



Provider Memorandum

Notice Regarding NextLevel Health DASA and Behavioral Health Services Authorization Requirements for ALL providers, regardless of network participation status.

Dear Provider:

Please be aware that as of 12/15/18, the services below **do not** require Pre-Authorization:

DASA Service Name	ASAM Level(s)	Billing Code	Prior Auth
Admission and Discharge Assessment	All levels	H0002	N
Psychiatric Evaluation	All levels	90791	N
Medication Administration	All levels	H0020	N
Individual - Therapy/Counseling, Substance Abuse	Level I	H0004	N
Group - Therapy/Counseling, Substance Abuse	Level I	H0005	N
Individual - Intensive Outpatient, Substance Abuse	Level II	H0004	N
Group - Intensive Outpatient, Substance Abuse	Level II	H0005	N
Rehabilitation - Adult (age 21+)	Level III.5	H0047	N
Rehabilitation - Child (age 20 or under)	Level III.5	H0047	N
Adolescent Residential	Level III.5	H2036	N
Detoxification	Level III.7D	H0010	N

Community Mental Health Centers (CMHC) Billing	Billing Code	Prior Auth
Therapy/Counseling Services		
Individual - Group Therapy	H0004	N
Crisis Services		
Crisis Intervention	H2011	N
Crisis Stabilization	T1019	N
Mobile Crisis Response	S9484	N
General Medicaid Rehabilitation Option Services		
Community Support – Individual	H2015	N
Community Support – Group	H2015	N
Community Support – Team	H2015	N
Community Support – Residential Individual	H2015	N



Community Support – Residential Group	H2015	N
Mental Health Intensive Outpatient	S9480	N
Medication Administration	T1502	N
Medication Monitoring	H2010	N
Medication Training	H0034	N

Community Mental Health Centers (CMHC) Billing	Billing Code	Prior Auth
Target Case Management		
Case Management – Mental Health	T1016	N
Case Management – Transition Linkage and Aftercare	T1016	N
Case Management – Mandated Follow-Up	T1016	N
Case Management – Client Consult	T1016	N
Assessment and Treatment Planning		
Integrated Assessment and Treatment Planning (IATP)	H2000	N
IATP: Psychological Assessment	H2000	N
IATP: LOCUS Assessment	H2000	N
Family Support Program (FSP) Services		
FSP Application Assistance	G9012	N
FSP Clinical Case Participation	T1016	N
FSP Therapeutic Support Services	H0046	N
Behavioral Health Screening Services		
Developmental Screening	96110	N
Developmental Testing	96111	N
Mental Health Risk Assessment	96127	N
Prenatal Care At-Risk Assessment	H1000	N

Questions may be directed to: ProviderRep.Webex@NLHpartners.com

Thank you,

Provider Services.