol and Drug Counselor - Michigan (CADC-M), Certified Alcohol and Drug Counselor (CADC), Certified Advanced Alcohol and Drug Counselor (CAADC), Certified Criminal Justice Professional - IC&RC - Reciprocal (CCJP-R), Certified Co-Occurring Disorders Professional – IC&RC (CCDP) – Bachelor's level only, Certified Co-Occurring Disorders Professional Diplomat – IC&RC (CCDP-D) – Master's level only

OR

- (3) An individual who has one of the following approved alternative certifications:
- For medical doctors: American Society of Addiction Medicine (ASAM)
 - For psychologists: American Psychological Association (APA) specialty in addiction
 - For counselors/therapists: Certification through the Upper Midwest Indian Council on Addiction Disorders (UMICAD)
 - For Licensed Professional Counselors: National Certified Counselor (NCC) with concurrent Master Addictions Counselor (MAC) certification

A physician (MD/DO), physician assistant, nurse practitioner, registered nurse or licensed practical nurse who provides substance use disorder treatment services within their scope of practice is considered to be specifically-focused treatment staff and is not required to obtain MCBAP credentials. If one of these professionals provides substance use disorder treatment services outside their scope of practice, the appropriate MCBAP/IC & RC credential applies.

A SATS must be supervised by an individual who is a certified clinical supervisor (a CCS-M or CCS-R) or who has a registered development plan (Development Plan – Supervisor [DP-S]) to obtain the supervisory credential when providing substance abuse treatment services.

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
ABA Behavior Identification Assessment	0359T	Behavior identification assessment by a qualified provider face to face with the individual and caregiver (s); includes interpretation of results and development of the behavioral plan of care.	EPSDT State Plan	BCBA, BCaBA, or QBHP, LP/LLP
ABA Behavioral Follow-up Assessment	0362T, 0363T	Behavioral follow-up assessment (Functional Behavior Analysis/FBA)	EPSDT State Plan	BCBA, BCaBA, or QBHP, LP/LLP
ABA Adaptive Behavior Treatment	0364T, 0365T	Adaptive behavior treatment by protocol administered by technician, face to face with one individual.	EPSDT State Plan	Behavior Technician (could also include BCBA, BCaBA, or QBHP, or LP/LLP)
ABA Group Adaptive Behavior Treatment	0366T, 0367T	Group adaptive behavior treatment by protocol, administered by technician, face to-face with two or more individuals.	EPSDT State Plan	Behavior Technician (could also include BCBA, BCaBA, or QBHP, or LP/LLP)
ABA Clinical Observation and Direction of Adaptive Behavior Treatment	0368T, 0369T	Clinical observation & direction of adaptive behavior treatment with protocol modification administered by qualified professional, face- to-face with one individual.	EPSDT State Plan	BCBA, BCaBA, or QBHP, LP/LLP
ABA Family Behavior Treatment Guidance	0370T	Family behavior treatment guidance administered by qualified professional. Untimed.	EPSDT State Plan	BCBA, BCaBA, or QBHP, LP/LLP

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
ABA Multiple Family Behavior Treatment Guidance	0371T	Multiple family behavior treatment guidance administered by qualified professional. Untimed.	EPSDT State Plan	BCBA, BCaBA or QBHP, LP/LLP
ABA Adaptive Behavior Treatment Social Skills Group	0372T	Adaptive behavior treatment social skills group. Untimed.	EPSDT State Plan	BCBA, BCaBA or QBHP, LP/LLP
ABA Exposure Adaptive Behavior Treatment	0373T, 0374T	Exposure adaptive behavior treatment with protocol modification requiring two or more technicians for severe maladaptive behavior(s), face-to-face with individual.	EPSDT State Plan	Behavior Technician (could also include BCBA, BCaBA, or QBHP, or LP/LLP)
Assertive Community Treatment (ACT)	H0039	ACT	State Plan	Minimum staffing: Physician (MD or DO) to provide psychiatric coverage, registered nurse who provides direct services within scope of practice, team leader who is a Mental Health Professional with a minimum of a master's degree and appropriate certification/licensure to provide clinical supervision, and other QMHPs. Up to one full-time equivalent (FTE) certified Peer Support Specialist may be substituted for one FTE QMHP and up to one FTE Paraprofessional staff may additionally be substituted for one QMHP. One nurse cannot serve as both the team leader and the nurse on the team. All team staff have a basic knowledge of ACT programs and principles acquired through MDHHS-approved ACT-specific training.
Assessments • Health	T1001, 97802, 97803	Nursing or nutrition assessments (refer to code descriptions)	State Plan	Registered nurse, licensed physician's assistant, nurse practitioner, licensed dietician or licensed nutritionist (operating within scope of practice)

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<ul style="list-style-type: none"> • Psychiatric evaluation • Psychological testing • Other assessments, tests 	90791, 90792, 90833, 90836, 90838, 90785, 99201-99215, 99304-99310, 99324-99328, 99334-99337, 99341-99350	Psychiatric evaluation 90791: Psychiatric diagnostic evaluation 90792: Psychiatric diagnostic evaluation with medical services 90833, 90836, 90838: Psychotherapy with evaluation and management 90785: Add-on code for interactive complexity 99201-99215, 99304-99310, 99324-99328, 99334-99337, and 99341-99350: Evaluation and management	State Plan (BHT/ABA where U5 is used)	90791: Psychiatrist or psychiatric mental health nurse practitioner 90792, 90833, 90836, and 90838: Psychiatrist 90785: refer to code requirements for the code that is being added on to. 99201-99205, 99212-99215, 99304-99310, 99324-99328, 99334-99337, and 99341-99350: Physician (MD or DO), licensed physician's assistant, or nurse practitioner under their scope of practice and under the supervision and delegation of a physician 99211: Physician (MD or DO), licensed physician's assistant, nurse practitioner, registered nurse, or a licensed practical nurse assisting a physician
	99241-99255	Physician consultations (inpatient settings)	State Plan	MD/DO
	96101, 96102, 96103, 96116, 96118, 96119, 96120	Psychological testing	State Plan (BHT/ABA where U5 is used)	96102, 96103, 96119 and 96120: Mental Health Professional or licensed bachelor's social worker or limited-licensed bachelor's or master's social worker acting within their scope of practice under the supervision of a Mental Health Professional who is a fully licensed master's social worker. 96101, 96116 and 96118: Psychologist

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
	90887, 96105, 96110, 96111, 96127	Other assessments, tests (includes inpatient initial review and re-certifications, vocational assessments, interpretations of tests to family, etc.)	State Plan	<p>Mental Health Professional <u>or</u> licensed bachelor's social worker or limited-licensed bachelor's or master's social worker acting within their scope of practice under the supervision of a Mental Health Professional who is a fully licensed master's social worker.</p> <p>Assessments of children with SED are done by a CMHP. Assessments of children ages 7-17 with SED must be provided by a CMHP trained in CAFAS. Assessments of children ages 4-6 with SED must be provided by a CMHP trained in PECFAS. Assessments of children with DD are done by a QIDP.</p>
	H0002, H0031, T1023	<p>H0002: Brief screening to non-inpatient mental health programs</p> <p>T1023: Pre-screening for inpatient program</p>	State Plan	<p>H0002 and T1023: Mental Health Professional <u>or</u> licensed bachelor's social worker or limited-licensed bachelor's or master's social worker under the supervision of a fully licensed master's social worker; unit supervised by registered professional nurse or other Mental Health Professional possessing at least a master's degree.</p>
		H0031: Assessment by non-physician	<p>State Plan</p> <p>(BHT/ABA where U5 is used)</p>	<p>H0031: Mental Health Professional, QMHP, or QIDP if within their licensure scope of practice. BCBA and BCaBA's within their scope of practice.</p> <p>Use H0031-U5 for reporting BHT/ABA eligibility assessments and re-evaluation assessments related to Autism by a Qualified Licensed Practitioner, working within their scope of practice with training, experience, and expertise in ASD.</p>
				<p>H0031/HW: for reporting SIS assessments face-to-face with consumer. Qualifications for SIS interviewers:</p>

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
				<ul style="list-style-type: none"> • Bachelor's degree in Human Services or four years of equivalent work experience in a related field • At least one year experience with individuals who have a developmental or intellectual disability • Persons with AAIDD-recognized training and ongoing Quality Assurance which includes: <ul style="list-style-type: none"> ➢ participation in a minimum of one Periodic Drift Review per year (recommend quarterly) conducted by an AAIDD-recognized SIS[®] Trainer ➢ maintain annual Interviewer Reliability Qualification Review (IRQR) status at "Qualified" as determined by an AAIDD-recognized SIS[®] Trainer ➢ attend quarterly Michigan SIS[®] Assessor conference calls ➢ attend annual Michigan SIS[®] Assessor Continuing Education
Behavior Treatment Plan Review	H2000	Comprehensive multidisciplinary evaluation	State Plan	Minimum staffing: Three individuals that include psychologist and physician or psychiatrist. In order to report, at least two of the three must be present. Use TS modifier when a committee member or their designee monitors the activities of the behavior treatment plan.
Clubhouse Psychosocial Rehabilitation Programs	H2030	Mental Health Clubhouse Services	State Plan	One full-time on-site clubhouse manager who has a minimum of a bachelor's degree in a human services field and two years' experience with adults with serious mental illness, or a master's degree in a human services field with one year's experience with adults with serious mental illness and has appropriate licensure.

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Community Living Supports	H0043, H2015, H2016, T2036, T2037	H0043: Community Living Supports provided in unlicensed independent living setting or own home H2015: Comprehensive Community Support Services H2016: Comprehensive Community Support Services in specialized residential settings only T2036: Therapeutic camping overnight T2037: Therapeutic camping day	Habilitation Supports Waiver & Additional "b3" Services Children's Waiver Waiver for Children with Serious Emotional Disturbance (SEDW) EPSDT for individuals under 21	H0043, H2015, H2016, T2036 & T2037: Aide H2015: Children's Waiver or SEDW aide supervised by the professional disciplines responsible for the individual plan of service (IPOS).
Community Transition (Waiver for Children with SED only)	T2038	Community Transition, waiver, per service	Waiver for Children with Serious Emotional Disturbance (SEDW)	Licensed builder or utility company; requirements specified in the IPOS.
Crisis Intervention	H2011, 90839, 90840	H2011: Crisis Intervention Service 90839: Psychotherapy for crisis; first 60 minutes 90840: Psychotherapy for crisis; each additional 30 minutes	State Plan	H2011, 90839 & 90840: Mental Health Professional or limited-licensed master's social worker, licensed bachelor's social worker, or limited-licensed bachelor's social worker acting within their scope of practice and supervised by a Mental Health Professional who is a licensed master's social worker.
Intensive Crisis Stabilization	S9484	Intensive crisis intervention mental health services, per hour. Use for the MDHHS-approved program only.	State Plan	Team of a physician, psychologist, licensed master's social worker, or a licensed or limited-licensed professional counselor and paraprofessional under the supervision of a psychiatrist.

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Crisis Residential Services	H0018	Behavioral health; short-term residential	State Plan	Clinical supervision, psychiatric evaluation and assessment by psychiatrist. On-site medication reviews by physician, licensed physician's assistant or nurse practitioner under the clinical supervision of the psychiatrist. The program must also be under the immediate direction of a full-time Mental Health Professional who is on-site 8-hours-a-day, M-F, with on-call responsibility for after-hours. The Mental Health Professional must possess at least a master's degree in a human services field with one year of experience providing services to beneficiaries with serious mental illness, or a bachelor's degree in a human services field with at least two years' experience providing services to beneficiaries with serious mental illness. Treatment, other than mental health therapy, may be done by non-degreed staff.
Enhanced Medical Equipment and Supplies / Assistive Technology (also Specialized Medical Equipment and Supplies for Children's Waiver)	E1399, S5199, T2028, T2029, T2039	Enhanced medical equipment and supplies that are not available under regular Medicaid coverage or through other insurances.	Habilitation Supports Waiver & Additional "b3" Services	Physician's prescription. Not a staff service.
Enhanced Pharmacy	T1999	Physician-ordered, nonprescription "medicine chest" items as specified in the beneficiary's support plan.	Habilitation Supports Waiver & Additional "b3" Services	Physician's prescription. Not a staff service.
Environmental Modifications/Accessibility Adaptation	S5165	Home modification, per service	Habilitation Supports Waiver & Additional "b3" Services Children's Waiver	Physician's prescription. Licensed builder, contractor Children's Waiver: Assessment by an occupational therapist

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<p>Family Training</p>	<p>S5111</p>	<p>Home care training</p>	<p>Habilitation Supports Waiver & Additional "b3" Services Children's Waiver Waiver for Children with Serious Emotional Disturbance (SEDW) EPSDT for individuals under 21</p>	<p>Training must be provided by a professional within the scope of their practice. BCBA and BCaBA's within their scope of practice. Children's Waiver: Must be either a licensed psychologist, Master's level social worker, or other clinician (e.g., occupational therapist, physical therapist, speech therapist or nurse) who is a Qualified Intellectual Disabilities Professional (QIDP), as defined in CFR 483.430. The service provider is selected on the basis of his/her competency in the aspect of the service plan on which they are conducting training. SEDW: Must be clinical professional (Psychologist, Social Worker, Occupational Therapist, Physical Therapist, Speech Therapist, Music Therapist, Art Therapist, Therapeutic Recreation Specialist or Child Mental Health Professional). The service provider is selected on the basis of his/her competency in the aspect of the service plan on which they are conducting training. Peer training must be provided by a trained peer. Parent Support Partner – Individual who:</p> <ul style="list-style-type: none"> • has lived experience as a parent/caregiver of a child with behavioral and mental health needs, and/or Intellectual/Developmental Disability, including autism, and • is employed by the PIHP/CMHSP or its contract providers, and • is trained in the Michigan Department of Health and Human Services approved curriculum and ongoing training model. <p>Parent-to-Parent and Resource Parent training must be provided by a trained parent using the MDHHS-endorsed curriculum. Other kinds of non-clinical supports may be provided by an aide.</p>
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MICHIGAN PIHP/CMHSP PROVIDER QUALIFICATIONS PER MEDICAID SERVICES & HCPCS/CPT CODES¹

Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
	G0177	Family Psycho-education: family educational groups	Additional "b3" Services	Mental Health Professional <u>or</u> Qualified Mental Health Professional trained in the Michigan Family Psychoeducation curriculum and supervised by a Mental Health Professional.
	S5110	Family Psycho-education: skills workshop	Additional "b3" Services	Mental Health Professional <u>or</u> Qualified Mental Health Professional trained in the Michigan Family Psychoeducation curriculum and supervised by a Mental Health Professional.
	T1015	Family Psycho-education: joining	Additional "b3" Services	Mental Health Professional <u>or</u> Qualified Mental Health Professional trained in the Michigan Family Psychoeducation curriculum and supervised by a Mental Health Professional.
Fiscal Intermediary Services	T2025	Waiver service NOS. Use for services performed by a fiscal intermediary.	Additional "b3" Services Children's Waiver	Entity with demonstrated competence in managing budgets and performing other functions and responsibilities of a fiscal intermediary. Entity may not be the provider of other covered services for the individual for whom it is providing fiscal intermediary services.
Foster Care, Therapeutic (SEDW Only)	S5140 S5145	S5140: Foster Care, Therapeutic, per diem, age 11 and older S5145: Foster Care, Therapeutic, per diem	GF Only Waiver for Children with Serious Emotional Disturbance (SEDW)	Foster care licensure, MDHHS-certified, specialized training, trained in the child's IPOS.
Goods and Services	T5999	Waiver service not otherwise specified	Habilitation Supports Waiver	Not a staff service.

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
Health Services	97802, 97803, 97804, H0034, S9445, S9446, S9470, T1002	97802 - 97804: medical nutrition therapy H0034: Medication training and support S9445: Pt education NOC non-physician indiv S9446: Pt education NOC non-physician group, per session S9470: Nutritional counseling dietician visit T1002: RN services	State Plan	Registered nurse, nurse practitioner, registered dietician, or licensed physician's assistant according to their scope of practice.
Home Based Services	H0036	Community psychiatric supportive treatment H0036/ST: Trauma-Focused Cognitive Behavioral Therapy (TFCBT)	State Plan, EPSDT	<p>Home-based services worker: CMHP*</p> <p>Home-based services assistant: Aide</p> <p>Supervisor: master's prepared CMHP with three years' professional experience.</p> <p>TFCBT: Master's level home-based clinician, certified by MDHHS to provide this service</p> <p>For children ages 7-17 with SED: must be trained in CAFAS. Services rendered to children ages 4-6 with SED must be provided by a CMHP trained in PECFAS.</p> <p>For infants and toddlers (0-3 years): CMHP + specific training. Effective 10/01/09, training requirement must minimally have Endorsement Level 2 by the Michigan Association of Infant Mental Health, Level 3 preferred.</p> <p>For DD: CMHP* + must meet QIDP qualifications</p> <p>*Unless providing mental health therapy which requires these qualifications: physician, psychologist, licensed master's social worker (or a limited-licensed master's social worker supervised by a licensed master's social worker), or a licensed or limited-licensed professional counselor + one year of experience in examination, evaluation and treatment of minors and their families.</p>

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	H2033	Multi-systemic therapy (MST) in home-based program	State Plan	Master's level clinician who is a CMHP, certified by MST Services
Home Care Training, Non-Family (Children's Waiver Only)	S5116	Home Care Training, non-family, per session	Children's Waiver	Psychologist, licensed master's social worker, or a QIDP
Housing Assistance	T2038	Community transition, waiver, per service	Additional "b3" Services	Not a staff service.
Medication Administration	96372, 99506	Report procedure code only when provided as a separate service.	State Plan	Physician, licensed physician's assistant, nurse practitioner, registered nurse, or a licensed practical nurse assisting a physician
Medication Review	99201-99215 99324-99328 99304-99310 99334-99337 99341-99350	99201-99215: Psychiatric evaluation and medication management EPS tardive dyskinesia testing is included in medication review services 99304-99310: Nursing facility services evaluation and management 99324-99328 and 99334-99337: Domiciliary care, rest home, assisted living visits. 99341-99350: Home visits	State Plan	99201-99205, 99212-99215, 99304-99310, 99324-99328, 99334-99337, and 99341-99350: Physician (MD or DO), licensed physician's assistant or nurse practitioner under their scope of practice and under the supervision and delegation of a physician. 99211: Physician (MD or DO), licensed physician's assistant, nurse practitioner, registered nurse, or a licensed practical nurse assisting a physician Note: Only an MD or DO, or a licensed physician's assistant or nurse practitioner under the supervision of a physician (MCL 333.17076(3)), may prescribe medications.
	H2010	Comprehensive Medication Services Use only with Evidence-Based Practice – Medication Algorithm	State Plan	Physician (MD or DO), licensed physician's assistant, nurse practitioner or registered pharmacist within their scope of practice.

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MICHIGAN PIHP/CMHSP PROVIDER QUALIFICATIONS PER MEDICAID SERVICES & HCPCS/CPT CODES¹

Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
Nursing Facility Mental Health Monitoring	T1017/SE	Targeted case management	State Plan	<p>Mental Health Professional or licensed bachelor's social worker (or limited-licensed bachelor's or master's social worker under the supervision of a fully licensed master's social worker) supervised by a Mental Health Professional or a QIDP or a QMHP.</p> <p>A CMHP is required when delivering services to a child with SED.</p> <p>A QIDP is required when delivering services to a child with DD.</p>
Occupational Therapy	97165, 97166, 97167, and 97168	OT evaluation/re-evaluation	State Plan	<p>Physician or physician assistant or nurse practitioner prescription.</p> <p>Services provided by an occupational therapist currently licensed by the State of Michigan.</p>
	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, 97750, 97755, 97760, 97762, S8990	OT individual	State Plan	<p>Physician or physician assistant or nurse practitioner prescription.</p> <p>Services provided by an occupational therapist currently licensed by the State of Michigan or an occupational therapy assistant supervised by a licensed occupational therapist.</p>
	97150	OT group	State Plan	<p>Physician or physician assistant or nurse practitioner prescription.</p> <p>Services provided by an occupational therapist currently licensed by the State of Michigan or an occupational therapy assistant supervised by a licensed occupational therapist.</p>
Out-of-Home Non-Vocational Habilitation	H2014	Skills training and development	Habilitation Supports Waiver	Aide

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MICHIGAN PIHP/CMHSP PROVIDER QUALIFICATIONS PER MEDICAID SERVICES & HCPCS/CPT CODES¹

Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
Out-of-Home Prevocational Service	T2015	Habilitation, prevocational	Habilitation Supports Waiver	Aide
Peer-Directed and -Operated Support Services	H0023, H0038, H0046	H0023: Drop-in center H0038: Peer specialist services H0038/HF: Substance Use Disorder Recovery Coach – see "Substance Abuse: Outpatient Care" H0038/TJ: Youth Peer Support Specialist H0046: Peer Mentor	Additional "b3" Services EPSDT for individuals under 21	Drop-in Center Director: An individual in recovery from serious mental illness who is receiving or has received public mental health services. The individual's life experience provides expertise that professional training alone cannot replicate. Peer Specialist: Must be certified by MDHHS if providing services to an individual with SMI. Youth Peer Support Specialist: a young adult, ages 18 through age 26, with lived experience who received mental health services as a youth, and is willing and able to self- identify as a person who has or is receiving behavioral health services and is prepared to use that experience in helping others, and has experience receiving services as a youth in complex, child serving systems preferred (behavioral health, child welfare, juvenile justice, special education, etc.), and is employed by PIHP/CMHSP or its contract providers, and is trained in the Michigan Department of Health and Human Services approved curriculum and ongoing training model Peer Mentor: Must be an individual with developmental disabilities who is trained as a mentor.
Personal Care in Licensed Specialized Residential Setting	T1020	Personal care services	State Plan	Services are authorized by a physician or other health care professional. Services are provided by an aide supervised by a health care professional.
Physical Therapy	97161, 97162, 97163, and 97164	PT evaluation/re-evaluation	State Plan	Physician or physician assistant or nurse practitioner prescribed. Evaluation must be done by a licensed (by State of Michigan) physical therapist.

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
	97110, 97112, 97113, 97116, 97124, 97140, 97530, 97532, 97533, 97535, 97537, 97542, S8990	PT individual	State Plan	Physician or physician assistant or nurse practitioner prescribed. Activities performed by a licensed (by State of Michigan) physical therapist or a physical therapy assistant supervised by a licensed physical therapist.
	97150	PT group	State Plan	Physician or physician assistant or nurse practitioner prescribed. Activities performed by a licensed (by State of Michigan) physical therapist or a physical therapy assistant supervised by a licensed physical therapist.
Prevention Services - Direct Model	H0025, S9482, T2024, T1027, H2027	Behavioral health prevention education service H0025: School Success & Child Care Expulsion H2027: Family skills training/group for children of adults with mental illness S9482: Infant mental health T1027: Parent education	Additional "b3" Services EPSDT for individuals under 21	Infant Mental Health and Child Care Expulsion: master's prepared Early Childhood Mental Health Professional plus specific training. Effective 10/01/09, training requirement must minimally have Endorsement Level 2 by the Michigan Association of Infant Mental Health, Level 3 preferred. School Success: CMHP* Children of Adults with MI: Mental Health Professional*
		T2024: Children of adults with mental illness		Parent Education: CMHP* with training in the Parent Education model * Unless providing mental health therapy which requires the qualifications of physician, psychologist, licensed master's social worker (or a limited-licensed master's social worker supervised by a licensed master's social worker), or a licensed or limited-licensed professional counselor + one year of experience in examination, evaluation and treatment of minors and their families.

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
Private Duty Nursing	S9123, S9124	Private duty nursing, Habilitation Supports Waiver (individual nurse only), 21 years and over ONLY	Habilitation Supports Waiver	S9123: Registered nurse S9124: Licensed practical nurse
	T1000	Private duty nursing (Habilitation Supports Waiver) Private duty/independent nursing service(s), licensed	Habilitation Supports Waiver	T1000 TD: Registered nurse T1000 TE: Licensed practical nurse or licensed visiting nurse
Respite Care	H0045	Respite care services in out-of-home setting	Habilitation Supports Waiver & Additional "b3" Services	Aide
	S5150	Respite care by unskilled person (use also for "Family Friend" respite)	GF only	Aide
	S5151	Respite care in home	Additional "b3" Services	Aide

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
	T1005	Respite care services, up to 15 minutes No modifier = all providers (including unskilled and "Family Friend") except RN & LPN	Habilitation Supports Waiver & Additional "b3" Services Children's Waiver Waiver for Children with Serious Emotional Disturbance (SEDW)	Aide Children's Waiver or SEDW: Aide must also have training in recipient rights T1005 TD: Registered nurse T1005 TE: Licensed practical nurse
	T2036, T2037	T2036: Therapeutic camping overnight T2037: Therapeutic camping day	Habilitation Supports Waiver & Additional "b3" Services	Aide
Skill Building Assistance	H2014	Skills training and development	Additional "b3" Services EPSDT for individuals under 21	Activities identified in the IPOS are designed by a professional within their scope of practice. May be delivered by an Aide.
Specialty Services (Children's Waiver and Waiver for Children with Serious Emotional Disturbance Only)	G0176	Activity Therapy (music, recreation or art), per session, 45 minutes or more	Children's Waiver Waiver for Children with Serious Emotional Disturbance (SEDW)	Music therapy: board certified (MT-BC) National Music Therapy Registry (NMTR) Recreation therapy: Certified by the National Council for Therapeutic Recreation Certification (NCTRC) Art: Board certified (ATR-BC) Art Therapy Credentials Board, Inc. (ATCB)

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
Speech, Hearing & Language Therapy	92610	Evaluation of oral and pharyngeal swallowing function	State Plan	Physician or physician assistant or nurse practitioner referral Speech-language pathologist or audiologist possessing a current license, or a candidate who has completed the academic program and is acquiring supervised work experience to qualify for the license.
	92521	Evaluation of speech fluency	State Plan	Physician or physician assistant or nurse practitioner referral Speech-language pathologist or audiologist possessing a current license, or a candidate who has completed the academic program and is acquiring supervised work experience to qualify for the license.
	92522	Evaluation of speech sound production	State Plan	Physician or physician assistant or nurse practitioner referral Speech-language pathologist or audiologist possessing a current license, or a candidate who has completed the academic program and is acquiring supervised work experience to qualify for the license.
	92523	Evaluation of speech sound production with evaluation of language comprehension and expression	State Plan	Physician or physician assistant or nurse practitioner referral Speech-language pathologist or audiologist possessing a current license, or a candidate who has completed the academic program and is acquiring supervised work experience to qualify for the license.

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
	92524	Behavioral and qualitative analysis of voice and resonance	State Plan	Physician or physician assistant or nurse practitioner referral Speech-language pathologist or audiologist possessing a current license, or a candidate who has completed the academic program and is acquiring supervised work experience to qualify for the license.
	92507, 92526	S & L therapy, individual, per session	State Plan	Speech-language pathologist or audiologist possessing a current license, or a candidate who has completed the academic program and is acquiring supervised work experience to qualify for the license. Speech-language pathology assistant supervised by the licensed speech-language pathologist or audiologist.
	92508	S & L therapy, group, per session	State Plan	Speech-language pathologist or audiologist possessing a current license. Speech-language pathology assistant supervised by the licensed speech-language pathologist or audiologist.
	92607	Evaluation for prescription for speech-generating augmentative and alternative communication devices	State Plan	Physician or physician assistant or nurse practitioner referral Speech-language pathologist or audiologist possessing a current license, or a candidate who has completed the academic program and is acquiring supervised work experience to qualify for the license.
	92608	Add-on code for 92067, each additional 30 minutes	State Plan	Physician or physician assistant or nurse practitioner referral

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				Speech-language pathologist or audiologist possessing a current license, or a candidate who has completed the academic program and is acquiring supervised work experience to qualify for the license.
	92609	Therapeutic services for the use of speech-generating device, including programming and modification	State Plan	Physician or physician assistant or nurse practitioner referral Speech-language pathologist or audiologist possessing a current license, or a candidate who has completed the academic program and is acquiring supervised work experience to qualify for the license.
Substance Abuse: Individual Assessment	H0001	Alcohol and/or drug assessment face-to-face service for the purpose of identifying functional and treatment needs and to formulate the basis for the Individualized Treatment Plan	State Plan	Provider agency licensed and accredited as substance abuse treatment program. Service provided by Substance Abuse Treatment Specialist (SATS) or Substance Abuse Treatment Practitioner (SATP) when working under the supervision of a SATS.

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
<p>Substance Abuse: Outpatient Care</p>	<p>H0004, H0005, H0015, H0022, H0050, H0038, H2011, H2027, H2035, H2036, T1007, T1012, 90785, 90832, 90834, 90837, 90846, 90847, 90849, 90853, 0906 (Revenue Code)</p>	<p>H0004: Behavioral health counseling and therapy, per 15 minutes</p> <p>H0005: Alcohol and/or drug services; group counseling by a clinician</p> <p>H0015: Alcohol and/or drug services; intensive outpatient (from 9 to 19 hours of structured programming per week based on an individualized treatment plan), including assessment, counseling, crisis intervention, and activity therapies or education</p> <p>H0022: Early Intervention</p> <p>H2011/HF: Crisis intervention</p> <p>H2027/HF: Didactics</p> <p>H2035: Outpatient alcohol and/or other drug treatment service in which the client participates in accordance with an approved individualized treatment plan. It may include assessment, individual and group counseling, occupational therapy, activity therapies, expressive therapies (art, drama, poetry, music, and movements), referral and information, drug screening urinalysis, medication administration, medical services, case management services, and nutrition counseling – per hour</p>	<p>State Plan</p>	<p>Provider agency licensed and accredited as substance abuse treatment program</p> <p>For all "H" and "T" HCPCS Codes: Clinical service provided by Substance Abuse Treatment Specialist (SATS) or Substance Abuse Treatment Practitioner (SATP) when working under the supervision of a SATS.</p> <p>Non-clinical services under H0015, H0038, H0050, H2035, H2036, T1007, T1012, and 0906 revenue code: Services can be provided by appropriately trained staff when working under the supervision of a SATS or SATP.</p> <p>A recovery coach or SUD peer specialist must be certified through an MDHHS-approved training program.</p> <p>H0038: qualified peer specialist - Substance Use Disorder (SUD)</p>

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		H2036: Outpatient alcohol and/or other drug treatment service in which the client participates in accordance with an approved individualized treatment plan. It may include assessment, individual and group counseling, occupational therapy, activity therapies, expressive therapies (art, drama, poetry, music, and movements), referral and information, drug screening urinalysis, medication administration, medical services, case management services, and nutrition counseling – per diem H0038/HF, T1012: Recovery support T1007: Treatment planning		
		90785/HF: interactive complexity (add-on code) 90832: Psychotherapy, 30 minutes with individual and/or family member 90834/HF: Interactive individual psychotherapy 90837: Psychotherapy, 60 minutes with individual and/or family member 90846/HF: Family psychotherapy 90847/HF: Family psychotherapy 90849/HF: Family psychotherapy 90853/HF: Interactive group psychotherapy		For psychotherapy (908xx series codes): SATS – Only Master’s prepared with appropriate licensure and working under appropriate supervision may provide services.

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		0906: Intensive Outpatient Services – Chemical dependency Use modifier HF to signify that these codes were used for substance abuse treatment, because they are also used for reporting mental health services.		
Substance Abuse: Methadone	H0020	Alcohol and/or drug services; Methadone administration and/or service (provision of the drug by a licensed program)	State Plan	Provider agency licensed and accredited as methadone clinic. Supervision by licensed physician. Administration of methadone by an MD, DO, licensed physician’s assistant, RN, LPN or pharmacist.
Substance Abuse: Sub-Acute Detoxification	H0010, H0012, H0014	H0010: Alcohol and/or drug services; sub-acute detoxification; medically monitored residential detox (ASAM Level III.7-D) H0012: Alcohol and/or drug services; sub-acute detoxification; clinically monitored residential detox; non-medical or social detox setting (ASAM Level III.2-D) H0014: Alcohol and/or drug services; ambulatory detoxification without extended on-site monitoring (ASAM Level I-D) and ambulatory detoxification with extended on-site monitoring (ASAM Level II-D)	State Plan	For residential settings (H0010 and H0012): provider agency licensed and accredited as substance abuse residential detoxification program. Supervision by licensed physician. H0010: Staffed 24-hours-per-day, 7-days-per-week by licensed physician or by the designated representative of a licensed physician. H0012: Provided under the supervision of a Substance Abuse Treatment Specialist. Must have arrangements for access to licensed medical personnel as needed. H0014: Provided under the supervision of a Substance Abuse Treatment Specialist. Must have arrangements for access to licensed medical personnel as needed. Appropriately certified and licensed nurses must monitor ASAM Level II-D ambulatory detoxification services under H0014.

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Substance Abuse: Residential Services	H0018, H0019	H0018: Alcohol and/or drug services; short-term residential (non-hospital residential treatment program) H0019: Alcohol and/or drug services; long-term residential (non-medical, non-acute care in residential treatment program where stay is typically longer than 30 days)	State Plan	Provider agency licensed and accredited as substance abuse treatment program. The clinical program must be provided under the supervision of a SATS with licensure as a psychologist, master's social worker, licensed or limited-licensed professional counselor, physician, or licensed marriage and family therapist.
Supported Employment Services	H2023	Supported employment	Habilitation Supports Waiver & Additional "b3" Services EPSDT for individuals under 21	Services/activities identified in the IPOS. Qualifications of providers depends upon the service. Transportation: Aide
Supports Coordination	T1016	Case management	Habilitation Supports Waiver (HSW) & Additional "b3" Services EPSDT for individuals under 21	HSW Supports Coordinator: QIDP "b3" Supports Coordinator: bachelor's degree in a human services field and one year of experience with population the supports coordinator will be serving. Services must be provided by a CMHP to any child beneficiary with serious emotional disturbance. Services to children ages 7-17 with SED must be provided by a CMHP trained in CAFAS. Services rendered to children ages 4-6 with SED must be provided by a CMHP trained in PECFAS. Assistants or brokers: high school diploma and one year experience, and supervised by a qualified supports coordinator or case manager.

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Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
Targeted Case Management	T1017	Targeted case management	State Plan	QIDP or QMHP: if case manager has only bachelor's degree without specialized training or experience, they must be supervised by a QMHP or QIDP. Services must be provided by a CMHP to any child beneficiary with SED. Services to children ages 7-17 with SED must be provided by a CMHP trained in CAFAS. Services rendered to children ages 4-6 with SED must be provided by a CMHP trained in PECFAS.
Therapy (mental health) Child & Adult, Individual, Family, Group	90832, 90834, 90837, 90785	Individual therapy, adult or child 90785: Add-on code for interactive complexity	State Plan	Child therapy: A physician, psychologist, licensed master's social worker (or limited-licensed master's social worker), or a licensed or limited-licensed professional counselor + one year of experience in examination, evaluation and treatment of minors and their families. Services to children ages 7-17 with SED must be provided by a CMHP trained in CAFAS. Services rendered to children ages 4-6 with SED must be provided by a CMHP trained in PECFAS. Adult individual/group therapy: Mental Health Professional, including a limited-licensed master's social worker supervised by a licensed master's social worker.
	90853, 90785	Group therapy, adult or child, per session 90785: Add-on code for interactive complexity	State Plan	Child therapy: A physician, psychologist, licensed master's social worker (or limited-licensed master's social worker), or a licensed or limited-licensed professional counselor + one year of experience in examination, evaluation and treatment of minors and their families. Services to children ages 7-17 with SED must be provided by a CMHP trained in CAFAS. Services rendered to children ages 4-6 with SED must be provided by a CMHP trained in PECFAS.

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MICHIGAN PIHP/CMHSP PROVIDER QUALIFICATIONS PER MEDICAID SERVICES & HCPCS/CPT CODES¹

Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
				Adult individual/group therapy: Mental Health Professional, including a limited-licensed master's social worker supervised by a licensed master's social worker.
	90846, 90847, 90849	Family therapy, per session	State Plan	Family therapy: Mental Health Professional, including a limited-licensed master's social worker supervised by a licensed master's social worker.
	H2019	Dialectical Behavior Therapy (DBT)	State Plan	Mental Health Professional certified in DBT by MDHHS. Skills training (H2019/TT) by Mental Health Professional + bachelor's level staff or Peer Support Specialist.
Transportation	A0080, A0090, A0100, A0110, A0120, A0130, A0140, A0170, S0209, S0215, T2001-T2005	Non-emergency transportation services. Refer to code descriptions.	State Plan & Additional "b3" Services S0215: Children's Waiver	State Plan and "b3" Services: Aide with valid Michigan driver's license appropriate to the vehicle being driven. Children's Waiver: can be provided by paid staff with a valid Michigan driver's license. It cannot be billed when provided by the CLS worker or case manager.
Treatment Planning	H0032	Mental health service plan development by non-physician	State Plan	Qualifications of professionals in attendance will depend upon their scope of practice. BCBA and BCaBA's within their scope of practice. Independent facilitator: aide level qualifications with training in person-centered planning. Peers who participate or assist in treatment planning must meet the qualifications of Peer Specialist or Peer Mentor.

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MICHIGAN PIHP/CMHSP PROVIDER QUALIFICATIONS PER MEDICAID SERVICES & HCPCS/CPT CODES¹

Service Description	HCPCS Codes	Reporting Code Description from HCPCS and CPT Manuals ¹	Coverage	Provider/Staff Qualifications & Minimum Training Requirements
Wraparound Services	H2021, H2022 (SEDW)	Specialized Wraparound Facilitation Community-based wraparound services, per diem (SEDW only)	EPSDT Waiver for Children with Serious Emotional Disturbance (SEDW)	<p>Facilitator/Supports Coordinator: CMHP. Services to children ages 7-17 with SED must be provided by an individual who possesses a minimum of a bachelor's degree, is a CMHP or is supervised by a CMHP and is trained in CAFAS. Services rendered to children ages 4-6 with SED must be provided by an individual who possesses a minimum of a bachelor's degree, is a CMHP or is supervised by a CMHP, and is trained in PECFAS..</p> <p>Training: The Facilitator/Supports Coordinator must complete MDHHS three-day Wraparound Facilitator training within 90 days of hire, complete a minimum of two MDHHS Wraparound training per calendar year, and demonstrate proficiency in facilitating the Wraparound process. The supervisor must complete the three-day Wraparound Facilitator training and one additional MDHHS supervisory training and attend two MDHHS Wraparound trainings annually, one of which shall be a Wraparound supervisor training.</p>

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