

Texas Department of State Health Services
Medicaid Mental Health (MH) Rehabilitative Services
Billing Guidelines
Effective: 08/31/04
Updated: 08/01/07

1. Claims Submissions:
 - 1.1. Payment will not be made to providers without a current and valid contract for MH Rehabilitative Services.
 - 1.2. Payment will not be made for services for which the documentation of that service does not include the original signature, including credentials, of the staff person who provided the service.
 - 1.3. Payment will be made for only those services that are provided in accordance with the department's rules, guidelines, policy clarifications, and manuals.
 - 1.4. Payment will not be made for non-reimbursable activities.
 - 1.5. Payment will not be made for fractional units of service.

2. Cost Reporting:
 - 2.1. Providers may not include costs associated with non-reimbursable activities on a cost report.
 - 2.2. Providers may not code staff time associated with non-reimbursable activities as MH Rehabilitative Services time on time studies used to set rates for Medicaid MH Rehabilitative Services.
 - 2.3. Costs reports must be completed and submitted to the Texas Health and Human Services Commission (HHSC) according to HHSC's rules and regulations.

3. Non-Reimbursable Activities:
 - 3.1. The Department will not reimburse a provider of Medicaid MH Rehabilitative Services for certain activities such as:
 - 3.1.1. Psychiatric nursing services including medication training and support services and medication-related services that are incidental to another service such as an office visit with a physician.
 - 3.1.2. A medical evaluation, examination, or treatment that is otherwise reimbursable as a separate and distinct Medicaid-covered benefit.
 - 3.1.3. An individual's room and board.
 - 3.1.4. Any service provided in an inpatient hospital setting.
 - 3.1.5. A service provided to an individual with a diagnosis of substance use disorder, mental retardation, or pervasive developmental disorder without a co-occurring diagnosis of mental illness.
 - 3.1.6. Any activity that is not directly related to achieving the goals listed in an individual's treatment plan. Examples of such activities include:
 - 3.1.6.1. merely accompanying an individual to a social or recreational event or other entertainment or locations to conduct the individual's personal affairs (e.g. shopping, interviewing for a job, visiting friends or relatives, getting a haircut, or finding housing); and

- 3.1.6.2. merely helping the individual with domestic or financial affairs, such as cleaning house or balancing a checkbook.
- 3.1.6.3. having a casual conversation with an individual about the individual's interests or general well being that is not related to service provision or identification of the individual's needs.
- 3.1.7. Assisting the individual in obtaining or maintaining Medicaid eligibility.
- 3.1.8. Training in areas that are not generally recognized to address deficits caused by severe and persistent mental illness or serious emotional disturbance. Examples of such training areas include:
 - 3.1.8.1. cardiopulmonary resuscitation;
 - 3.1.8.2. first aid; and
 - 3.1.8.3. defensive driving;
 - 3.1.8.4. recreational activities such as swimming, horseback riding, and piano lessons.
- 3.1.9. Educational services such as:
 - 3.1.9.1. remedial instruction and tutoring related to academics;
 - 3.1.9.2. preparation for taking a high school equivalency exam; and
 - 3.1.9.3. formal academic classes.
- 3.1.10. Job specific vocational services such as:
 - 3.1.10.1. training on a job specific task;
 - 3.1.10.2. seeking employment for an individual;
 - 3.1.10.3. assisting an individual in completing an application for employment; and
 - 3.1.10.4. prompting an individual to perform a job task when such prompting is not related to a deficit caused by the mental illness.
- 3.1.11. An activity provided as an integral and inseparable part of a service other than an MH Rehabilitative Service. Examples of such activities include:
 - 3.1.11.1. pharmacological management by a physician;
 - 3.1.11.2. a service incidental to a physician's visit;
 - 3.1.11.3. a referral or medical consultation between medical personnel;
 - 3.1.11.4. substance use disorder counseling;
 - 3.1.11.5. development of a treatment plan for other services; and
 - 3.1.11.6. administration of an assessment for other services.
 - 3.1.11.7. A service that specifically addresses an individual's substance use without addressing the impact of the use on the individual's severe and persistent mental illness or serious emotional disturbance.
- 3.1.12. Nursing services except as provided in accordance with §419.462 of the Medicaid MH Rehabilitative Services rule.
- 3.1.13. Requesting a refill of an individual's medication, filling an individual's pill pack, unlocking an individual's medication box, or obtaining or delivering an individual's medication.
- 3.1.14. Any type of counseling or psychotherapy.
- 3.1.15. Admission and pre-admission activities such as:
 - 3.1.15.1. determination of an individual's eligibility for Medicaid MH Rehabilitative Services;

- 3.1.15.2. obtaining demographic information, information about the individual's finances and information about the individual's insurance benefits; and
- 3.1.15.3. completion of admission documentation;
- 3.1.16. Any services provided to a person other than the individual, (e.g. school personnel) except for the services provided to an LAR or primary caregiver in accordance with §419.458 and §419.461 of the Medicaid MH Rehabilitative Services rule.
- 3.1.17. Any skills training provided to an LAR or primary caregiver that does not directly address the child's skill deficits such as:
 - 3.1.17.1. instruction in basic parenting skills;
 - 3.1.17.2. guidance on how to advocate for a child or adolescent; and
 - 3.1.17.3. teaching on how to cope with stress.
- 3.1.18. Skills training provided concurrently with academic instruction.
- 3.1.19. Monitoring of an individual that is not an integral and inseparable part of the provision of an MH Rehabilitative Service. Examples of such monitoring include:
 - 3.1.19.1. assessing the individual's general well-being;
 - 3.1.19.2. assessing the individual's general medical condition;
 - 3.1.19.3. monitoring the self-administration of medications;
 - 3.1.19.4. supervising a child or adolescent; and
 - 3.1.19.5. preventing an individual from hurting self or others.
- 3.1.20. Outreach activities to inform the public of MH Rehabilitative Services that are available or to locate individuals who are potentially Medicaid eligible.
- 3.1.21. Recreational activities.
- 3.1.22. Services provided in transit unless the specific skill being addressed is an identified deficit in accessing or using public transportation.