



December 2015

Service Strategies Codes

The **Service Strategies (SS)** identified for reporting to CSI were selected based on the MHSA process and the plans submitted by the counties. Documenting service strategies remains part of the billing process with the emergence of electronic records systems.

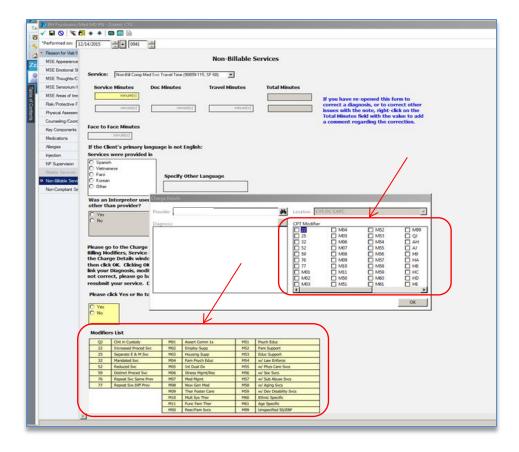
- > They provide the Counties with the opportunity to describe the **progressive treatment strategies** reflected in their programs.
- > Service Strategies are intended as a **modifier for each service provided**.
- > Choose all service strategies that apply:
 - Peer and/or Family Delivered Services (M50)
 - Psychoeducation (M51)
 - Family Support (M52)
 - Supportive Education (M53)
 - Integrated Services for Mental Health and Aging (M58)
 - Integrated Services for Mental Health and Developmental Disability (M59)
 - Ethnic-Specific Service Strategy (M60)
 - Age-Specific Service Strategy (M61) (Children and Youth service MDs/DOs and other clinicians should always select this code)
 - Unknown Service Strategy (M99)
- > The following "Delivered in Partnership" Service Strategies should only be used when the partnership is formal and included on the Treatment or Client Service Plan:

Delivered in Partnership:

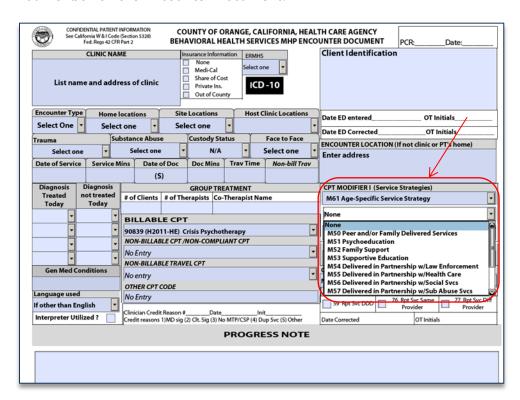
- With Law Enforcement (M54)
- With Health Care (M55)
- With Social Services (M56)
- With Substance Abuse Services (M57)
- Peer and/or Family Delivered Services (M50)

Service strategies are documented in the **County EHR** by selecting the appropriate code in the **charge details window.** (See the example below.)

Be aware of the **legend in the billing window at the bottom of the screen** which describes the various service strategies.



For clinics still not using Electronic Health Records please document applicable service strategies in the CPT modifier box on the Encounter Document:



For further reference about each service strategy code please see: http://ochealthinfo.com/docs/behavioral/Service Strategies.pdf