

## 6.14. Mental Health – Interdisciplinary Team Treatment Planning Service

### DESCRIPTION OF SERVICES

Interdisciplinary team treatment planning meetings are collaborative, face-to-face treatment planning meetings. Based on the initial assessment, the treatment coordinator, the participant, and if the participant is a minor, the minor's parent, guardian, or primary caretaker, will develop a treatment plan in collaboration with family or others designated by the participant (with proper consent), and others involved in the participant's care and other outpatient mental health center (OMHC) staff, as appropriate.

The participant is actively engaged in this process and must sign agreement with the plan. If the participant is unwilling to sign agreement with the plan, the participant's treatment coordinator will verify the participant's verbal agreement with the plan and document the rationale for the participant's refusal to sign. If the participant is a minor, the minor's parent or guardian, or the minor's primary caretaker, must sign agreement with the plan. With proper consent, family or others designated by the participant, including the participant's caregivers, may sign the plan. The plan should include the participant's diagnosis, presenting needs, strengths, recovery and treatment expectations and responsibilities. Also included should be descriptions of needed and desired treatment and interventions to be provided, as well as a description of how the needed and desired treatment will help the participant manage the participant's psychiatric disorder and to support recovery. Both short-term and long-term treatment goals should be documented, in measurable terms, and with target dates for each goal documented as well.

At least two licensed mental health professionals who collaborate about the participant's treatment must sign the plan. If the participant is receiving medication management prescribed through the OMHC, whoever prescribes the medication, the OMHC psychiatrist or certified psychiatric nurse practitioner in psychiatry, must sign the plan.

### SERVICE RULES

A participant may receive up to two interdisciplinary team treatment planning meetings per calendar year. Meetings may only be billed only once every 120 days. This service is available for OMHCs only.

The mental health service provider is expected to exchange information and coordinate care with the participant's PCP and other treatment (e.g., substance use disorder treatment) providers as clinically indicated and with appropriate consents.

Participants with Medicaid and uninsured eligible participants are eligible for interdisciplinary team treatment planning services.

### SERVICE PROVIDERS

Interdisciplinary team treatment planning meetings are provided by OMHCs approved under COMAR 10.21.20.

## **AUTHORIZATION PROCESS**

Authorization for this service is not required. The provider may bill for one interdisciplinary team treatment planning meeting every 120 days per participant, but no more than two per calendar year. In order to submit a claim for this service, the participant must be present and seen face-to-face.

## **CLAIMS PROCESS**

Claims are submitted on CMS 1500 forms. Dually eligible (Medicare/Medicaid) participants should submit claims directly to Beacon Health Options, Inc. (Beacon). It is not necessary to submit these claims to Medicare. Each unit should correspond to the date of service. Only one code (H0032) may be billed per 120-day period, and no more than two per calendar year. Claims must specify ICD-10 code (not DSM 5 code) for reimbursement.