

## Updated Only for Logo and Branding

### Provider Notice Policy Clarification

**To:** PerformCare TCM Provider Network  
**From:** Scott Daubert, VP Operations  
**Date:** April 1, 2013  
**Subject:** PC-04 TCM Concurrent Billing with PH-BH Appointments

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#### Claims Payment and Clinical Policy Clarification

##### Question/Issue:

Under what circumstances can a Targeted Case Management service (ICM, RC, BCM) be delivered and appropriately billed to PerformCare during a Member's concurrent physical health (e.g., PCP) or a concurrent behavioral health professional appointment (e.g., psychiatrist)?

##### Source Documentation / References:

55 Pa. Code § 1101 Medical Assistance Manual: General Provisions  
55 Pa. Code § 1150 Medical Assistance Manual: MA Program Payment Policies  
55 Pa. Code § 5221 Nonresidential Agencies/Facilities/Services: Mental Health Intensive Case Management

HealthChoices Behavioral Health Program Standards and Requirements: Appendix F Fraud and Abuse Program Requirements

OMHSAS Bulletin OMHSAS-12-03, issued 6/14/2012, Mental Health Targeted Case Management (TCM) Documentation Requirements

OMHSAS Bulletin OMHSAS-13-01, issued 1/18/2013, Targeted Case Management (TCM) – Travel and Transportation Guidelines.

##### PerformCare Answer/Response:

Targeted Case Management (TCM) can be delivered concurrently with a Member's physical health or behavioral health professional appointment under certain circumstances. There is no direct prohibition against billing a TCM service unit concurrently with a medical or behavioral health professional appointment service to PerformCare.

55 Pa. Code § 5221 defines *Intensive Case Management* as “the services described in this chapter which are designed to assist targeted adults with serious and persistent mental illness and targeted children with a serious mental illness or emotional disorder and their families, to gain access to needed resources, such as **medical**, social, educational and other services” (emphasis added). In addition, 55 Pa. Code § 5221.22(a) states that “the intensive case manager shall work closely with the consumer’s **mental health therapist** or **psychiatrist** and provide consultation in crisis situations as well as in the overall treatment and management of the consumer’s mental illness, including discharge planning” (emphasis added). In addition, 55 Pa. Code § 5221.31 (6) states that intensive case management providers are responsible for “providing intensive case management services as needed in the place where the consumer resides or needs the service.”

The following are potentially applicable regulations where prohibitions of concurrent services are in place:

1. Under 55 Pa. Code § 1150, *medical care* is defined as “the attention and treatment of a patient by a *practitioner* responsible for the medical management of the patient on an inpatient or outpatient basis.” A *practitioner* is “a person currently licensed under the law of a state to practice medicine, osteopathy, dentistry, podiatry, optometry, chiropractic or midwifery.” Under 55 Pa. Code § 1150.56 (a) (3) Medical Services, there is a prohibition where “only one practitioner is eligible to receive payment for medical care for the same patient on the same day.” However, this prohibition is only relevant to the definition of a practitioner and is only relevant to inpatient medical care, neither of which is applicable to TCM service delivery concurrent with a practitioner.
2. Other noncompensable items and service are outlined under 55 Pa. Code § 1101 Medical Assistance Manual: General Provisions. Under 55 Pa. Code § 1101.75(a)(4), provider prohibited acts include that an enrolled provider “may not...Submit a duplicate claim for services or items for which the provider has already received or claimed reimbursement from a source.” This duplicate service prohibition is similarly stated in the HealthChoices Behavioral Health Program Standards and Requirements: Appendix F Fraud and Abuse Program Requirements, Attachment 1. However, no specific prohibition against a TCM service occurring concurrently with a professional appointment is found in these documents or currently established PerformCare Policy.

In delivering such a concurrent service, TCM providers must abide by both the 5221 and 1101 regulations (see 55 Pa. Code § 5221.11(e)). 55 Pa. Code § 1101.66 does state that rendered, prescribed, or ordered services are only compensable when “medically necessary” and “not in an amount that exceeds the recipient’s needs.” In order to meet these requirements, the need for such concurrent services should be included in the written service plan related to a specific goal, and the documentation of services needs to “verify the necessity for the contact and reflect the goals and objectives of the intensive case management service plan” (see 55 Pa. Code § 5221.33).

Participating in appointments with Members in response to crisis or urgent situations (not necessarily specifically reflected on the service plan) is also allowed and should be properly documented in the progress note. As indicated, consultation by the case manager can and should occur with the consumer’s mental health therapist, psychiatrist, and/or other treating health care practitioners outside of and in addition to the consumer’s routine physical health or behavioral health professional appointments. Finally, it is also important to note that time spent transporting or escorting consumers to appointments should not be billed per OMHSAS Bulletin OMHSAS-13-01.

Also refer to PerformCare Provider Memo, **PC-03 Mental Health Targeted Case Management (TCM) Transportation Clarification** on this issue.

This clarification should not be construed to replace prior PerformCare policies previously issued which may restrict or prohibit Targeted Case Management services during other specific behavioral health services (e.g., Family-Based, RTF, Crisis Intervention). This clarification is intended to address TCM concurrence with outpatient professional appointments and office visits only.