January 22, 2004

MONTANA MENTAL HEALTH SERVICES PLAN NOTICE

Lab and Radiology Services Covered under the Mental Health Services Plan (MHSP)

SERVICES:
The Department of Public Health and Human Services has allowed a limited laboratory and radiology benefit to the package of services available to individuals eligible for the Mental Health Services Plan (MHSP). This is a program for low-income individuals who do not qualify for Medicaid but have a severe mental illness. Services are limited to the treatment of the individual's mental health diagnosis.

REIMBURSEMENT:
Please see your specific program's provider manual for information on reimbursement for laboratory and radiology services. Lab and radiology services may be provided by a physician, mid-level practitioner, hospital , or laboratory provider. Current fee schedules may be obtained from ACS Provider Relations, P. O. Box 8000, Helena, MT 59604, or at www.mtmedicaid.org.

Effective October 1, 2003 the Department has contracted with several community mental health centers to provide mental health services, including lab services, to adults (18 years of age and older) who are covered under MHSP. Providers of lab services must establish agreements with the mental health centers(s) to provide services and then bill those services to the mental health center(s). This policy will continue until further notice.

SERVICE CODES:
Beginning on page 2 of this notice is a list of the radiology and laboratory procedure codes that are eligible for reimbursement under the Mental Health Services Plan.

DIAGNOSIS CODES:
Coverage for Montana Mental Health Services Plan services will be strictly limited to treatment provided for the principal diagnoses listed below. Claims submitted with a principal diagnosis other than one listed as covered will be denied under the MHSP. All claims are subject to retrospective review for diagnostic accuracy.

290.0 through 290.9	293.0 through 301.9
302.2	302.4
302.6	302.84 through 302.89
306.0 through 306.9	307.1 through 307.3
307.46	307.50 through 307.80
307.82 through 312.30	312.32 through 314.9
316	V71.01 and V71.02
V71.09	

If you have any questions or require additional information please contact Provider Relations at:

Helena & Out-of-State:	406-442-1837
In-State Toll Free:	800-624-3958

RADIOLOGY AND LABORATORY PROCEDURES COVERED UNDER THE MENTAL HEALTH SERVICES PLAN

PROC	MODIFIER	DESCRIPTION
70240		X-RAY EXAM, PITUITARY SADDLE
70240	TC	X-RAY EXAM, PITUITARY SADDLE
70240	26	X-RAY EXAM, PITUITARY SADDLE
70250		X-RAY EXAM OF SKULL
70250	TC	X-RAY EXAM OF SKULL
70250	26	X-RAY EXAM OF SKULL
70260		X-RAY EXAM OF SKULL
70260	TC	X-RAY EXAM OF SKULL
70260	26	X-RAY EXAM OF SKULL
70450		CT HEAD/BRAIN W/O DYE
70450	TC	CT HEAD/BRAIN W/O DYE
70450	26	CT HEAD/BRAIN W/O DYE
70460		CT HEAD/BRAIN W/DYE
70460	TC	CT HEAD/BRAIN W/DYE
70460	26	CT HEAD/BRAIN W/DYE
70470		CT HEAD/BRAIN W/O & W/DYE
70470	TC	CT HEAD/BRAIN W/O & W/DYE
70470	26	CT HEAD/BRAIN W/O & W/DYE
70480		CT ORBIT/EAR/FOSSA W/O DYE
70480	TC	CT ORBIT/EAR/FOSSA W/O DYE
70480	26	CT ORBIT/EAR/FOSSA W/O DYE
70481		CT ORBIT/EAR/FOSSA W/DYE
70481	TC	CT ORBIT/EAR/FOSSA W/DYE
70481	26	CT ORBIT/EAR/FOSSA W/DYE
70482		CT ORBIT/EAR/FOSSA W/O & W/DYE
70482	TC	CT ORBIT/EAR/FOSSA W/O & W/DYE
70482	26	CT ORBIT/EAR/FOSSA W/O & W/DYE
70486		CT MAXILLIOFACIAL W/O DYE
70486	TC	CT MAXILLIOFACIAL W/O DYE
70486	26	CT MAXILLIOFACIAL W/O DYE
70544		MR ANGIOGRAPHY HEAD W/O DYE
70544	TC	MR ANGIOGRAPHY HEAD W/O DYE
70544	26	MR ANGIOGRAPHY HEAD W/O DYE
70545		MR ANGIOGRAPHY HEAD W/DYE
70545	TC	MR ANGIOGRAPHY HEAD W/DYE
70545	26	MR ANGIOGRAPHY HEAD W/DYE
70546		MR ANGIOGRAPHY HEAD W/O & W/ DYE
70546	TC	MR ANGIOGRAPHY HEAD W/O & W/ DYE
70546	26	MR ANGIOGRAPHY HEAD W/O & W/ DYE
70547		MR ANGIOGRAPHY NECK W/O DYE
70547	TC	MR ANGIOGRAPHY NECK W/O DYE
70547	26	MR ANGIOGRAPHY NECK W/O DYE
70548		MR ANGIOGRAPHY NECK W/DYE
70548	TC	MR ANGIOGRAPHY NECK W/DYE
70548	26	MR ANGIOGRAPHY NECK W/DYE
70549		MR ANGIOGRAPH NECK W/O & W/DYE
70549	TC	MR ANGIOGRAPH NECK W/O & W/DYE
70549	26	MR ANGIOGRAPH NECK W/O & W/DYE

PROC	MODIFIER	DESCRIPTION
70551		MRI BRAIN W/O DYE
70551	TC	MRI BRAIN W/O DYE
70551	26	MRI BRAIN W/O DYE
70552		MRI BRAIN W/DYE
70552	TC	MRI BRAIN W/DYE
70552	26	MRI BRAIN W/DYE
70553		MRI BRAIN W/O & W/DYE
70553	TC	MRI BRAIN W/O & W/DYE
70553	26	MRI BRAIN W/O & W/DYE
71020		CHEST X-RAY
71020	TC	CHEST X-RAY
71020	26	CHEST X-RAY
78600		BRAIN IMAGING, LTD STATIC
78600	TC	BRAIN IMAGING, LTD STATIC
78600	26	BRAIN IMAGING, LTD STATIC
78601		BRAIN IMAGING, LTD W/FLOW
78601	TC	BRAIN IMAGING, LTD W/FLOW
78601	26	BRAIN IMAGING, LTD W/FLOW
78605		BRAIN IMAGING, COMPLETE
78605	TC	BRAIN IMAGING, COMPLETE
78605	26	BRAIN IMAGING, COMPLETE
78606		BRAIN IMAGING, COMPL W/FLOW
78606	TC	BRAIN IMAGING, COMPL W/FLOW
78606	26	BRAIN IMAGING, COMPL W/FLOW
78607		BRAIN IMAGING (3D)
78607	TC	BRAIN IMAGING (3D)
78607	26	BRAIN IMAGING (3D)
78608		BRAIN IMAGING (PET)
78609		BRAIN IMAGING (PET)
78610		BRAIN FLOW IMAGING ONLY
78610	TC	BRAIN FLOW IMAGING ONLY
78610	26	BRAIN FLOW IMAGING ONLY
78615		CEREBRAL VASCULAR FLOW IMAGE
78615	TC	CEREBRAL VASCULAR FLOW IMAGE
78615	26	CEREBRAL VASCULAR FLOW IMAGE
80048		BASIC METABOLIC PANEL
80050		GENERAL HEALTH PANEL
80051		ELECTROLYTE PANEL
80053		COMPREHEN METABOLIC PANEL
80074		ACUTE HEPATITIS PANEL
80076		HEPATIC FUNCTION PANEL
80100		DRUG SCREEN, QUALITATE/MULTI
80101		DRUG SCREEN, SINGLE
80102		DRUG CONFIRMATION
80103		TISSUE PREPARATION FOR DRUG ANALYSIS
80150		ASSAY OF AMIKACIN
80152		ASSAY OF AMITRIPTYLINE
80154		ASSAY OF BENZODIAZEPINES
80156		ASSAY, CARBAMAZEPINE, TOTAL
80158		ASSAY OF CYCLOSPORINE
80160		ASSAY OF DESIPRAMINE
80162		ASSAY OF DIGOXIN

PROC	MODIFIER	DESCRIPTION
80164		ASSAY, DIPROPYLACETIC ACID
80166		ASSAY OF DOXEPIN
80168		ASSAY OF ETHOSUXIMIDE
80170		ASSAY OF GENTAMICIN
80172		ASSAY OF GOLD
80174		ASSAY OF IMIPRAMINE
80176		ASSAY OF LIDOCAINE
80178		ASSAY OF LITHIUM
80182		ASSAY OF NORTRIPTYLINE
80184		ASSAY OF PHENOBARBITAL
80185		ASSAY OF PHENYTOIN, TOTAL
80186		ASSAY OF PHENYTOIN, FREE
80188		ASSAY OF PRIMIDONE
80190		ASSAY OF PROCAINAMIDE
80192		ASSAY OF PROCAINAMIDE
80194		ASSAY OF QUINIDINE
80196		ASSAY OF SALICYLATE
80197		ASSAY OF TACROLIMUS
80198		ASSAY OF THEOPHYLLINE
80200		ASSAY OF TOBRAMYCIN
80201		ASSAY OF TOPIRAMATE
80202		ASSAY OF VANCOMYCIN
80299		QUANTITATIVE ASSAY, DRUG
80400		ACTH STIMULATION PANEL
80402		ACTH STIMULATION PANEL
80412		CRH STIMULATION PANEL
80414		TESTOSTERONE RESPONSE
80415		ESTRADIOL RESPONSE PANEL
80420		DEXAMETHASONE PANEL
80422		GLUCAGON TOLERANCE PANEL
80424		GLUCAGON TOLERANCE PANEL
80426		GONADOTROPIN HORMONE PANEL
80438		TRH STIMULATION PANEL
80439		TRH STIMULATION PANEL
80440		TRH STIMULATION PANEL
81000		URINALYSIS, NONAUTO W/SCOPE
81001		URINALYSIS, AUTO W/SCOPE
81002		URINALYSIS, NONAUTO W/O SCOPE
81003		URINALYSIS, AUTO, W/SCOPE
81003	QW	URINALYSIS BY DIP STICK OR TABLET R
81005		URINALYSIS
81007		URINE SCREEN FOR BACTERIA
81015		MICROSCOPIC EXAM OF URINE
81020		URINALYSIS, GLASS TEST
81025		URINE PREGNANCY TEST
81050		URINALYSIS, VOLUME MEASURE
81099		URINALYSIS TEST PROCEDURE
82000		ASSAY OF BLOOD ACETALDEHYDE
82003		ASSAY OF ACETAMINOPHEN
82009		TEST FOR ACETONE/KETONES
82010		ACETONE ASSAY
82013		ACETYLCHOLINESTERASE ASSAY

PROC	MODIFIER	DESCRIPTION
82024		ASSAY OF ACTH
82055		ASSAY OF ETHANOL
82075		ASSAY OF BREATH ETHANOL
82108		ASSAY OF ALUMINUM
82140		ASSAY OF AMMONIA
82145		ASSAY OF AMPHETAMINES
82150		ASSAY OF AMYLASE
82160		ASSAY OF ANDROSTERONE
82175		ASSAY OF ARSENIC
82205		ASSAY OF BARBITURATES
82247		BILIRUBIN, TOTAL
82248		BILIRUBIN, DIRECT
82270		TEST FOR BLOOD, FECES
82300		ASSAY OF CADMIUM
82308		ASSAY OF CALCITONIN
82310		ASSAY OF CALCIUM
82375		ASSAY, BLOOD CARBON MONOXIDE
82376		TEST FOR CARBON MONOXIDE
82382		ASSAY, URINE CATECHOLAMINES
82383		ASSAY, BLOOD CATECHOLAMINES
82384		ASSAY, THREE CATHECHOLAMINES
82390		ASSAY OF CERULOPLASMIN
82415		ASSAY OF CHLORAMPHENICOL
82495		ASSAY OF CHROMIUM
82525		ASSAY OF COPPER
82528		ASSAY OF CORTICOSTERONE
82530		CORTISOL, FREE
82533		TOTAL CORTISOL
82540		ASSAY OF CREATINE
82550		ASSAY OF CK (CPK)
82552		ASSAY OF CK IN BLOOD
82553		CREATINE, MB FRACTION
82554		CREATINE, ISOFORMS
82565		ASSAY OF CREATININE
82570		ASSAY OF URINE CREATININE
82575		CREATININE CLEARANCE TEST
82600		ASSAY OF CYANIDE
82615		TEST FOR URINE CYSTINES
82626		DEHYDROEPIANDROSTERONE
82627		DEHYDROEPIANDROSTERONE
82633		DESOXYCORTICOSTERONE
82634		DEOXYCORTISOL
82670		ASSAY OF ESTRADIOL
82671		ASSAY OF ESTROGENS
82672		ASSAY OF ESTROGEN
82677		ASSAY OF ESTRIOL
82679		ASSAY OF ESTRONE
82690		ASSAY OF ETHCHLORVYNOL
82693		ASSAY OF ETHYLENE GLYCOL
82728		ASSAY OF FERRITIN
82742		ASSAY OF FLURAZEPAM
82746		BLOOD FOLIC ACID SERUM

PROC	MODIFIER	DESCRIPTION
82747		ASSAY OF FOLIC ACID, RBC
82947	QW	GLUCOSE; QUANTITATIVE
82948		REAGENT STRIP/BLOOD GLUCOSE
82950		GLUCOSE; POST GLUCOSE DOSE (INCLU
82950	QW	GLUCOSE; POST GLUCOSE DOSE (INCLU
82951		GLUCOSE TOLERANCE TEST (GTT)
82951	QW	GLUCOSE; TOLERANCE (GTT) THREE SPECIME
82952		GTT-ADDED SAMPLES
82952	QW	GLUCOSE; TOLERANCE (GTT) EACH ADD
82953		GLUCOSE-TOLBUTAMIDE TEST
82955		ASSAY OF G6PD ENZYME
82960		ASSAY OF G6PD ENZYME
82962		GLUCOSE BLOOD TEST
82985		GLYCATED PROTEIN
82985	QW	GLYCATED PROTEIN
83001		GONADOTROPIN (FSH)
83002		GONADOTROPIN (LH)
83003		ASSAY; GROWTH HORMONE (HGH)
83015		HEAVY METAL SCREEN
83018		QUANTITATIVE SCREEN, METALS
83036		GLYCATED HEMOGLOBIN TEST
83036	QW	HEMOGLOBIN; GLYCATED
83051		ASSAY OF PLASMA HEMOGLOBIN
83070		ASSAY OF HEMOSIDERIN; QUAL
83071		ASSAY OF HEMOSIDERIN; QUAN
83150		ASSAY OF FOR HVA
83491		ASSAY OF CORTICOSTEROIDS
83497		ASSAY OF 5-HIAA
83498		ASSAY OF PROGESTERONE
83540		ASSAY OF IRON
83550		IRON BINDING TEST
83655		ASSAY OF LEAD
83735		ASSAY OF MAGNESIUM
83805		ASSAY OF MEPROBAMATE
83825		ASSAY OF MERCURY
83835		ASSAY OF METANEPHRINES
83840		ASSAY OF METHADONE
83885		ASSAY OF NICKEL
83887		ASSAY OF NICOTINE
83925		ASSAY OF OPIATES
83930		ASSAY OF BLOOD OSMOLALITY
83935		ASSAY OF URINE OSMOLALITY
83970		ASSAY OF PARATHORMONE
83992		ASSAY FOR PHENCYCLIDINE
84022		ASSAY FOR PHENOTHIAZINE
84106		TEST FOR PORPHOBILINOGEN
84110		ASSAY OF PORPHOBILINOGEN
84119		TEST URINE FOR PORPHYRINS
84120		ASSAY OF URINE PORPHYRINS
84126		ASSAY OF FECES PORPHYRINS
84127		ASSAY OF FECES PORPHYRINS
84132		ASSAY OF SERUM POTASSIUM

PROC	MODIFIER	DESCRIPTION
84133		ASSAY OF URINE POTASSIUM
84144		ASSAY OF PROGESTERONE
84146		ASSAY OF PROLACTIN
84155		ASSAY OF PROTEIN
84228		ASSAY OF QUININE
84255		ASSAY OF SELENIUM
84260		ASSAY OF SEROTONIN
84305		ASSAY OF SOMATOMEDIN
84307		ASSAY OF SOMATOSTATIN
84402		ASSAY OF TESTOSTERONE
84403		ASSAY OF TOTAL TESTOSTERONE
84425		ASSAY OF VITAMIN B-1
84436		ASSAY OF THYROXINE
84437		ASSAY OF NEONATAL THYROXINE
84439		ASSAY OF FREE THYROXINE
84443		ASSAY THYROID STIM HORMONE
84446		ASSAY OF VITAMIN E
84479		ASSAY OF THYROID (T3 OR T4)
84480		ASSAY, TRIIODOTHYRONINE (T-3)
84481		FREE ASSAY (FT-3)
84482		T3 REVERSE
84585		ASSAY OF URINE VMA
84588		ASSAY OF VASOPRESSIN
84630		ASSAY OF ZINC
84702		CHORIONIC GONADOTROPIN TEST
84703		CHORIONIC GONDOTROPIN ASSAY
85002		BLEEDING TIME TEST
85007		BL SMEAR W/DIFF WBC COUNT
85008		BL SMEAR W/O DIFF WBC COUNT
85009		MANUAL DIFF WBC COUNT B-COAT
85013		SPUN MICROHEMATOCRIT
85014		HEMOTOCRIT
85014	QW	BLOOD COUNT; OTHER THAN SPUN HEMATOCRIT
85018		HEMOGLOBIN
85018	QW	BLOOD COUNT; HEMOGLOBIN
85025		COMPLETE CBC W/ AUTO DIFF WBC
85027		COMPLETE CBC AUTOMATED
85032		MANUAL CELL COUNT EACH
85041		AUTOMATED RBC COUNT
85044		MANUAL RETICULOCYTE COUNT
85045		AUTOMATED RETICULOCYTE COUNT
85048		AUTOMATED LEUKOCYTE COUNT
85345		COAGULATION TIME
85347		COAGULATION TIME
85348		COAGULATION TIME
85610		PROTHROMBIN TIME
85610	QW	PROTHROMBIN TIME;
85651		RBC SED RATE, NONAUTOMATED
85652		RBC SED RATE, AUTOMATED
85660		RBC SICKLE CELL TEST
85670		THROMBIN TIME, PLASMA
85675		THROMBIN TIME, TITER

PROC	MODIFIER	DESCRIPTION
86038		ANTINUCLEAR ANTIBODIES
86039		ANTINUCLEAR ANTIBODIES (ANA)
86403		PARTICLE AGGLUTINATION TEST
86430		RHEUMATOID FACTOR TEST
86431		RHEUMATOID FACTOR, QUANT
86485		SKIN TEST, CANDIDA
86490		COCCIDIOIDOMYCOSIS SKIN TEST
86510		HISTOPLASMOSIS SKIN TEST
86580		TB INTRADERMAL TEST
86585		TB TINE TEST
86586		SKIN TEST, UNLISTED
86592		BLOOD SEROLOGY, QUALITATIVE
86593		BLOOD SEROLOGY, QUANTITATIVE
86687		HTLV-I ANTIBODY
86688		HTLV-II ANTIBODY
86689		HTLV/HIV CONFIRMATORY TEST
86701		HIV-1
86702		HIV-2
86703		HIV-1/HIV-2, SINGLE ASSAY
86704		HEP B CORE ANTIBODY, TOTAL
86705		HEP B CORE ANTIBODY, IGM
86706		HEP B SURFACE ANTIBODY
86707		HEP BE ANTIBODY
86708		HEP A ANTIBODY, TOTAL
86709		HEP A ANTIBODY, IGM
86741		NEISSERIA MENINGITIS
86774		TETANUS ANTIBODY
86777		TOXOPLASMA ANTIBODY
86778		TOXOPLASMA ANTIBODY IGM
86781		TREPONEMA PALLIDUM CONFIRM
86803		HEPATITIS C AB TEST
86804		HEPATITIS C AB TEST, CONFIRM
87015		SPECIMEN CONCENTRATION
87040		BLOOD CULTURE FOR BACTERIA
87045		FECES CULTURE BACTERIA
87070		CULTURE, BACTERIA, OTHER
87075		CULTURE, BACTERIA, ANAEROBIC
87076		CULTURE ANAEROBE IDENT, EACH
87077		CULTURE AEROBIC IDENTIFY
87081		CULTURE SCREEN ONLY
87084		CULTURE OF SPECIMEN BY KIT
87086		URINE CULTURE/COLONY COUNT
87088		URINE BACTERIA CULTURE
87101		SKIN FUNGI CULTURE
87102		FUNGUS ISOLATION CULTURE
87103		BLOOD FUNGUS CULTURE
87106		FUNGI IDENTIFICATION, YEAST
87109		MYCOPLASMA
87110		CHLAMYDIA CULTURE
87116		MYCOBACTERIA CULTURE
87118		MYCOBACTERIC IDENTIFICATION
87164		DARK FIELD EXAMINATION

87166		DARK FIELD EXAMINATION
PROC	**MODIFIER**	**DESCRIPTION**
87181		MICROBE SUSCEPTIBLE, DIFFUSE
87184		MICROBE SUSCEPTIBLE, DISK
87186		MICROBE SUSCEPTIBLE, MIC
87187		MICROBE SUSCEPTIBLE, MLC
87188		MICROBE SUSCEPTIBLE, MACROBROTH
87190		MICROBE SUSCEPTIBLE, MYCOBACTERI
87430		STREP A AG, EIA
87880		STREP A ASSAY W/OPTIC
88248		CHROMOSOME ANALYSIS, 50-100
88260		CHROMOSOME ANALYSIS, COUNT 5 CEL
88261		CHROMOSOME ANALYSIS, 5
88262		CHROMOSOME ANALYSIS, 15-20
88263		CHROMOSOME ANALYSIS, 45
88267		CHROMOSOME ANALYS, PLACENTA
88269		CHROMOSOME ANALYS, AMNIOTIC
88280		CHROMOSOME KAROTYPE STUDY
88283		CHROMOSOME BANDING STUDY
88285		CHROMOSOME COUNT, ADDITIONAL
88289		CHROMOSOME STUDY, ADDITIONAL
88291		CYTO/MOLECULAR REPORT
88299		CYTOGENETIC STUDY
G0001		DRAWING BLOOD FOR SPECIMEN
P9612		CATHETERIZE FOR URINE SPEC
P9615		URINE SPECIMEN COLLECT MULT