

Acentra Health Maine ASO
Certified Community Behavioral Health Clinic Service Grid
March 1, 2025

Legend Referral: Administrative Submission to initiate waitlist monitoring/tracking Initial Registration: Clinical review for duplication and non-concurrent only Continued Stay Review: Requests for continuation of care SMI Termination Requests: Request to terminate services for members who have a serious mental illness (SMI) Discharge Review: Required for all services on the last date of service Critical Incident: Requires submission to report a serious event that creates a significant risk of harm to clients, jeopardizes public safety or program integrity														
Service Name	Procedure/ Service Code	Code Modifier	Code Modifier	Code Modifier	Billing Unit	Referral	Critical Incident	Initial Registration	Continued Stay Review	SMI Termination	Discharge Review	Auth Period Days	Auth Unit Default	Maximum Continued Stay Period Days
Point In Time Service Encounters														
Certified Community Behavioral Health Clinic	T1041	Q2			Monthly			X	X			60	1	180
Care Team Meetings with Client and/or Caregiver	99366				Monthly			X	X			60	1	180
Transitional Care Services	99495				Monthly			X	X			60	1	180
Health Promotion	99402				Monthly			X	X			60	1	180
Walk-in encounters for crisis reponse	90839				Monthly			X	X			60	1	180
Pharmacy Consultation	99605				Monthly			X	X			60	1	180
Interprofessional Psychiatric Consultation	99447				Monthly			X	X			60	1	180
Assessment Encounters														
Initial Assessment	90791				Monthly			X	X			60	1	180
Comprehensive Assessment	90792				Monthly			X	X			60	1	180
Outpatient Encounters														
Outpatient Clinical Services: Individual and Family Therapy Mental Health	90832				Monthly			X	X			60	1	180
Outpatient Clinical Services: Individual and Family Therapy Substance Use	H0022				Monthly			X	X			60	1	180
Outpatient Clinical Services: Individual and Family Therapy Co-Occurring	H0022	HH			Monthly			X	X			60	1	180
Outpatient Clinical Services: Co-Occurring Capable Group Therapy	90853				Monthly			X	X			60	1	180
Medication Management Encounters														
Medication Management, Psychiatric	H0034				Monthly			X	X			60	1	180
Medication Management, Substance Use	H0034	HF			Monthly			X	X			60	1	180
Case Management Encounters														
Case Management	T2023				Monthly			X	X			60	1	180
Case Managmeent, Adults with SMI	T2023	HE			Monthly	X		X	X	X	X	60	1	180
Case Management, High Fidelity Wraparound	T2023	HK			Monthly			X	X			60	1	180
Assertive Community Treatment, Adult	H0039				Monthly	X		X	X	X	X	60	1	180
Assertive Community Treatment, Child	H0037				Monthly			X	X			60	1	180
Peer Support Encounters														
Recovery Coaching	H0023				Monthly			X	X			60	1	180
Peer-led Support and Recovery Groups	H0038	HQ			Monthly			X	X			60	1	180
Peer Support for Adults	H0038				Monthly			X	X			60	1	180
Peet Support for Family	H0038	HS			Monthly			X	X			60	1	180
Peer Support for Youth	H0038	TJ			Monthly			X	X			60	1	180
Intensive Outpatient (IOP) Encounters														
IOP Substance Use	H0022	HF			Monthly			X	X			60	1	180
IOP Mental Health	H0022	HE			Monthly			X	X			60	1	180
IOP Dev, Disabilities/Behavioral health	H0022	HI			Monthly			X	X			60	1	180
IOP Geriatric	H0022	HC			Monthly			X	X			60	1	180
IOP Dialectical Behavior Therapy	H0022	HK			Monthly			X	X			60	1	180
IOP Eating Disorder, Level 1	H0022	HT			Monthly			X	X			60	1	180
IOP Eating Disorder, Level 2	H0022	HT	AT		Monthly			X	X			60	1	180
Other														
Individualized Treatment Plan	99367				Monthly			X	X			60	1	180
Individual Placement and Support-Supported Employment (IPS SE)	H2024				Monthly			X	X			60	1	180
Ambulatory Withdrawal Management	H0007				Monthly			X	X			60	1	180
Clubhouse	H2031				Monthly			X	X			60	1	180
Multisystemic Therapy (MST)	H2022				Monthly			X	X			60	1	180
Multisystemic Therapy-Problem Sexualized Behavior (MST-PSB)	H2022	Q2			Monthly			X	X			60	1	180
Family Functional Therapy (FFT)	H2022	HK			Monthly			X	X			60	1	180
Home, Community, or School Youth Services, Not Otherwise Specified	H0046				Monthly			X	X			60	1	180
Community Rehabilitation Services	H2016				Monthly			X	X			60	1	180
Cooridnated Specialty Care	H2041				Monthly			X	X			60	1	180
Critical Incident														
Critical Incident Level 1	100-600				CASE		X					1	1	N/A
Critical Incident Level 2	100-700				CASE		X					1	1	N/A