

Crisis Intervention – ED Boarding

Policy

Mass General Brigham Health Plan reimburses medical facilities for the provision of medically necessary, crisis intervention services to treat and stabilize to Mass General Brigham Health Plan members awaiting an inpatient acute psychiatric placement in a facility emergency department (ED) or observation setting.

Reimbursement

Providers are reimbursed according to the plan's network provider reimbursement or contracted rates. Claims are subject to payment edits that are updated at regular intervals.

Covered services are defined by the member's benefit plan. How covered services are reimbursed is determined by the Mass General Brigham Health Plan Payment Policy and by the provider's agreement with MASS GENERAL BRIGHAM HEALTH PLAN. Member liability amounts may include but are not limited to copayments; deductible(s); and/or co-insurance; and will be applied dependent upon the member's benefit plan.

Please reference procedure codes from the current CPT, HCPCS Level II, and ICD-10-CM manuals, as recommended by the American Medical Association (AMA), the Centers for Medicare & Medicaid Services (CMS), and the American Hospital Association (AHA). CMS and the AMA revise HIPAA medical codes on a pre-determined basis, including changes to CPT, HCPCS, and ICD-10 codes and definitions.

Please refer to the CMS or CPT guidelines for requisite modifier usage when reporting services. The absence or presence of a modifier may result in differential claim payment or denial.

Mass General Brigham Health Plan reviews claims to determine eligibility for payment. Services considered incidental, mutually exclusive, integral to the primary service rendered, or part of a global allowance, are not eligible for separate reimbursement. Please refer to the [General Coding and Billing PPG](#) for more information.

All claims are subject to audit services and medical records may be requested from the provider.

Mass General Brigham Health Plan's reimbursement is based on the line of business. Unless otherwise specified within the medical policies, please follow the guidelines based on membership type:

Provider Payment Guidelines

MassHealth ACO members:

Mass General Brigham Health Plan will reimburse acute care hospitals for behavioral health crisis evaluation, monitoring, and stabilization services when a member is awaiting appropriate inpatient psychiatric placement from the ED or an observation unit.

- Members must meet inpatient acute psychiatric level of care.
- Hospitals must follow the established Massachusetts EPIA (Expedited Psychiatric Inpatient Admissions) process.
- Facilities should bill S9485 (Crisis intervention mental health services, per diem) on the UB04 outpatient facility claim that includes other ED charges.

Commercial members:

For the duration of the mandate, Mass General Brigham Health Plan will reimburse acute care hospitals for behavioral health crisis evaluation, monitoring, and stabilization services when a member is awaiting appropriate inpatient psychiatric placement from the ED or an observation unit.

- Members must meet inpatient acute psychiatric level of care.
- Hospitals must follow the established Massachusetts EPIA (Expedited Psychiatric Inpatient Admissions) process.
- Facilities should bill S9485 (Crisis intervention mental health services, per diem) on the UB04 outpatient facility claim that includes other ED charges.

Mass General Brigham Health Plan Reimburses

- Medically necessary behavioral health monitoring and stabilization services when billed on a UB 04 outpatient facility claim.

Mass General Brigham Health Plan Does *Not* Reimburse

- BH Crisis teams will not be separately reimbursed, as the payment is included in the reimbursement to the facility.

Provider Payment Guidelines and Documentation

- Submit services on a UB 04 form with revenue code 450 and HCPCS code S9485.

Provider Payment Guidelines

Procedure Codes

Note: Code descriptors modified from the AMA CPT for publishing purposes. This list of codes may not be all-inclusive and can and will change from time to time. Inclusion of a code in this document does not imply or guarantee coverage and/or reimbursement.

Code	Descriptor	Comments
S9485	Crisis intervention mental health services, per diem	May only be billed by medical facility for members awaiting inpatient psychiatric placement from the ED, an observation unit, or a non-psychiatric inpatient floor
450	Emergency Room	Must be coupled with S9485

Related Documents

[Commonwealth of Mass DOI Bulletin 2022-08](#)

[MassHealth MCE Bulletin 93](#)

Publication History

Topic: Crisis Intervention – ED Boarding	Owner: PPDIS Reimbursement Strategy
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November 1, 2022

Original Document

January 1, 2023

Document rebrand

This document is designed for informational purposes only. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization/notification and utilization management guidelines when applicable, adherence to plan policies and procedures, claims editing logic, and provider contractual agreement. In the event of a conflict between this payment guideline and the provider's agreement, the terms and conditions of the provider's agreement shall prevail. Payment policies are intended to assist providers in obtaining Mass General Brigham Health Plan's payment information. Payment policy determines the rationale by which a submitted claim for service is processed and paid. Payment policy formulation takes into consideration a variety of factors including: the terms of the participating providers' contract(s); scope of benefits included in a given member's benefit plan; clinical rationale, industry-standard procedure code edits, and industry-standard coding conventions.

Mass General Brigham Health Plan includes Mass General Brigham Health Plan, Inc., and Mass General Brigham Health Plan Insurance Company.