Avatar Billing Bulletin
Mental Health Services with Duplicate Modifier(s)
February 3, 2021

Who is impacted?
Outpatient Mental Health Service Providers

What is happening?
The following Service Modifiers are used when billing Medi-Cal for more than one or multiple services for the same Client on the same day. Each service requires one of these Modifiers.

- 59 - distinct procedural service
- 76 - repeat procedure by same clinician
- 77 - repeat procedure by different clinician

What is new?
The new Modifier ‘GT’ was added to accommodate “Telehealth” location using Audio and Video communications.

How does this impact your program?
Providers are required to run “Duplicate Services Report” and/or “Multiple Services on same day by client Report” once a month to find duplicate services that need appropriate Modifier(s). Follow a general rule used for selecting the appropriate Duplicate Service Override Modifier Code. Tip: The SERVICES should be considered the primary and the CLINICIANS as the secondary factor.

Check if Services are SAME or DIFFERENT
If SAME
  Check if Clinicians are SAME or DIFFERENT
  
  If SAME
    Add Modifier HE,76
  
  If DIFFERENT add Modifier HE,77
  
  If Services are DIFFERENT
    Add Modifier HE,59

Enter a modifier in the “Edit Service Information” form to override the Avatar system crosswalk table used for generating Short-Doyle Medi-Cal (SDMC) claims. Therefore, additional modifiers are required for Services that were rendered in the Field or Other Community setting, or over the Telephone, or via Telehealth (Audio and Video) communications with the Client.

Check if the Service Location is PHONE (98), OTHER COMMUNITY (99), FIELD (02), or TELEHEALTH (27)
If PHONE, additional Modifier ‘SC’ is required:
  Add Modifier HE,59,SC
  Or HE,76,SC
  Or HE,77,SC

If OTHER COMMUNITY or FIELD, additional Modifier ‘HQ’ is required:
  Add Modifier HE,59,HQ
  Or HE,76,HQ
  Or HE,77,HQ

If TELEHEALTH, additional Modifier ‘GT’ is required:
  Add Modifier HE,59,GT
  Or HE,76,GT
  Or HE,77,GT
### Summarized Modifier Grid

<table>
<thead>
<tr>
<th>Program/Location</th>
<th>Repeat procedure, same clinician</th>
<th>Repeat procedure, different clinician</th>
<th>Distinct Procedure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health</td>
<td>HE,76</td>
<td>HE,77</td>
<td>HE,59</td>
</tr>
<tr>
<td>MH, LOC = Community/Field</td>
<td>HE,76,HQ</td>
<td>HE,77,HQ</td>
<td>HE,59,HQ</td>
</tr>
<tr>
<td>MH, LOC = Phone</td>
<td>HE,76,SC</td>
<td>HE,77,SC</td>
<td>HE,59,SC</td>
</tr>
<tr>
<td><strong>MH “Telehealth”</strong></td>
<td><strong>HE,76,GT</strong></td>
<td><strong>HE,77,GT</strong></td>
<td><strong>HE,59,GT</strong></td>
</tr>
<tr>
<td>Katie A. Services</td>
<td>HK,76</td>
<td>HK,77</td>
<td>HK,59</td>
</tr>
<tr>
<td>KTA, LOC = Community/Field</td>
<td>HK,76,HQ</td>
<td>HK,77,HQ</td>
<td>HK,59,HQ</td>
</tr>
<tr>
<td>KTA, LOC = Phone</td>
<td>HK,76,SC</td>
<td>HK,77,SC</td>
<td>HK,59,SC</td>
</tr>
</tbody>
</table>

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**Menu Path** > Avatar PM > Billing > Billing Reports > Ad Hoc Reports

Instructions on how run the reports in Avatar system and add appropriate Modifier(s) through **“Edit Service Information”** form. *See the last screenshot on the next page.*

1. Select “Possible Duplicate Services by Program” Report.

2. Select your program from the dropdown list. Enter **Start Date** and **End Date**.
   This report provides the list of Clients who received duplicate services on the same day.

3. Select “Multiple Services on Same Day by Client Report” that provides the information of other locations, where an individual Client received services.
4. Enter Client name (LastName,FirstName) or ID (BIS#) in the ‘Select Client’ field. Then double click or highlight the correct name and press the ‘Select’ button.

5. Enter the Date From and Date To. Click the ‘Process’ button. The report will list the program names, where else that Client received the services on a specific day.

6. Go to “Edit Service Information” form. Enter Client ID or Client Lastname,Firstname; select the correct Episode Number; Click ‘Select Service(s) to Edit’ button and choose the Service Date and add the appropriate Modifier(s) from the guideline above. Then click the Submit button.

   **Note:** Must use Upper Case letters, Commas to separate, and No spaces in between or after the Comma.

Once you have entered the modifier(s), and if you re-run the report, the modifiers that were entered will appear in the Modifier column.

**Need Additional Support?**
For questions regarding Medi-Cal Billing and Service Correction Procedures, please email Shirley Cai at yuxian.cai@sfdph.org.