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MEDICAID BULLETIN

TO: Hospital Providers

SUBJECT: Addition of Hospital-based Crisis Stabilization Services

Effective Jan. 1, 2024, the South Carolina Department of Health and Human Services (SCDHHS) will add coverage for hospital-based crisis stabilization services rendered to Healthy Connections Medicaid members. These services will be available for reimbursement to hospitals that have constructed, or are constructing, behavioral health emergency units for crisis stabilization separate from the hospital's general emergency department. This initiative originated through an [SCDHHS grant](#) that awarded \$45.5 million in infrastructure funds in June 2023 to build these specialized units.

The changes announced in this bulletin will be added to the [Hospital Services provider manual](#) by Jan. 1, 2024. The investment in crisis stabilization services for individuals experiencing behavioral health episodes, such as mental health and/or substance use emergencies, is part of SCDHHS' broader emphasis on improving access to and coordination of behavioral health services in South Carolina.

Hospital-based Crisis Stabilization Services Information

For individuals experiencing a behavioral health crisis, hospital-based crisis stabilization services will provide needed intervention in a calm, safe and healing environment tailored to the individuals' behavioral health needs and include the following:

- Crisis stabilization for those experiencing mental health crisis or substance use issues with or without co-occurring mental health disorders;
- Services offered with a "no wrong door" philosophy and designed and staffed to treat all emergency psychiatric conditions;
- Services that provide a care alternative to general emergency departments, inpatient admissions or use of law enforcement resources;
- Provision of psychiatric evaluation, diagnosis and initiation of treatment, to include the following:



- Mental health assessment, stabilization and treatment; and referral for substance use disorder/chemical dependency;
- Suicide prevention (e.g., risk screening, assessment and safety planning);
- Medication induction; and
- Proactive discharge planning.
- Comprehensive services through a multidisciplinary behavioral health team with a warm hand-off to the appropriate resources for continued treatment; and
- A multidisciplinary team approach that may include the following professionals:
 - Psychiatrists
 - Registered nurses
 - Social workers
 - Psychiatric assistants
 - Psychiatric nurse practitioners
 - Peer support specialists

Provider Requirements

In order to be eligible for reimbursement by SCDHHS, crisis stabilization services must be provided in specialized hospital-based emergency departments and observational units dedicated to behavioral health. These units must be designed, constructed and operated in accordance with all applicable laws and regulations and:

- Adhere to an Emergency Psychiatric Assessment, Treatment & Healing (EmPATH) philosophy ([National Guidelines for Behavioral Health Crisis Care](#));
- Be located on the contiguous hospital campus grounds and linked to the emergency department for initial intake and/or referral;
- Contain a large, climate-controlled space to serve as a therapeutic environment;
- Provide separate adult and pediatric beds, bays or spaces;
- Provide rapid evaluation and comprehensive treatment planning by a psychiatrist or psychiatric prescribing provider;
- Ensure access to clinical and nursing staff in the milieu;
- Provide a dedicated, calming environment with a mix of recliners and open spaces with patient rooms for use based upon acuity; and
- Maintain a detailed behavioral health staff training plan.

Procedure Codes and Rates for Services

Hospital-based crisis stabilization will utilize an hourly rate (for patients who are stabilized and discharged prior to 24 hours) or a per diem (for a length of stay at or beyond 24 hours). Hourly and per diem rates may not be billed for the same episode of care. The following procedure codes and rates apply.

Procedure Code	Description	Rate
S9484	Brief psychiatric emergency, per hour, up to 23 hours, limit 23 hours per patient, per crisis episode	\$38.17 per hour
S9485	Extended psychiatric emergency, per diem, limit 3 per patient per crisis episode	\$458 per diem

South Carolina’s Healthy Connections Medicaid managed care organizations (MCOs) are responsible for the coverage and reimbursement of services described in this bulletin for members who are enrolled in an MCO.

The hospitals who were awarded infrastructure grant funding and are eligible for reimbursement of hospital-based crisis stabilization services by SCDHHS should refer to the additional billing and enrollment instruction from SCDHHS. Providers should direct any questions related to this bulletin to the Provider Service Center (PSC) at (888) 289-0709 or to behavioralhealth004@scdhhs.gov. The PSC’s hours of operations are 7:30 a.m.-5 p.m. Monday-Thursday and 8:30 a.m.-5 p.m. Friday.

Resources Providers Can Use to Help with Medicaid Member Annual Reviews

As SCDHHS continues its federally required review of Medicaid member eligibility, a process frequently referred to as “unwinding,” it is reminding providers of resources available to them that can help with this process. SCDHHS has produced several member-facing communications and marketing items and is encouraging providers to post its “submit your review, when it’s time to renew” flyer in patient-facing areas. The flyer is available for download from SCDHHS’ website in [English](#) and in [Spanish](#) along with other [provider resources](#) on [SCDHHS’ annual reviews website](#).

The Centers for Medicare and Medicaid Services have also produced outreach and educational resources about this process that are [available on their website](#).

Thank you for your continued support of the South Carolina Healthy Connections Medicaid program.

/s/
Robert M. Kerr