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DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

Date: March 22, 2022

PPL No. 22-008

To: Local Educational Agencies (LEAs)

Subject: NOTIFICATION OF EXPANSION OF COVERED SERVICES PROVIDED BY ASSOCIATE MARRIAGE AND FAMILY THERAPISTS (AMFTs) AND REGISTERED ASSOCIATE CLINICAL SOCIAL WORKERS (ACSWs)

This Policy and Procedure Letter (PPL) notifies LEAs participating in the Local Educational Agency Medi-Cal Billing Option Program (LEA BOP) that in addition to being reimbursed for treatment services, AMFTs and ACSWs can also be reimbursed for psychosocial status assessments and health education/anticipatory guidance services provided that all applicable supervisory requirements have been met.

The policy in this PPL is retroactive to July 1, 2021. LEAs should submit historical claims with dates of service on or after July 1, 2021 to the Department of Health Care Services (DHCS) Fiscal Intermediary (FI) by June 30, 2022. Since the paid claims processing system changes are not yet implemented, LEAs will initially receive a denial from the FI for the expanded covered services. However, upon implementation of system changes, DHCS will initiate an Erroneous Payment Correction for the denied claims and process reimbursement for the erroneous denials.

For reference, the following two qualified practitioner modifiers will be added to the existing procedure codes to identify that services were provided by AMFTs and ACSWs:

Qualified Practitioners (Modifier):

- Associate marriage and family therapist (HL)
- Registered associate clinical social worker (HM)

**Individual Education Plan (IEP)/Individual Family Service Plan (IFSP)
Psychosocial Status Assessments**

Procedure Code/Modifier	LEA BOP Usage	LEA Limitations (Per Student)
96156 TL (IFSP)	Initial IFSP psychosocial status assessment, each completed 15-minute increment	One per lifetime per provider
96156 TM (IEP)	Initial or triennial IEP psychosocial status assessment, each completed 15-minute increment	One every <u>third state fiscal year</u> per provider
96156 52 TL (IFSP) or 96156 52 TM (IEP)	Annual IEP/IFSP psychosocial status assessment, each completed 15-minute increment	One every <u>state fiscal year</u> per provider when an initial or triennial IEP/IFSP psychosocial status assessment is not billed
96156 TS TL (IFSP) or 96156 TS TM (IEP)	Amended IEP/IFSP psychosocial status assessment, each completed 15-minute increment	One every 30 days per provider

Non-IEP/IFSP Psychosocial Status Assessments

Procedure Code/Modifier	LEA BOP Usage	LEA Limitations (Per Student)
96156	Psychosocial status assessment, each completed 15-minute increment	4 units per day
96156 TS	Psychosocial status assessment, each completed 15-minute increment	4 units per day

Non-IEP/IFSP Health Education and Anticipatory Guidance

Procedure Code	LEA BOP Usage	LEA Limitations (Per Student)
99401	Health education/ anticipatory guidance, each completed 15-minute increment	4 units per day

Nothing stated in this PPL shall supersede any state or federal regulations or statutes.

If you have any questions concerning this PPL, please contact the LEA Medi-Cal Billing Option Program by e-mail at LEA@dhcs.ca.gov.

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Sincerely,

ORIGINALLY SIGNED BY BRIAN FITZGERALD

Brian Fitzgerald, Chief
Local Governmental Financing Division
Department of Health Care Service