

Treat to Competency

When you complete a competency evaluation, you will still bill the H2000 HE H9 under contract source 42BB (42BL for Grand service area 11) and bill the service fee-for-service.

When treating an individual to competency, you do not need to admit the individual, report a transaction type 21 with a service focus of 34. Submit the transaction type 21 on the day a trigger service is provided, as with other CCBHC contacts, and you can bill the monthly CCBHC rate (T1041) using the new contract source 42BK (or 42BL for Grand's service area 11). Case management services should be reported using the T1016 and will trigger the monthly payment. Shadow report any other services provided during the 30-day period using the same new contract source. There will be an unlimited number of transaction type 21s allowed.

After the first transaction type 21 for the individual is submitted, the individual will be placed on the Most in Need (MIN) list, and you will be able to bill the enhanced rate (H0046). It may take up to ten days after submitting the first transaction type 21 for the individual to display on the MIN list. The start date of the MIN list will be the transaction date on the first CDC.

If the client is already admitted in your outpatient facility, complete a transaction type 42 with service focus 34.