


<b>ISSUE DATE</b>  <p style="text-align: center;">May 26, 2020</p>	<b>EFFECTIVE DATE</b>  <p style="text-align: center;">May 26, 2020</p>	<b>NUMBER</b>  <p style="text-align: center;">01-20-06, 08-20-08, 09-20-03, 23-20-01, 31-20-03</p>
<b>SUBJECT</b>  <p style="text-align: center;">Updates to Childhood Nutrition and Weight Management Services</p>		<b>BY</b>    <p style="text-align: center;">Sally A. Kozak, Deputy Secretary Office of Medical Assistance Programs</p>

**IMPORTANT REMINDER:** All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years. Providers should log into PROMISe to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the revalidation dates. Enrollment (revalidation) applications may be found at: <https://www.dhs.pa.gov/providers/Providers/Pages/PROMISe-Enrollment.aspx>.

## **PURPOSE:**

The purpose of this bulletin is to notify providers enrolled in the Medical Assistance (MA) Program of changes to Childhood Nutrition and Weight Management Services (CNWMS) for MA beneficiaries under 21 years of age as a result of the 2020 Healthcare Common Procedure Coding System updates.

## **SCOPE:**

This MA bulletin applies to all physicians, Certified Registered Nurse Practitioners (CRNPs), nutritionists, outpatient hospitals, independent medical surgical clinics, Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) enrolled in the MA Program. Providers who render services in the managed care delivery system should address any payment-related questions regarding CNWMS to the appropriate MA managed care organization.

## **BACKGROUND:**

CNWMS consist of the following services: initial assessment, re-assessment, individual weight management counseling, family weight management counseling, group weight management counseling and nutritional counseling. The Department encourages providers to ensure that the child has had a recent Early and Periodic Screening, Diagnosis and Treatment (EPSDT) screening or physical exam, as appropriate, to help support the medical necessity for

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

The appropriate toll-free number for your provider type.

Visit the Office of Medical Assistance Programs website at:

<https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/Contact-Information-for-Providers.aspx>

the initial assessment, re-assessment and any additional CNWMS the child receives. Primary care providers or other providers who conduct the initial assessment or re-assessment and order CNWMS for the child are encouraged to coordinate with the provider rendering those services.

**DISCUSSION:**

The Department issued MA Bulletin 99-20-02, “2020 Healthcare Common Procedure Coding System Updates”, to announce changes to the MA Program Fee Schedule, effective May 26, 2020. The tables below outline the CNWMS codes that were end-dated or added to the MA Program Fee Schedule, effective May 26, 2020.

<b>End-dated Procedure Codes</b>				
96150	96151	96152	96153	96154

<b>Added Procedure Codes</b>				
96156	96158	96159	96164	96165
96167	96168			

**PROCEDURE:**

The Department will make payment to physicians, CRNPs, nutritionists, outpatient hospitals, independent medical surgical clinics, FQHCs and RHCs enrolled in the MA Program for specific CNWMS when the services are medically necessary and rendered to MA beneficiaries under 21 years of age who are experiencing weight management problems. Providers must document the medical necessity for any CNWMS in the child’s medical record, in accordance with 55 Pa. Code § 1101.51 (relating to ongoing responsibilities of providers).

Providers should refer to the updated chart attached to this bulletin for services rendered on and after May 26, 2020.

**SUPERCEDE:**

MA Bulletin 01-18-09 08-18-10 09-18-10 16-18-01 23-18-01 31-18-10, titled, “Childhood Nutrition and Weight Management Services”, issued July 3, 2018, is superseded with the issuance of this bulletin.

**ATTACHMENT:**

Medical Assistance Program Fee Schedule – Childhood Nutrition and Weight Management Services

Childhood Nutrition and Weight Management Services  
MA Program Fee Schedule Updates  
Effective May 26, 2020

Procedure Code	Description	Provider Type	Specialty	Place of Service	Pricing Modifier	Info Modifier	MA Fee	MA units	Limits	Prior Auth
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	01	183	22	U5	TJ	\$61.14	per assessment	once per day	No
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	01	183	22		TJ	\$39.88	per reassessment	once per day	No
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	08	082	49	U5	TJ	\$61.14	per assessment	once per day	No
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	08	082	49		TJ	\$39.88	per reassessment	once per day	No
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	09	All	11, 12, 99	U5	TJ	\$61.14	per assessment	once per day	No
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	09	All	11, 12, 99		TJ	\$39.88	per reassessment	once per day	No
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	31	All	11, 12, 99	U5	TJ	\$61.14	per assessment	once per day	No
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	31	All	11, 12, 99		TJ	\$39.88	per reassessment	once per day	No

Procedure Code	Description	Provider Type	Specialty	Place of Service	Pricing Modifier	Info Modifier	MA Fee	MA units	Limits	Prior Auth
96158	Health behavior intervention, individual, face-to-face; initial 30 minutes	01	183	22	U3	TJ	\$39.20	initial 30 minutes	once per day	No
96158	Health behavior intervention, individual, face-to-face; initial 30 minutes	08	082	49	U3	TJ	\$39.20	initial 30 minutes	once per day	No
96158	Health behavior intervention, individual, face-to-face; initial 30 minutes	09	All	11, 12, 99	U3	TJ	\$39.20	initial 30 minutes	once per day	No
96158	Health behavior intervention, individual, face-to-face; initial 30 minutes	31	All	11, 12, 99	U3	TJ	\$39.20	initial 30 minutes	once per day	No
96159	Health behavior intervention, individual, face-to-face; each additional 15 minutes ( <b>List separately in addition to code for primary service</b> )	01	183	22	U3	TJ	\$19.60	per 15 minutes	four per day	No
96159	Health behavior intervention, individual, face-to-face; each additional 15 minutes ( <b>List separately in addition to code for primary service</b> )	08	082	49	U3	TJ	\$19.60	per 15 minutes	four per day	No
96159	Health behavior intervention, individual, face-to-face; each additional 15 minutes ( <b>List separately in addition to code for primary service</b> )	09	All	11, 12, 99	U3	TJ	\$19.60	per 15 minutes	four per day	No
96159	Health behavior intervention, individual, face-to-face; each additional 15 minutes ( <b>List separately in addition to code for primary service</b> )	31	All	11, 12, 99	U3	TJ	\$19.60	per 15 minutes	four per day	No
96164	Health behavior intervention, group (2 or more patients), face-to-face; initial 30 minutes	01	183	22		TJ	\$8.94	initial 30 minutes	once per day	No

Procedure Code	Description	Provider Type	Specialty	Place of Service	Pricing Modifier	Info Modifier	MA Fee	MA units	Limits	Prior Auth
96164	Health behavior intervention, group (2 or more patients), face-to-face; initial 30 minutes	08	082	49		TJ	\$8.94	initial 30 minutes	once per day	No
96164	Health behavior intervention, group (2 or more patients), face-to-face; initial 30 minutes	09	All	11, 12, 99		TJ	\$8.94	initial 30 minutes	once per day	No
96164	Health behavior intervention, group (2 or more patients), face-to-face; initial 30 minutes	31	All	11, 12, 99		TJ	\$8.94	initial 30 minutes	once per day	No
96165	Health behavior intervention, group (2 or more patients), face-to-face; each additional 15 minutes <b>(List separately in addition to code for primary service)</b>	01	183	22		TJ	\$3.95	per 15 minutes	six per day	No
96165	Health behavior intervention, group (2 or more patients), face-to-face; each additional 15 minutes <b>(List separately in addition to code for primary service)</b>	08	082	49		TJ	\$3.95	per 15 minutes	six per day	No
96165	Health behavior intervention, group (2 or more patients), face-to-face; each additional 15 minutes <b>(List separately in addition to code for primary service)</b>	09	All	11, 12, 99		TJ	\$3.95	per 15 minutes	six per day	No
96165	Health behavior intervention, group (2 or more patients), face-to-face; each additional 15 minutes <b>(List separately in addition to code for primary service)</b>	31	All	11, 12, 99		TJ	\$3.95	per 15 minutes	six per day	No
96167	Health behavior intervention, family (with the patient present), face-to-face; initial 30 minutes	01	183	22		TJ	\$37.18	initial 30 minutes	once per day	No
96167	Health behavior intervention, family (with the patient present), face-to-face; initial 30 minutes	08	082	49		TJ	\$37.18	initial 30 minutes	once per day	No

Procedure Code	Description	Provider Type	Specialty	Place of Service	Pricing Modifier	Info Modifier	MA Fee	MA units	Limits	Prior Auth
96167	Health behavior intervention, family (with the patient present), face-to-face; initial 30 minutes	09	All	11, 12, 99		TJ	\$37.18	initial 30 minutes	once per day	No
96167	Health behavior intervention, family (with the patient present), face-to-face; initial 30 minutes	31	All	11, 12, 99		TJ	\$37.18	initial 30 minutes	once per day	No
96168	Health behavior intervention, family (with the patient present), face-to-face; each additional 15 minutes <b>(List separately in addition to code for primary service)</b>	01	183	22		TJ	\$18.59	per 15 minutes	six per day	No
96168	Health behavior intervention, family (with the patient present), face-to-face; each additional 15 minutes <b>(List separately in addition to code for primary service)</b>	08	082	49		TJ	\$18.59	per 15 minutes	six per day	No
96168	Health behavior intervention, family (with the patient present), face-to-face; each additional 15 minutes <b>(List separately in addition to code for primary service)</b>	09	All	11, 12, 99		TJ	\$18.59	per 15 minutes	six per day	No
96168	Health behavior intervention, family (with the patient present), face-to-face; each additional 15 minutes <b>(List separately in addition to code for primary service)</b>	31	All	11, 12, 99		TJ	\$18.59	per 15 minutes	six per day	No
S9470	Nutritional counseling, dietitian visit	01	183	22	U3	TJ	Encounter Rate	per visit	1 visit per day	No
S9470	Nutritional counseling, dietitian visit	23	230	11, 12, 99	U3	TJ	Encounter Rate	per visit	1 visit per day	No
T1015	<b>*** Clinic visit defined as=</b> Health behavior <b>assessment</b> (ie, health-focused clinical interview, behavioral observations, clinical decision making)	08	080	50		TJ	Encounter Rate	per visit	minimum of 30 minutes	No
T1015	<b>*** Clinic visit defined as=</b> Health behavior <b>assessment</b> (ie, health-focused clinical interview, behavioral observations, clinical decision making)	08	081	72		TJ	Encounter Rate	per visit	minimum of 30 minutes	No

Procedure Code	Description	Provider Type	Specialty	Place of Service	Pricing Modifier	Info Modifier	MA Fee	MA units	Limits	Prior Auth
T1015	*** <b>Clinic visit defined as=</b> Health behavior re- <b>assessment</b> (ie, health-focused clinical interview, behavioral observations, clinical decision making)	08	080	50		TS	Encounter Rate	per visit	minimum of 15 minutes	No
T1015	*** <b>Clinic visit defined as=</b> Health behavior re- <b>assessment</b> (ie, health-focused clinical interview, behavioral observations, clinical decision making)	08	081	72		TS	Encounter Rate	per visit	minimum of 15 minutes	No
T1015	*** <b>Clinic visit defined as=</b> Health behavior intervention, <b>individual</b> , face-to-face	08	080	50		TJ, TS	Encounter Rate	per visit	minimum of 30 minutes	No
T1015	*** <b>Clinic visit defined as=</b> Health behavior intervention, <b>individual</b> , face-to-face	08	081	72		TJ, TS	Encounter Rate	per visit	minimum of 30 minutes	No
T1015	*** <b>Clinic visit defined as=</b> Health behavior intervention, <b>group</b> (2 or more patients), face- to-face;	08	080	50		TT	Encounter Rate	per visit	minimum of 30 minutes	No
T1015	*** <b>Clinic visit defined as=</b> Health behavior intervention, <b>group</b> (2 or more patients), face- to-face;	08	081	72		TT	Encounter Rate	per visit	minimum of 30 minutes	No
T1015	*** <b>Clinic visit defined as=</b> Health behavior intervention, <b>family</b> (with the patient present), face-to-face	08	080	50		HR	Encounter Rate	per visit	minimum of 30 minutes	No
T1015	*** <b>Clinic visit defined as=</b> Health behavior intervention, <b>family</b> (with the patient present), face-to-face	08	081	72		HR	Encounter Rate	per visit	minimum of 30 minutes	No
T1015	*** <b>Clinic visit defined as=</b> Nutritional Counseling, dietitian visit	08	080	50		AE	Encounter Rate	per visit	1 visit per day	No
T1015	*** <b>Clinic visit defined as=</b> Nutritional Counseling, dietitian visit	08	081	72		AE	Encounter Rate	per visit	1 visit per day	No