

Effective 4/3/2006			
SERVICE CODE (with modifier as applicable)	MH/DD/SA ENHANCED BENEFITS SERVICE DESCRIPTION	BILLING UNIT	RATE FOR SERVICE
H0019	Behavioral Health long term residential (HRI Level III - 4 Beds or Less)	per diem	\$ 252.38
H0019	Behavioral Health long term residential (HRI Level III - 5 Beds or More)	per diem	\$ 205.64
H0019	Behavioral Health long term residential (HRI Level IV)	per diem	\$ 342.15
Special Billing Instructions H0019 MH State Services			4/3/06 Rate
H0019	Behavioral Health - Long Tern Residential (HRI Level III - 4 Beds or Less)	/day	205.64*
H0019	Behavioral Health - Long Tern Residential (HRI Level III - 5 Beds or More)	/day	205.64
H0019	Behavioral Health - Long Tern Residential (HRI Level IV)	/day	205.64*
<p>* - Due to HIPAA constraints which require all of the above services be covered under a single code, and IPRS system limitations, all of the above services are being set at the lowest rate as the default rate. Area Programs/LMEs are responsible for submitting to IPRS provider-specific rate requests equal to the equivalent Medicaid service for Level III-4 beds or less (\$252.38) and Level IV (\$342.15)</p>			