



STATE OF MICHIGAN  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

GRETCHEN WHITMER  
GOVERNOR

ROBERT GORDON  
DIRECTOR

April 7, 2020

TO: Executive Directors of Prepaid Inpatient Health Plans and  
Community Mental Health Services Programs

FROM: Jeffery L. Wieferich, MA, LLP, Director *JW*  
Bureau of Community Based Services  
Behavioral Health and Developmental Disabilities Administration

Re: Clarification of Rounding Rules for Behavioral Health Services during COVID-19  
Crisis

This communication is intended to clarify and supplant the 4/3/20 "Rounding Rules for Behavioral Health Services" memo. It is recognized that there are challenges in providing services using telephone and other telecommunication devices during the COVID-19 emergency. Telecommunication appointments with the consumer may be as brief as five minutes as individuals may be uncomfortable with speaking on the phone/computer or might be hesitant to use up their pre-paid telephone minutes or limited data plans.

To accommodate reporting and billing of brief contacts with the consumer we are implementing the following **for the first 15 minutes of a service reported in 15-minute units, provided through telemedicine:**

Telemedicine services dated 3/2/20 or later that were not billable or encounterable due to totaling 1-14 minutes can be billed/reported to CMHSPs/PIHPs and submitted to MDHHS as encounters by PIHPs. Telemedicine services that have already been billed, reported or encountered do not need to be modified, voided, and resubmitted.

Under this expanded policy, a service may be billed for at least 1 unit if **all** of the following criteria are met:

1. The service is provided through telemedicine; and
2. The amount of direct service time (i.e., time spent interacting with a consumer over telephone or telehealth platform) is at least 1 minute.

For clarification, this temporary policy reduces the minimum threshold for the first unit of 15-minute services provided via telemedicine. Service times will otherwise continue to use standard rounding rules and unit counting. Therefore, under these expanded rules, a service that is billable or reportable using a 15-minute HCPCS code with a total duration of 1-29 minutes will count as 1 unit, and services with a total duration of 30-44 minutes will count as 2 units, etc. Likewise, a service reportable using a 15-minute CPT code with a total duration of 1-22 minutes will count as 1 unit, and services with a total duration of 23-37 minutes will count as 2 units, etc.

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This reporting change only applies to specialty behavioral health services that are provided as directed within in the COVID-19 Encounter Code Chart which temporarily removed the face-to-face requirement for certain services. This reporting change will be in effect for 30 days following the termination of the Governor's Declaration of a State of Emergency Order (2020-04, COVID-19), or on the first of the following month, whichever is later.

cc: Allen Jansen  
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