## STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES MED-QUEST DIVISION PUBLIC NOTICE RELEASE DATE: January 17, 2025

State Plan Amendment (SPA) #24-0011 "Child & Adolescent Mental Health Division (CAMHD) rate increase and modifier updates 2024" was submitted to the Centers for Medicare and Medicaid Services (CMS) on December 27, 2024-Effective December 28, 2024.

There were two state plan sections in Attachment 4.19-B that were amended and submitted to CMS:

- 1. Attachment 4.19-B pg. 8.3a is a housekeeping amendment connected to the approval of SPA 23-0008 and has been amended to reference Attachment 4.19-B pg. 1 for certified peer specialist reimbursement payment methodology.
- 2. Supplement 3 to Attachment 4.19-B pg. 1-6 is specific to the CAMHD Fee Schedule and has been amended to:
  - a. Add increased rates with recommendation from the CAMHD State Fiscal Year (SFY) 2025 Rate Summary.
  - b. Add new "On Track Program" codes (H2040 and H2041), T1019 related to personal care services, description of each code, modifiers to be used, provider type and unit/rate.

This is an Addendum to the Public Notice listed above published on December 27, 2024. May it be known that the following change has been made:

 Supplement 3 to Attachment 4.19-B pg. 1 code H0017 "Behavioral health, residential (HBR) (hospital, residential treatment program), without room and board, per diem" has been reverted back to the original MQD billed rate to CAMHD of \$960.96 instead of \$921.81 submitted with SPA 24-0011.

No other terms of conditions listed in the original public notice has changed.

CODE	DESCRIPTION	MODIFER	PROVIDER TYPE	UNIT	MQD rate billed to CAMHD
40100	Transportation-Ground (car rental not included)				By report
A0140	Transportation-Air Travel	UC-client U1-first family member or attendant <b>No modifier</b> -In State TN Out of State			By report
A0180	Transportation-Lodging for			per diem	By report
A0190	attendant Transportation-Meals for attendant			per diem	By report
H0017	Behavioral health, residential (HBR) (hospital residential treatment program), without room and board, per diem		ALL	Per diem	\$960.96
H0018	Transitional Family Home (TFH)	<b>HK</b> - Bed hold <b>HA</b> - Therapeutic Pass	ALL	Per Diem	\$305.30
H0019	Residential treatment program where stay is typically longer than 30 days), without room and board, per diem Residential treatment for	<b>HK</b> - Bed hold <b>HA</b> - Therapeutic Pass	ALL	Per diem	\$667.00
	adolescents, out-of-state. (CBR OOS)				
H0019	Residential treatment program where stay is typically longer than 30 days), without room and board, per diem Residential treatment for adolescents that have sexually	<pre>U1-Medicaid level of care 1, as defined by each state HA - Bed hold HK - Therapeutic Pass</pre>	ALL	Per diem	\$667.00
	offended; most often court ordered.				
	(CBR1)				
H0019	Residential treatment program where stay is typically longer than 30 days), without room and	<b>U2-</b> Medicaid level of care 2, as defined by each state	ALL	Per diem	\$667.00

	board, per diem	HA - Bed hold			
		<b>HK</b> - Therapeutic Pass			
	Residential treatment for				
	adolescents with sexualized				
	behaviors; not adjudicated				
	(CBR2)				
0019	Residential treatment program		ALL	Per diem	\$667.00
	where stay is typically longer	<b>U3-</b> Medicaid level of			
	than 30 days), without room	care 3, as defined			
	and board, per diem	by each state			
		<b>HA</b> - Bed hold			
	General residential treatment	HK - Therapeutic			
	services	Pass			
	(CBR3)				
0019	Residential treatment program	<b>U4-</b> Medicaid level of	ALL	Per diem	\$236.14
	where stay is typically longer	care 4, as defined			
	than 30 days without room and	by each state			
	board per diem	<b>HA</b> - Bed hold			
	General residential treatment	<b>HK</b> - Therapeutic Pass			
	services				
	(CBR3 SA)				
0019	Residential treatment program	<b>U5-</b> Medicaid level of	ALL	Per diem	\$667.00
	where stay is typically longer	care 5, as defined			
	than 30 days without room and	by each state			
	board per diem	HA - Bed hold			
	Residential treatment services	HK - Therapeutic			
	for girls sex traffic confirmed	Pass			
	and at risk.				
	(CBR3 CSEC)				
0019	Residential treatment program	<b>U6</b> -Medicaid level of	ALL	Per	\$799.35
	where stay is typically longer	care 6, as defined		diem	
	than 30 days without room and	by each state			
	board per diem	<b>HA</b> - Bed hold			
	Residential Crisis Stabilization	HK - Therapeutic Pass			
	Program				
	limited to 30 days.				
	(RCSP)				
0019	Community-Based Residential	U7-Medicaid level of	ALL	Per	\$1008.60
	treatment- where stay is 30-60	care 7 as defined by		diem	
	days and treats youth who do	each state			
	not meet criteria for	<b>HA</b> - Bed hold			
	inpatient acute hospital level	HK - Therapeutic			

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	of care, and are near that	Pass			
	threshold of treatment.				
	Provided in either a hospital				
	or outpatient residential				
	setting.				
	(Subacute)				
Н0035	Intensive Outpatient Hospitalization (IOH)		ALL	Per Diem	\$286.11
	Also known as Partial Hospitalization or day treatment, the youth go from their residence to the program during the day.				
НООЗ6	Community psychiatric supportive treatment face-to- face, per 15min	<u>нр</u> 95	QMHP	15 min	\$41.90
	Intensive In-Home Intervention (IIH)				
H0036	Community psychiatric supportive treatment face-to- face, per 15min	но 95	<b>MHP</b> (Mental Health Professional)	15 min	\$37.99
	Intensive In-Home Intervention (IIH)				
H0036	Community psychiatric supportive treatment face-to- face, per 15min	HN 95	<b>PARA</b> (PARA Professional)	15 min	\$30.20
	Intensive In-Home Intervention (IIH)				
Н0036	Community psychiatric supportive treatment face-to- face, per 15min	НР НЕ 95	QMHP	15 min	\$41.90
	Intensive Independent Living Skills (IILS)				
	The same as above with an emphasis on transition to adulthood.				
Н0036	Community psychiatric supportive treatment face-to-	HO HE	МНР	15 min	\$37.99
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	face, per 15min	95			
	Intensive Independent Living				
	Skills (IILS)				
	The same as above with an				
	emphasis on transition to				
	adulthood.				
H0036	Community psychiatric	HN	PARA-II	15 min	\$30.20
	supportive treatment face-to-	HE			
	face, per 15min	95			
	Intensive Independent Living				
	Skills (IILS)				
	SKIIIS (IILS)				
	The same as above with an				
	emphasis on transition to				
	adulthood.				
Н0036	Community psychiatric	ні	QMHP	15 min	\$43.18
	supportive treatment face-to-	HP	-		
	face, per 15min	95			
	Adaptive Behavioral Intervention				
	(ABI)				
H0036	Community psychiatric	ні	MHP	15 min	\$40.13
	supportive treatment face-to-	но			
	face, per 15min				
		95			
	Adaptive Behavioral Intervention				
	(ABI)			1	<u> </u>
H0036	Community psychiatric	HI	PARA-II	15 min	\$31.93
	supportive treatment face-to-	HN 95			
	face, per 15min	95			
	Adaptive Behavioral Intervention				
	(ABI)				
н0037	Therapeutic Crisis Home (TCH)	1	ALL	Per diem	\$305.30
	Community psychiatric			101 0101	,
	supportive treatment program,				
	per diem				
	-				
	A short-term home for a youth in				
	crisis, often used by CMO.				
H0038	Peer Support Services (PSS)	HA-Child/Adolescent	Cert. peer	15 min	
		program	Specialist		\$25.33
		95			

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H0038	Peer Support Services (PSS)	HB-Adult Program- Non-Geriatric 95	Cert. Peer Specialist	15min	\$25.33
H0045	Therapeutic Respite Home (TRH) A short-term home for respite purposes to protect the long-term home.		ALL		\$305.30
H2011	Crisis Mobile Outreach (CMO)		ALL	15 min	\$27.50
Н2015	Comprehensive Community Support Services (Transitional Support Services-TSS)	НР НО 95	QMHP, MHP	15 min	\$24.15
H2019	Functional Family Therapy (FFT)-Provide coordinated care to multiple or severely handicapped children, per encounter A proprietary evidence-based family therapy model	95	QMHP led team	15 min	\$55.00
H2040	<ul> <li>HI OnTrack program (if at least 6 visits/month) <ul> <li>Individual and Group Psychotherapy</li> <li>Family Education and Support</li> <li>Peer Support</li> <li>Psychopharmacology</li> <li>Care Coordination and Management</li> </ul> </li> </ul>				\$1913.00/month

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H2041	HI OnTrack program ( <b>if less than</b> 6 visits/month)				\$319.00 /encounter
	<ul> <li>Individual and Group Psychotherapy</li> </ul>				
	<ul> <li>Family Education and Support</li> </ul>				
	<ul><li>Peer Support</li><li>Psychopharmacology</li></ul>				
	<ul> <li>Care Coordination and Management</li> </ul>				
H2033	Multisystemic Therapy (MST) A proprietary evidence-based	95 <u>HP</u> , HO, HN	QMHP led team	15min	\$55.00
	family and community-based treatment model.				
T1013	Interpreter Services	95	ALL	15min	\$9.36
T1017	Targeted Case Management (TCM)-case assessment	HA-Child/Adolescent program HP HO 95	QMHP, MHP	15 min	\$9.75
T1017	Targeted Case Management (TCM)- case planning	<pre>U1-Medicaid level of care 1, as defined by each state (tracking modifier "Mental health program") HP HO 95</pre>	QMHP, MHP	15 min	\$9.75
T1017	Targeted Case Management (TCM)- ongoing monitoring	<pre>U2-Medicaid level of care 2, as defined by each state HP HO 95</pre>	QMHP, MHP	15 min	\$9.75

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T1019	Personal care services, per 15	HA	Para I	15min	\$7.78
	minutes, not for an inpatient or				
	resident of a hospital, nursing				
	facility, ICF/MR or IMD, part of				
	the individualized plan of				
	treatment (code may not be used				
	to identify services provide by				
	home health aide or certified				
	nurse assistant				

Modifier	Modifier Description
95	Synchronous telehealth via real-time interactive audio and video
HA	Child/Adolescent Program and Bed Hold
HK	Specialized mental health programs for high-risk populations and Therapeutic Pass
HP	QMHP Doctoral Degree (or no mod)
HO	MHP - Master Degree
HN	PARA - Bachelor Degree
HI	Integrated mental health and intellectual disability/developmental disabilities program
HE	Mental Health Program
HB	Adult Program
U1	Medicaid Level of Care 1
U2	Medicaid Level of Care 2
U3	Medicaid Level of Care 3
U4	Medicaid Level of Care 4
U5	Medicaid Level of Care 5
U6	Medicaid Level of Care 6
<u>U7</u>	Medicaid Level of Care 7

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Child and Adolescent Mental Health Division (CAMHD) Fee Schedule						
CODE	DESCRIPTION	MODIFER	PROVIDER TYPE	UNIT	MQD rate billed to CAMHD	
A0100	Transportation-Ground (car rental not included)				By report	
A0140	Transportation-Air Travel	UC-client U1-first family member or attendant <b>No modifier</b> -In State TN Out of State			By report	
A0180	Transportation-Lodging for attendant			per diem	By report	
A0190	Transportation-Meals for attendant			per diem	By report	
H0017	Behavioral health, residential (HBR) (hospital residential treatment program), without room and board, per diem		ALL	Per diem	\$960.96	
H0018	Transitional Family Home (TFH)	HK - Bed hold HA - Therapeutic Pass	ALL	Per Diem	\$[ <del>211.80</del> ] <u>305.30</u>	
[ <del>H0018</del>	Transitional Family Home (TFH)-Bed Hold	HA - Bedhold	ALL		<del>\$211.80</del>	
H0018	Transitional Family Home (TFH)-Therapeutic Pass	HK - Therapeutic Pass	ALL		<del>\$211.80</del> ]	
H0019	Residential treatment program where stay is typically longer than 30 days), without room and board, per diem	<b>HK</b> - Bed hold <b>HA</b> - Therapeutic Pass	ALL	Per diem	\$[ <del>236.14</del> ] <u>667.00</u>	
	Residential treatment for adolescents, out-of-state. (CBR OOS)					
H0019	Residential treatment program where stay is typically longer than 30 days), without room and board, per diem	<pre>U1-Medicaid level of care 1, as defined by each state HA - Bed hold HK - Therapeutic</pre>	ALL	Per diem	\$[ <del>236.14</del> ] <u>667.00</u>	
	Residential treatment for	Pass				

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## 12/28/2024 [<del>05/01/2022</del>]

TN No.

22-0003 [<del>NEW</del>]

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Supersedes	es Approval Date: Effective		lve Date:	Date:         12/28/2024           [05/01/2022]	
IN NO.	24-0011 [ <del>22-0003</del> ]				
	board per diem	<b>HA</b> - Bed hold			
	than 30 days without room and	by each state		drem	
10019	Residential treatment program where stay is typically longer	<b>U6</b> -Medicaid level of care 6, as defined	ALL	Per diem	\$[ <del>236.14</del> ] <u>799.35</u>
0010	(CBR3 CSEC)	IIC Modionid land of	7) T T	Dorr	61226 141 700 25
	for girls sex traffic confirmed and at risk.	Pass			
	Residential treatment services	<b>HK</b> - Therapeutic			
	board per diem	<b>HA</b> - Bed hold			
	than 30 days without room and	by each state			
H0019	Residential treatment program where stay is typically longer	<b>U5</b> -Medicaid level of care 5, as defined	ALL	Per diem	\$[ <del>236.14</del> ] <u>667.00</u>
	(CBR3 SA)				
	services				
	General residential treatment	<b>HK</b> - Therapeutic Pass			
	board per diem	HA - Bed hold			
	where stay is typically longer than 30 days without room and	by each state			
H0019	Residential treatment program	<b>U4</b> -Medicaid level of care 4, as defined	ALL	Per diem	\$236.14
	(CBR3)				
	services	Pass			
	General residential treatment	<b>HK</b> - Therapeutic			
	and board, per diem	by each state <b>HA</b> - Bed hold			
	than 30 days), without room	care 3, as defined			
	where stay is typically longer	<b>U3-</b> Medicaid level of			
H0019	(CBK2) Residential treatment program		ALL	Per diem	\$[ <del>236.14</del> ] <u>667.00</u>
	(CBR2)				
	adolescents with sexualized behaviors; not adjudicated				
	Residential treatment for	<b>HK</b> - Therapeutic Pass			
	board, per diem	HA - Bed hold			
	where stay is typically longer than 30 days), without room and	care 2, as defined by each state			
H0019	Residential treatment program	<b>U2-</b> Medicaid level of	ALL	Per diem	\$[ <del>236.14</del> ] <u>667.00</u>
	(CBR1)				
	ordered.				
	offended; most often court				

		1	1	1	-11
	Residential Crisis Stabilization	<b>HK</b> - Therapeutic Pass			
	Program				
	limited to 30 days.				
	(RCSP)				
H0019	Community-Based Residential	<u>U7-Medicaid level of</u>	ALL	Per	<u>\$ [<del>236.14</del>]</u>
	treatment- where stay is 30-60	care 7 as defined by		diem	1008.60
	days and treats youth who do	each state			
	not meet criteria for	<b>HA</b> - Bed hold			
	inpatient acute hospital level	HK - Therapeutic			
	of care, and are near that	Pass			
	threshold of treatment.				
	Provided in either a hospital				
	or outpatient residential				
	setting.				
	(Subacute)				
Н0035	Intensive Outpatient		ALL	Per Diem	\$286.11
	Hospitalization (IOH)				
	Also known as Partial				
	Hospitalization or day treatment,				
	the youth go from their residence				
	to the program during the day.				
Н0036	Community psychiatric	НР	OMHP	15 min	\$41.90
<u>110030</u>	supportive treatment face-to-	<u>НР</u> 95	<u><u>v</u>:::::</u>	<u>10 mill</u>	<u> </u>
	face, per 15min	<u>35</u>			
	Intensive In-Home Intervention				
	(IIH)				
н0036	Community psychiatric	НО	MHP (Mental	15 min	\$[ <del>24.15</del> ]37.99
110030	supportive treatment face-to-	95	Health	10 10111	φ[ <del>21:13</del> ] <u>37:33</u>
	face, per 15min	35	Professional)		
	race, per romin		rioiessionai)		
	Intensive In-Home Intervention				
	(IIH)				
нооз6	Communitar normalistada			15 min	<u> </u>
н0036	Community psychiatric	HN	PARA (PARA	10 min	\$[ <del>14.04</del> ] <u>30.20</u>
	supportive treatment face-to-	95	Professional)		
	face, per 15min				
	Intensive In-Home Intervention				
	<u>(IIH)</u>				

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H0036	Community psychiatric supportive treatment face-to- face, per 15min Intensive Independent Living Skills (IILS)	НР НЕ 95	QMHP	15 min	\$[ <del>27.15</del> ] <u>41.90</u>
	The same as above with an emphasis on transition to adulthood.				
H0036	Community psychiatric supportive treatment face-to- face, per 15min Intensive Independent Living Skills (IILS) The same as above with an emphasis on transition to adulthood.	HO HE 95	MHP	15 min	\$[ <del>24.15</del> ] <u>37.99</u>
H0036	Community psychiatric supportive treatment face-to- face, per 15min Intensive Independent Living Skills (IILS) The same as above with an emphasis on transition to adulthood.	HN HE 95	PARA-II	15 min	\$[ <del>14.04</del> ] <u>30.20</u>
H0036	Community psychiatric supportive treatment face-to- face, per 15min Adaptive Behavioral Intervention (ABI)	HI HP 95	QMHP	15 min	\$[ <del>27.15</del> ] <u>43.18</u>
H0036	Community psychiatric supportive treatment face-to- face, per 15min Adaptive Behavioral Intervention (ABI)	ні но <u>95</u>	MHP	15 min	\$[ <del>24.15</del> ] <u>40.13</u>
НООЗ6	Community psychiatric supportive treatment face-to-	HI [HP]HN	PARA-II	15 min	\$[ <del>14.04</del> ] <u>31.93</u>
TN No.	24-0011 [ <del>22-0003</del> ]				
Supersedes			Effective	a Date:	12/28/2024 [ <del>05/01/2022</del> ]
IN No.	22-0003				[ <del>\J/\L/2\22</del> ]

[<del>NEW</del>]

	face, per 15min	<u>95</u>			
	Adaptive Behavioral Intervention (ABI)				
H0037	Therapeutic Crisis Home (TCH) Community psychiatric supportive treatment program, per diem A short-term home for a youth in crisis, often used by CMO.		ALL	Per diem	\$[ <del>228.66</del> ] <u>\$305.30</u>
H0038	Peer Support Services (PSS)	HA-Child/Adolescent program 95	Cert. peer Specialist	15 min	\$[ <del>15.19</del> ] <u>25.33</u>
нооз8	Peer Support Services (PSS)	HB-Adult Program- Non-Geriatric 95	Cert. Peer Specialist	15min	\$[ <del>15.19</del> ] <u>25.33</u>
H0045	Therapeutic Respite Home (TRH) A short-term home for respite purposes to protect the long-term home.		ALL		\$[ <del>211.80</del> ] <u>\$305.30</u>
H2011	Crisis Mobile Outreach (CMO)		ALL	15 min	\$27.50
H2015	Comprehensive Community Support Services (Transitional Support Services-TSS)	НР НО 95	QMHP, MHP	15 min	\$24.15
H2019	Functional Family Therapy (FFT)-Provide coordinated care to multiple or severely handicapped children, per encounter A proprietary evidence-based family therapy model	95	QMHP led team	15 min	\$55.00

TN No.	24-0011 [ <del>22-0003</del> ]			
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TN No.	22-0003 [ <del>NEW</del> ]			

<u>H2040</u>	HI OnTrack program (if at least 6 visits/month)				<u>\$1913.00</u> /month
	• Individual and Group Psychotherapy				
	• Family Education and Support				
	<ul> <li><u>Peer Support</u></li> <li><u>Psychopharmacology</u></li> </ul>				
	• <u>Care Coordination and</u> <u>Management</u>				
<u>H2041</u>	HI OnTrack program (if less than 6 visits/month)				<u>\$319.00</u> /encounter
	• <u>Individual and Group</u> Psychotherapy				
	• Family Education and Support				
	<ul><li><u>Peer Support</u></li><li>Psychopharmacology</li></ul>				
	<u>Care Coordination and</u> <u>Management</u>				
Н2033	Multisystemic Therapy (MST)	95 HP,HO,HN	QMHP led team	15min	\$[ <del>50.00</del> ] <u>55.00</u>
	A proprietary evidence-based family and community-based treatment model.				
T1013	Interpreter Services	95	ALL	15min	\$9.36
T1017	Targeted Case Management (TCM)-case assessment	HA-Child/Adolescent program HP HO 95	QMHP, MHP	15 min	\$9.75
T1017	Targeted Case Management (TCM)- case planning	<b>U1</b> -Medicaid level of care 1, as defined by each state (tracking modifier	QMHP, MHP	15 min	\$9.75
TN No.	24-0011 [ <del>22-0003</del> ]				
Supersedes	Approval Date:		Effective	Date:	12/28/2024 [ <del>05/01/2022</del> ]
TN No.	22-0003 [ <del>NEW</del> ]				

		"Mental health program") HP HO <b>95</b>			
T1017	Targeted Case Management (TCM)- ongoing monitoring	<pre>U2-Medicaid level of care 2, as defined by each state HP HO 95</pre>	QMHP, MHP	15 min	\$9.75
<u>T1019</u>	Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code may not be used to identify services provide by home health aide or certified nurse assistant	HA	<u>Para I</u>	<u>15min</u>	<u>\$7.78</u>

Modifier	Modifier Description
95	Synchronous telehealth via real-time interactive audio and video
HA	Child/Adolescent Program and Bed Hold
HK	Specialized mental health programs for high-risk populations and Therapeutic Pass
HP	QMHP Doctoral Degree (or no mod)
HO	MHP - Master Degree
HN	PARA - Bachelor Degree
HI	Integrated mental health and intellectual disability/developmental disabilities program
HE	Mental Health Program
HB	Adult Program
U1	Medicaid Level of Care 1
U2	Medicaid Level of Care 2
U3	Medicaid Level of Care 3
U4	Medicaid Level of Care 4
U5	Medicaid Level of Care 5
U6	Medicaid Level of Care 6
<u>U7</u>	Medicaid Level of Care 7

TN No.	24-0011 [ <del>22-0003</del> ]		
Supersedes	Approval Date:	Effective Date:	12/28/2024 [ <del>05/01/2022</del> ]
TN No.	22-0003 [ <del>NEW</del> ]	7	