

Behavioral health outpatient treatment specialty 301 (Qualified Mental Health Associate): limitation for code H0034

Limitation for code H0034

The limitation for procedure code H0034 (medication training and support, per 15 minutes) is two units per calendar month, per recipient. Prior authorization (PA) is required to exceed the limitation. Effective with claims submitted on or after May 20, 2019, claims submitted by provider type 14, behavioral health outpatient treatment specialty 301 (Qualified Mental Health Associate [QMHA]), that exceed limitation without PA will be denied.

The billing guide for provider type 14 has been updated with the limitation, and billing instructions to use modifier TD to indicate the service was provided by a registered nurse QMHA (*Billing Guide Provider Type 14, Specialty 301*).

Medication training and support (procedure code H0034) is only medically necessary and appropriate if the recipient is receiving prescription medication(s). Most medication issues would arise within 30 days of beginning the medication.

Behavioral health

Fax all requests for services requiring precertification to:

- Inpatient: **1-877-434-7578**
- Outpatient: **1-800-505-1193**

Contact us

If you have questions or need assistance, please contact your Provider Relations representative or contact Provider Services:

- Phone: **1-844-396-2330**
- Email: nv1-providerservices@anthem.com

Reference

- *Billing Guide Provider Type 14*,
https://www.medicaid.nv.gov/Downloads/provider/NV_BillingGuidelines_PT14.pdf
- *Web Announcement Nevada Medicaid 1897*,
https://www.medicaid.nv.gov/Downloads/provider/web_announcement_1897_20190517.pdf

<https://mediproviders.anthem.com/nv>