



Coding Part 2 Location Codes



Download the PPT from the QM Website:

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Click on the “Webinar Recording & PPTs” Tab



April 17, 2025

Meet Your QM TEAM



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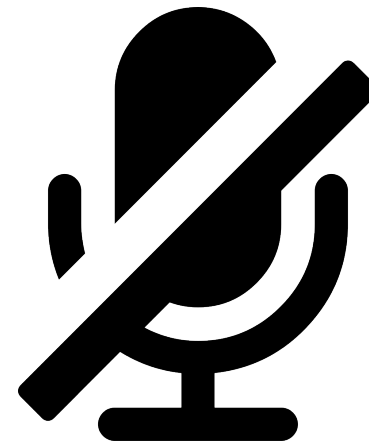
Laurie Bell



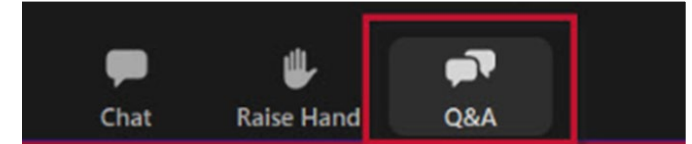
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**BEHAVIORAL HEALTH
& RECOVERY SERVICES**

Housekeeping

- Reminder- Please keep your mic muted
- Type your questions using the Q&A button.
- Attendance is tracked automatically in Zoom
- Today's session will be recorded.



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BEHAVIORAL HEALTH & RECOVERY SERVICES

Agenda

At the conclusion of this 2-Part training, participants will have a better understanding of the following:

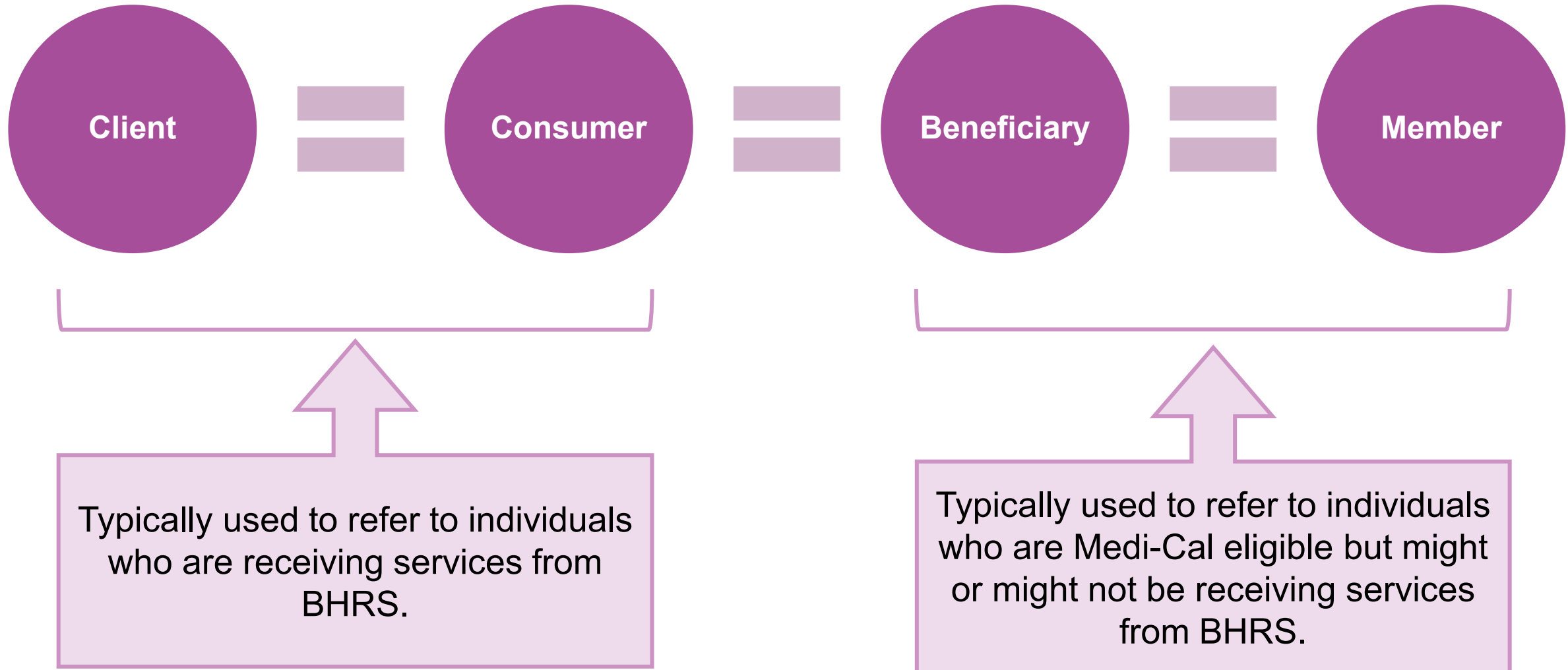
- The distinction between different service codes and location codes.
- The relationship between Service Codes, Location Codes, and Service Time
- When to use specific Service Codes and Location Codes

Location Code Basics

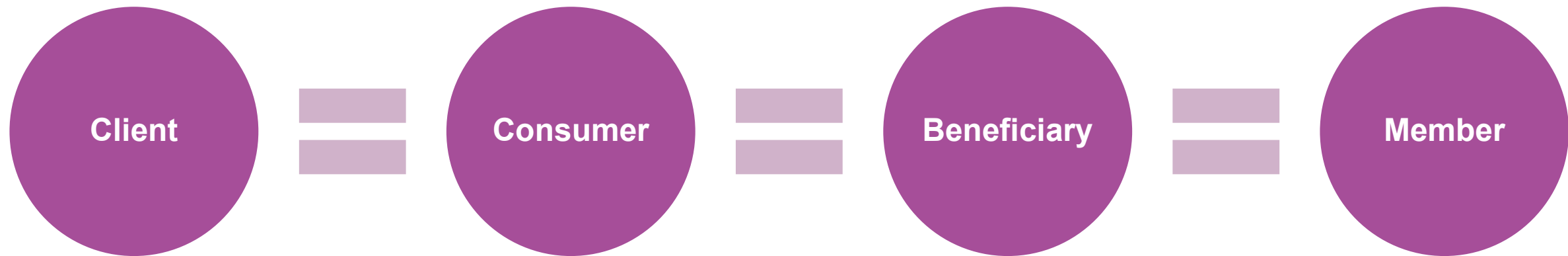


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“Client Present”



“Client Present”



IS the person whose name is on the chart.
NOT a collateral, caregiver, other provider, teacher, etc.

Location Code Basics



Can specify where a client is when they receive the service.



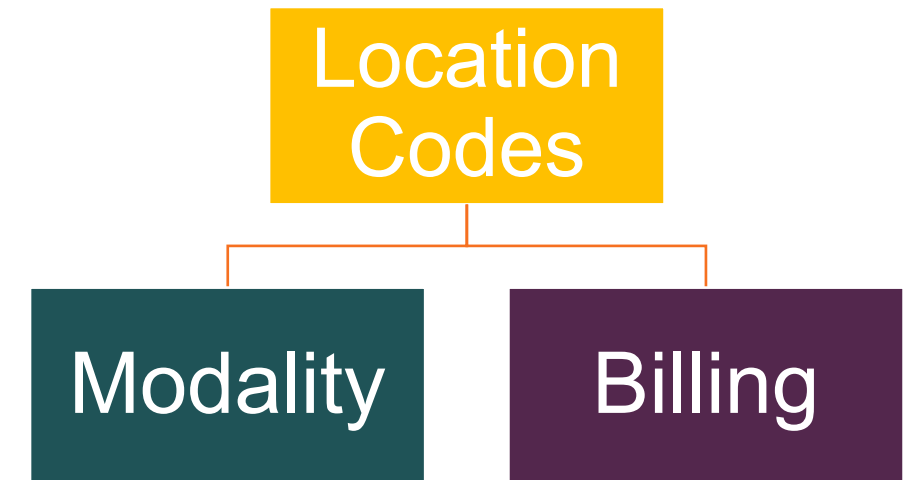
Can specify how a service was provided.



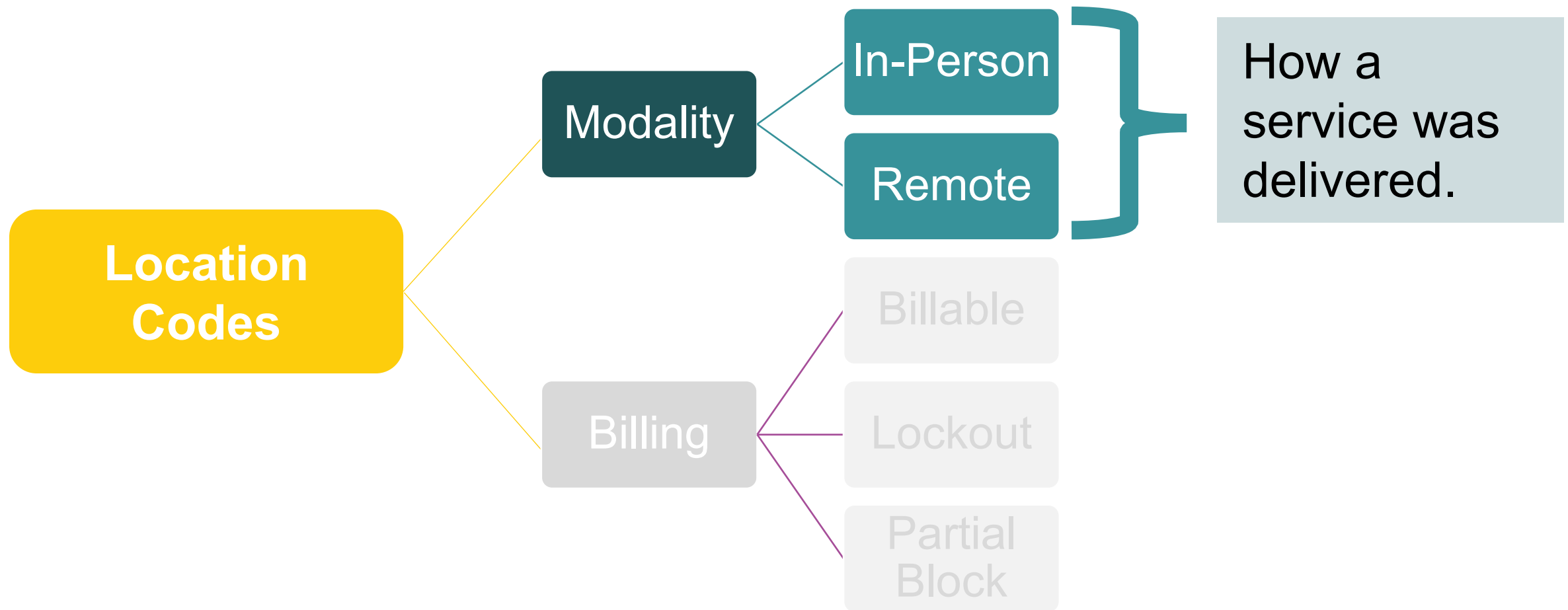
Are included in claims (bills) that are sent to the State.



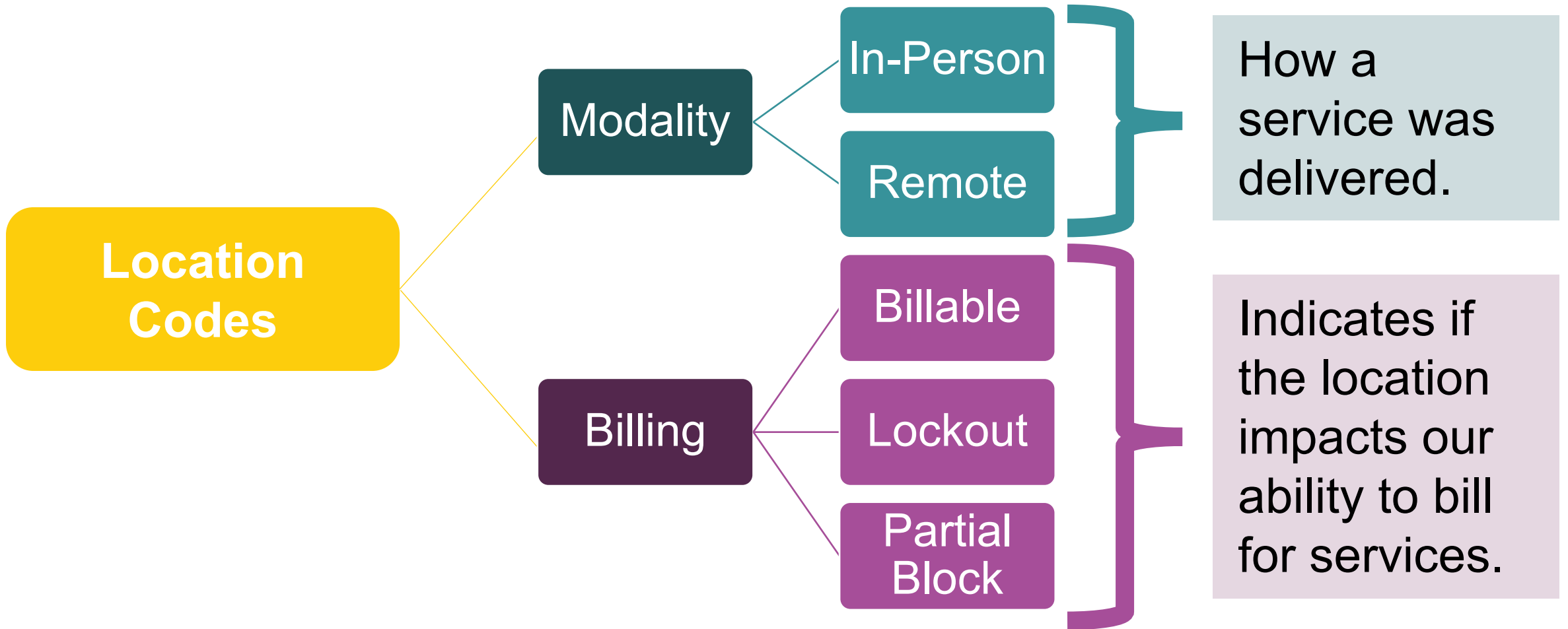
Can specify if a client is in a location that does not allow for specific types of billing.



Location Codes



Location Codes



Location Code – “Home”

There are several Location Codes that include the descriptor “Home” – The following definition applies to those location codes.

“Home” is a location, other than a hospital or other facility, where the patient receives care in a private residence.

Examples of locations that are considered “Home”:

- ✓ House / Apartment
- ✓ Board and Care
- ✓ Canyon Vista (Formerly Known as Cordilleras Suites) *if the service takes place in the client’s apartment/room.*



Location Code – “Home”

Home is **NOT**

- ✗ a location for which another code would be more appropriate (e.g., Homeless shelter, residential care, or skilled nursing facility)
- ✗ a “lockout” or “partial block” location.

Locations that are often miscoded as “Home”

- ✗ Assisted Living Facility
- ✗ Skilled Nursing Facility
- ✗ Residential Facility (e.g., Acacia House)
- ✗ Crisis Stabilization (e.g., Serenity House)
- ✗ Long term stays at an inpatient hospital or other psychiatric facility



Location Code – Psychiatric Reason

Several Location codes are specifically for facilities that specialize in providing psychiatric care.

Location Code for Psychiatric Reason	Location Code if NOT Psychiatric
Residential Care – Adults Locked (Lockout)	Most likely Assisted Living (new code!)
Residential Care – Adults (Partial Block)	Most likely Assisted Living (new code!)
Residential Care - Children	Residential Care - Children
Psychiatric Hospital SMMC 3AB (Partial Block)	Health Facility/PCP/SNF (non psych)
Psychiatric Hospital (Partial Block)	Health Facility/PCP/SNF (non psych)
PES (Lockout)	Health Facility/PCP/SNF (non psych)
Skilled Nursing Facility – Psychiatric (Lockout)	Health Facility/PCP/SNF (non psych)

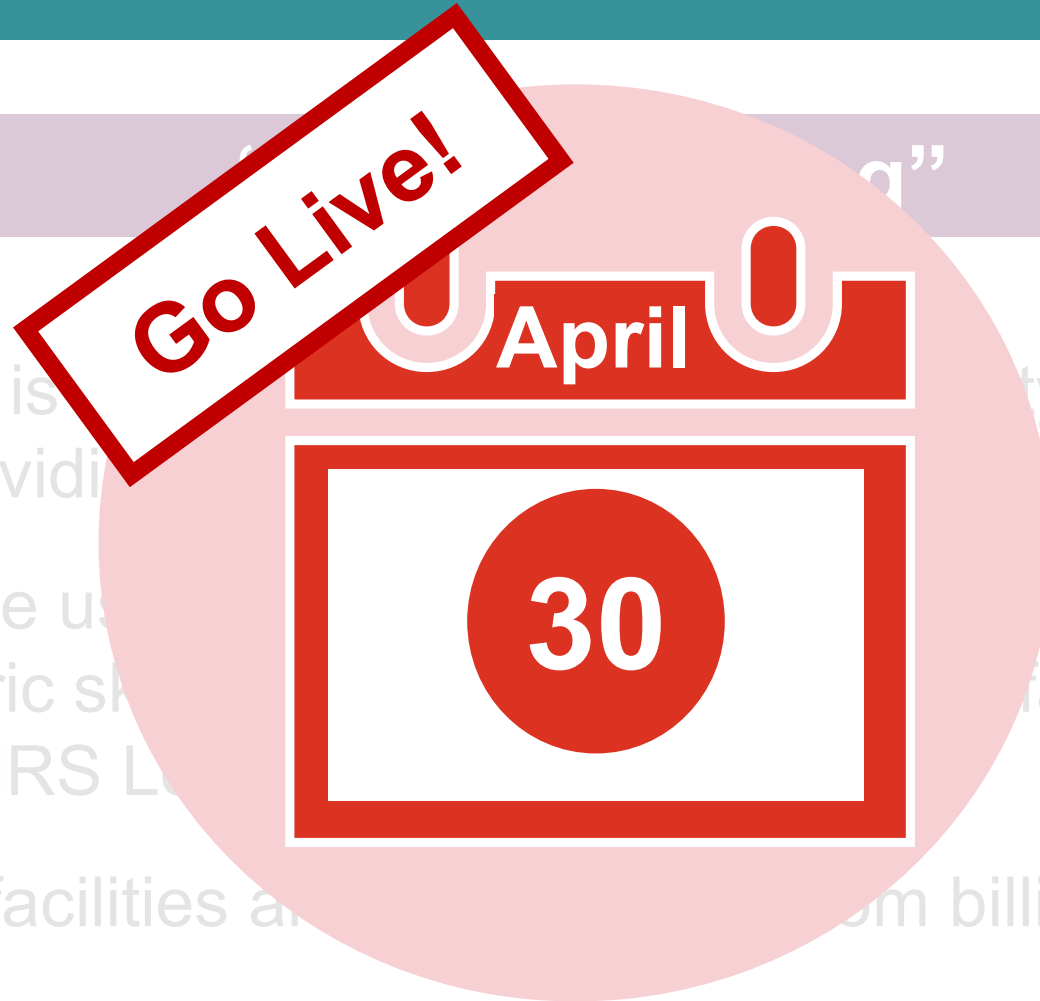
New Location Code

“Assisted Living”

- Use when client is living in an assisted living facility that does NOT specialize in providing psychiatric care.
- This is **NOT** to be used if the client is placed in a psychiatric residential facility, psychiatric skilled nursing facility, or other facility type that already exists on the BHRS Location Code Index.
- Assisted Living facilities are **NOT** blocked from billing.
- *Example: Millbrae Assisted Living*



New Location Code



- Use when client is in a facility that does NOT specialize in providing psychiatric services.
- This is **NOT** to be used for a psychiatric residential facility, psychiatric skilled nursing facility type that already exists on the BHRS L.
- Assisted Living facilities are not for billing.
- *Example: Millbrae Assisted Living*





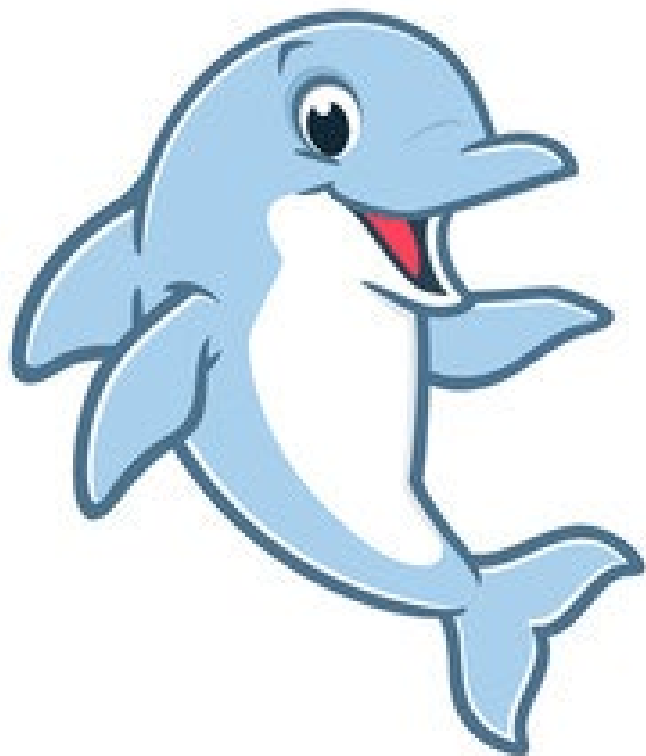
Poll 1

When considering which location code to use, the following needs to be considered:

- A. Is the facility a facility that specializes in providing psychiatric care?
- B. Whether or not the client is present for the appointment.



Both A and B

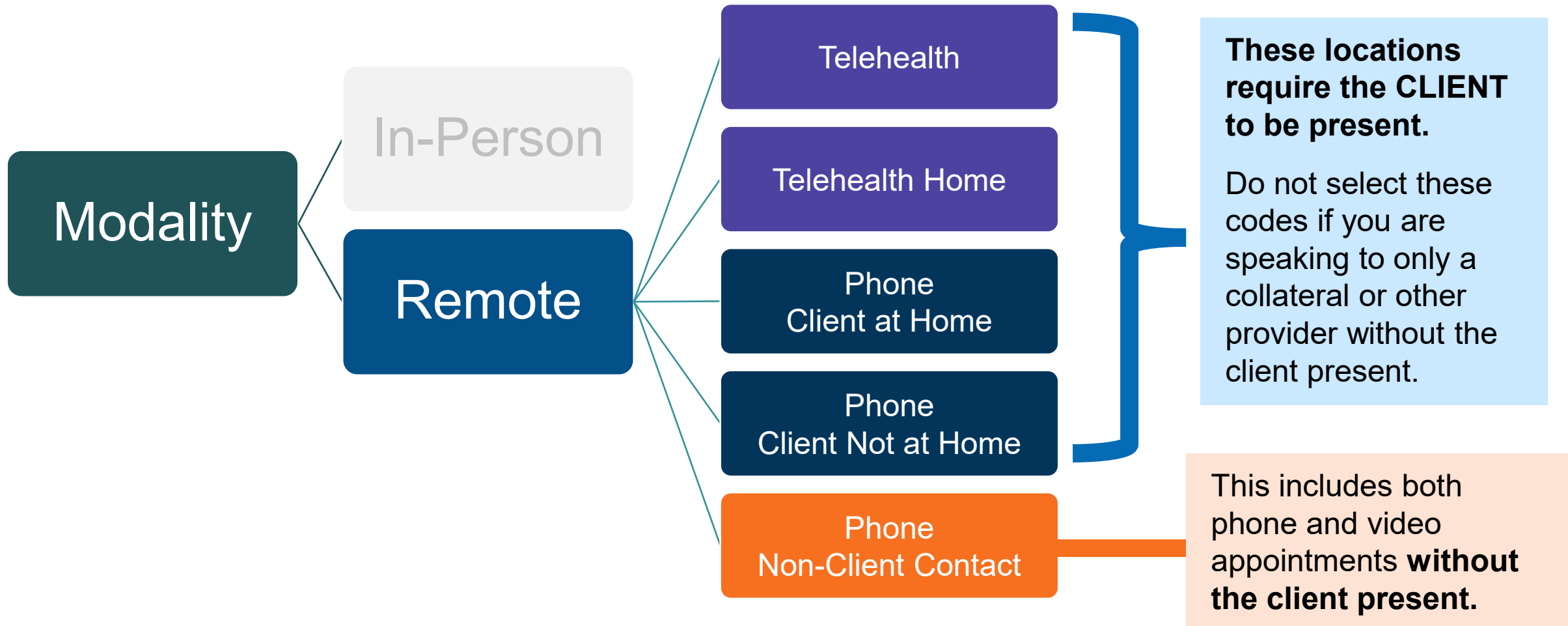


Services Delivered Remotely

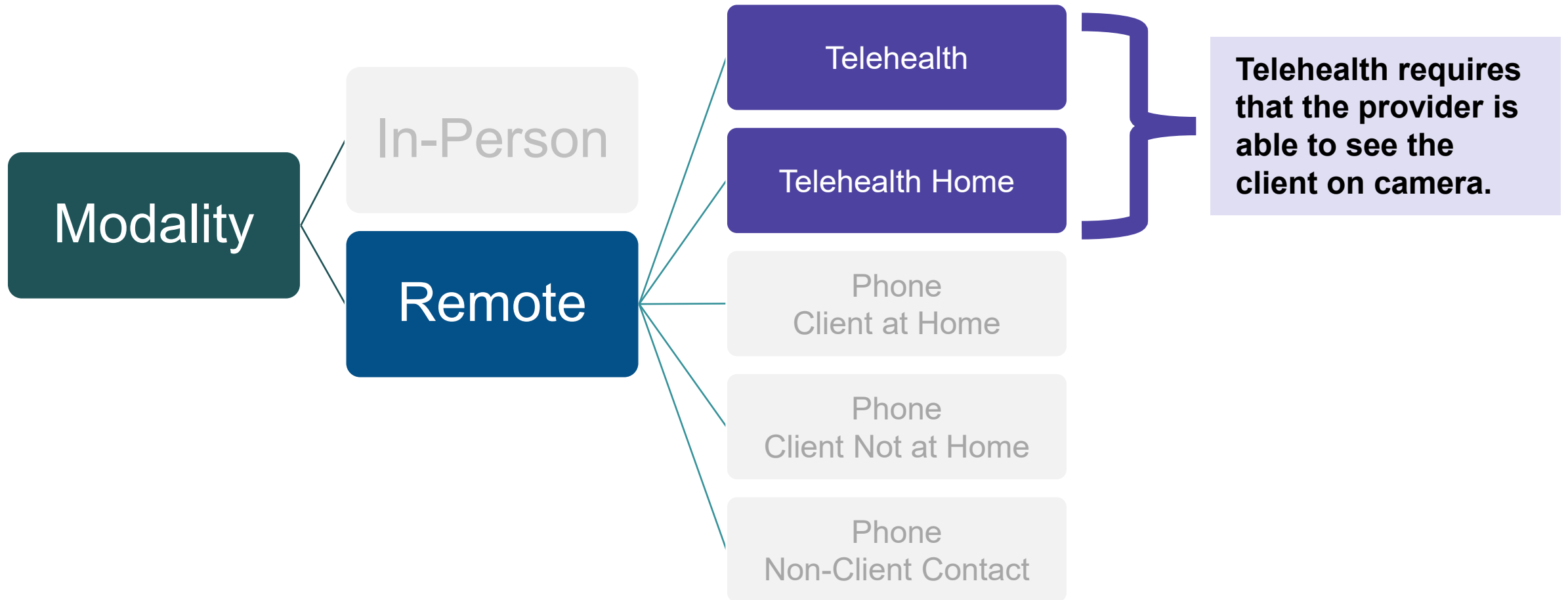


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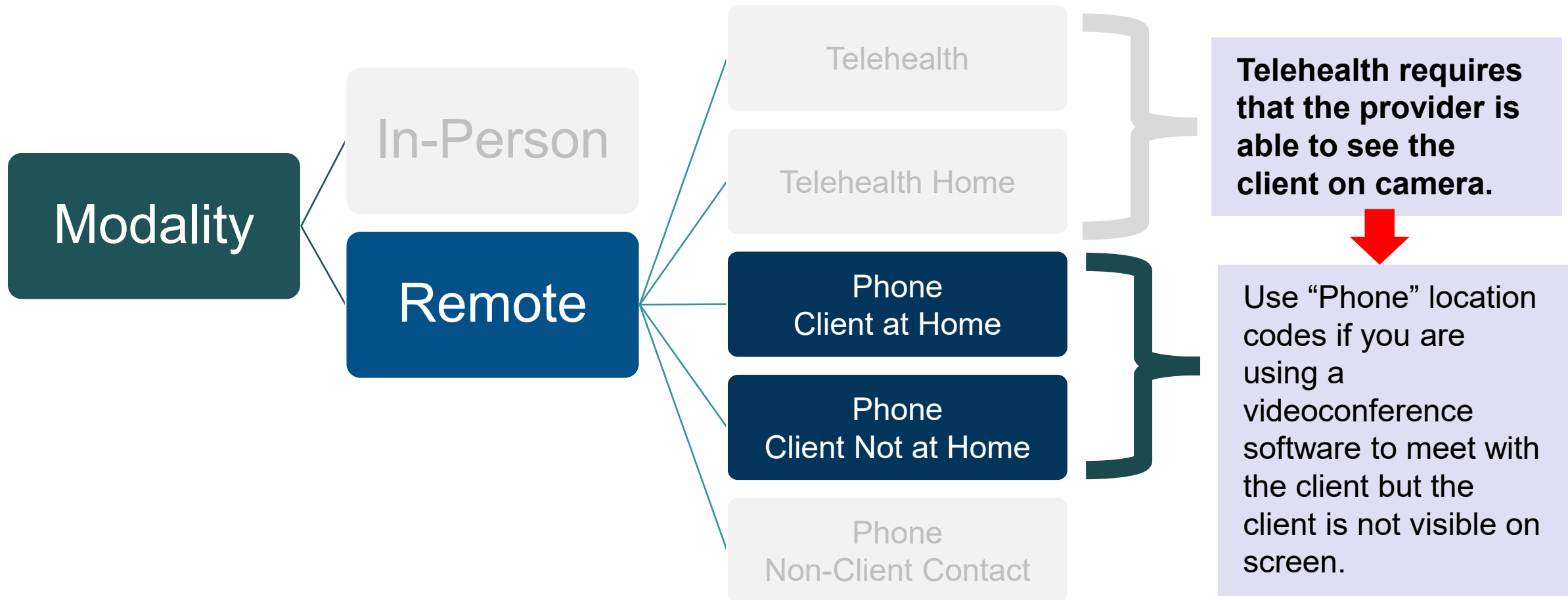
Location Codes – Remote Services



Location Codes – Remote Services

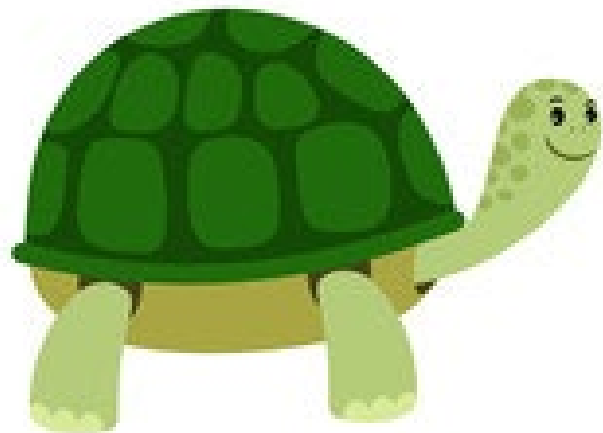


Location Codes – Remote Services





Poll 2



For which of the following situations should you use location code “Telehealth”?

- ☒ A. You are using MS Teams with a client and you are able to see the client on camera.
- B. You are using MS Teams with a client and the client has covered their camera so you can't see them.
- C. You are using MS Teams during a conversation with only the client's mother and are able to see her on camera.



Block Billing Location Codes



Lockout Vs Locked Facilities

“Locked” Facility

- Refers to access to the facility.
- Means that entry and exit from the facility is locked, as in requires specific permission to access or leave.



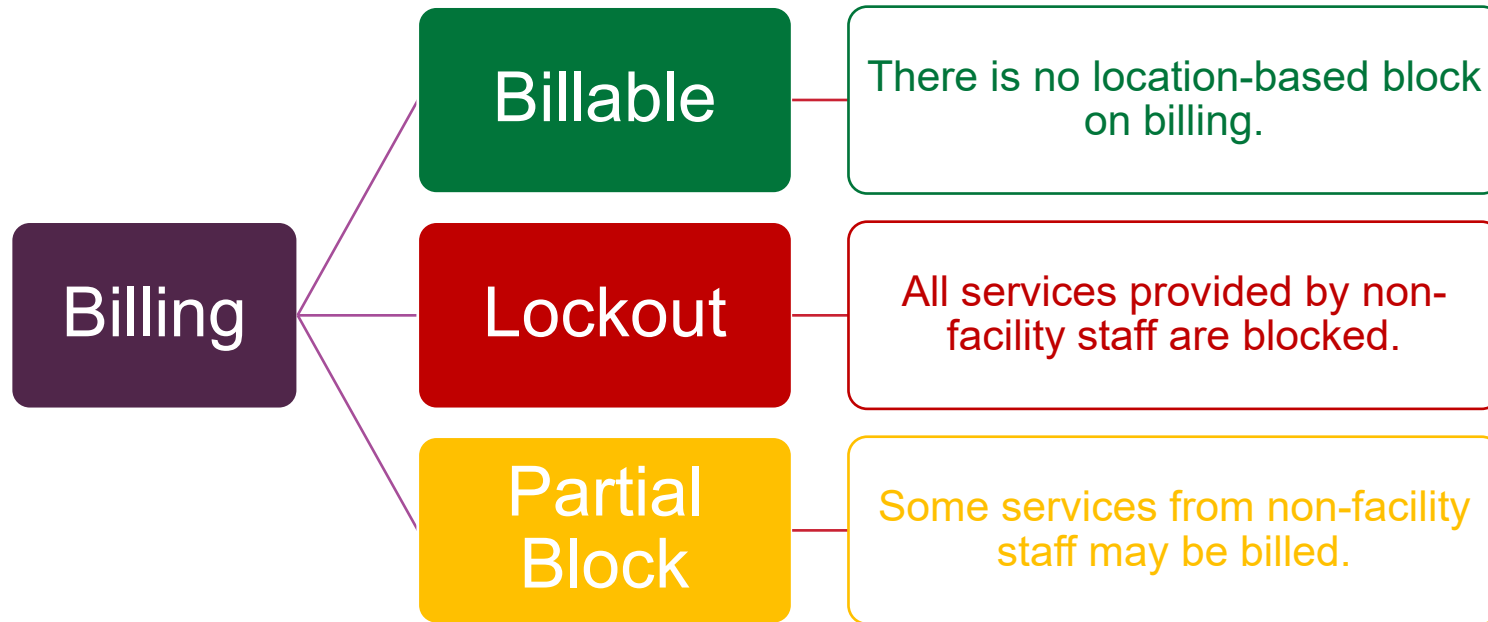
VS

“Lockout” Location

- Refers to billing.
- Means that all outpatient services are blocked from billing (not reimbursable).
- One of two “Blocked Billing” Location Codes.



Location Codes – Billing Category



Billable Location Codes are location codes that are not classified as “Lockout” or “Partial Block.”

“**Lockout**” and “**Partial Block**” indicate Location Codes that have billing restrictions. In other words, they are **blocked from billing**.

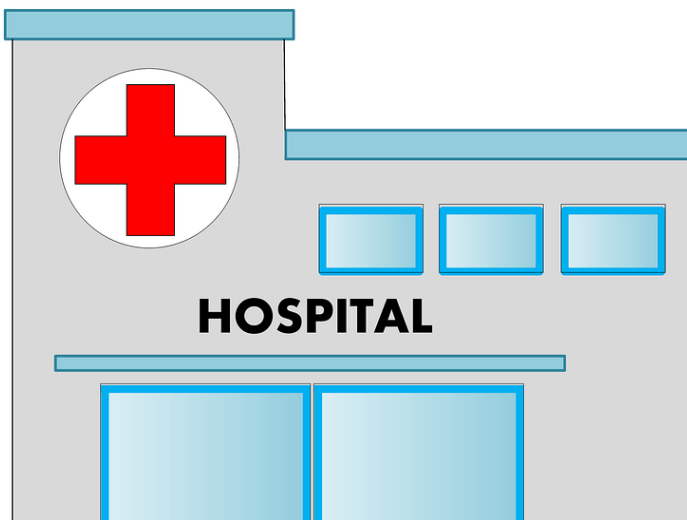
Check the Location Code Index to see which location codes have billing restrictions.

Lockout or Partial Block Locations supersede all other Location Codes

Blocked Billing Location Codes

What does it mean that a Lockout or Partial Block Location Supersedes all other Location Codes?

Client is currently placed in a **psychiatric inpatient facility**.



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Remote Call with Client /
Collateral / Other Provider

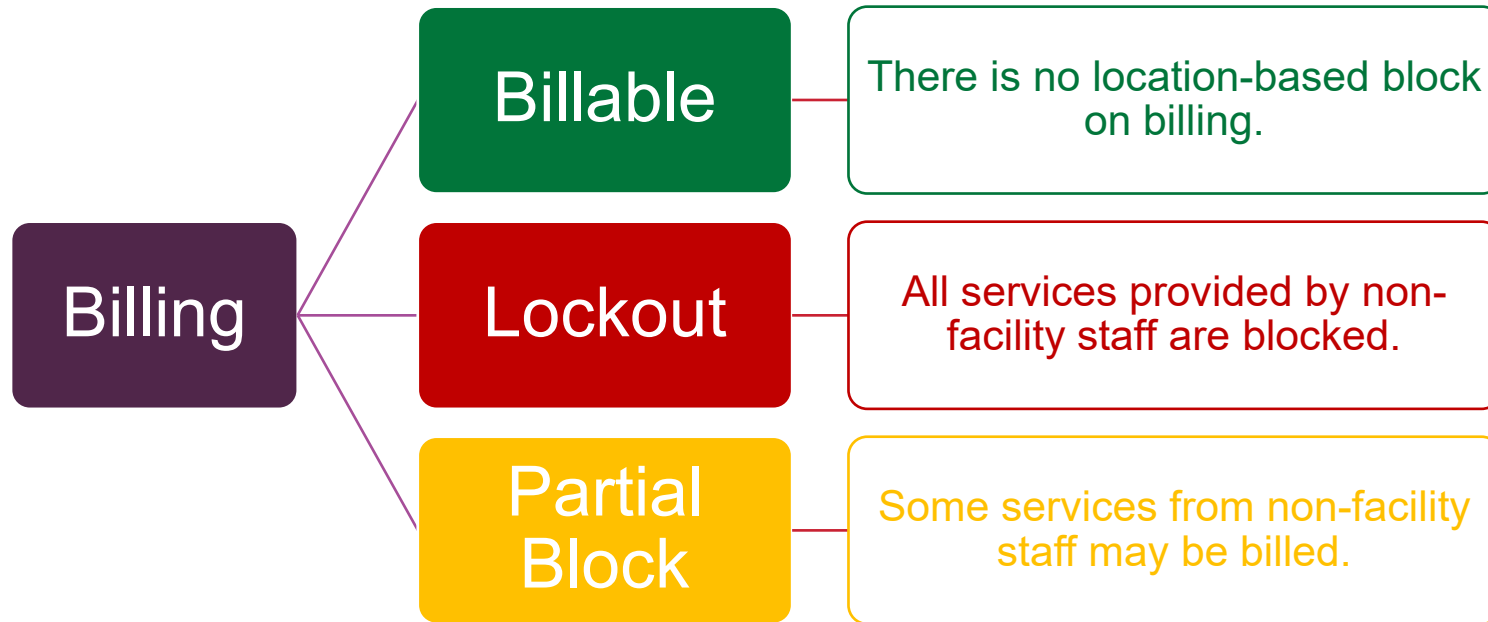
This would **NOT** be coded using a remote service code.

Instead, you would use the “**Psychiatric Hospital**” Location Code because the Psychiatric Hospital Placement is a “**Partial Block**” Location Code.



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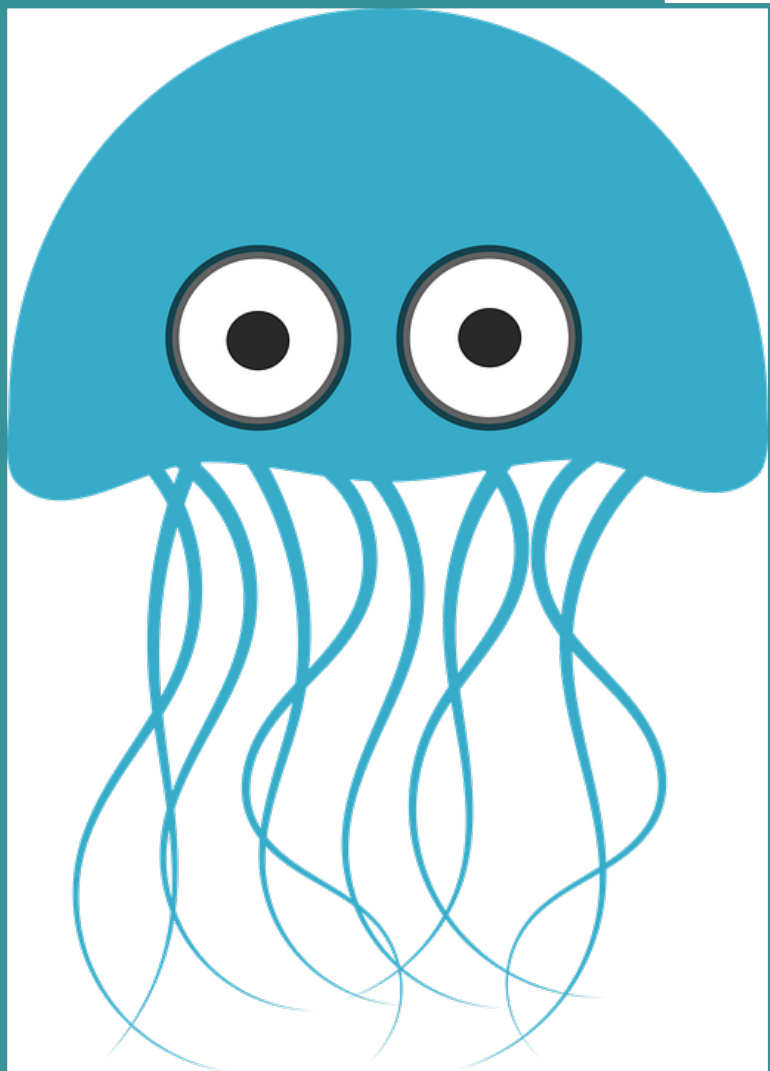
Location Codes – Billing Category



Whether or not a location is billable or not should **not** be the sole factor that determines if you should see the individual at that location.

Always also consider the individual's situation, needs, and the services being provided by the facility when determining if you should see the individual at that location.





Poll 3

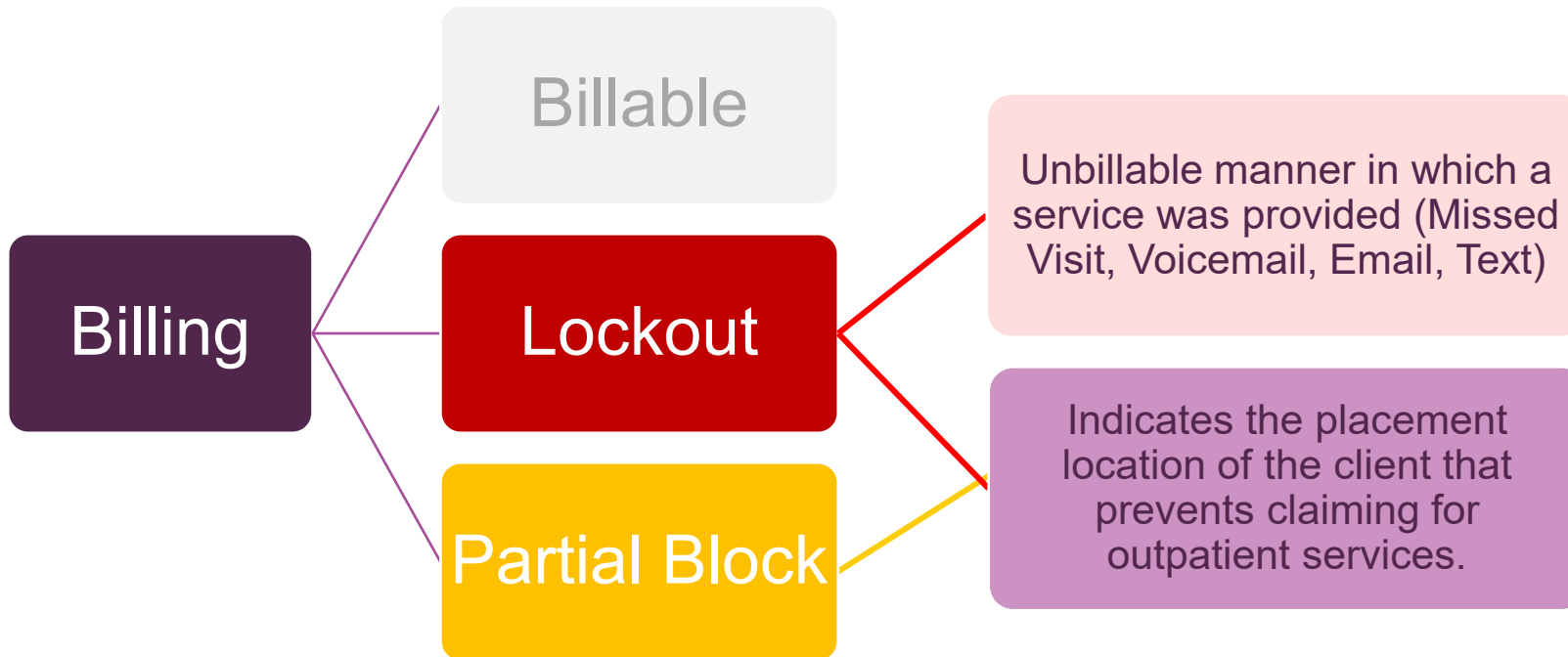
“Locked” and “Lockout” mean the same thing and can be used interchangeably.

A. True

☒ False



Blocked Billing Location Codes

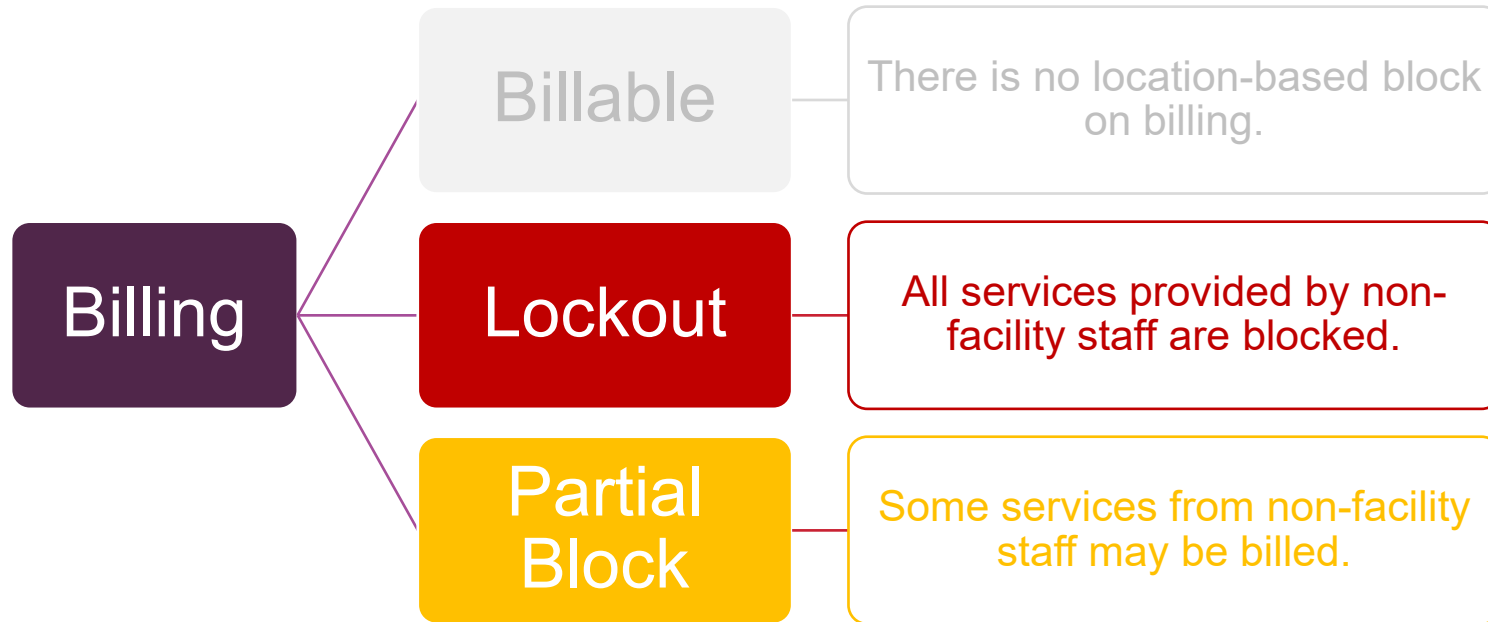


Missed Visit Location Code is a lockout location code and should be used whenever a client misses a visit, regardless of whether it was intended to be a remote or in-person appointment.

When coding missed visit, use the service code for the intended service (e.g., service code "5CA", location code "Missed Visit")



Blocked Billing Location Codes



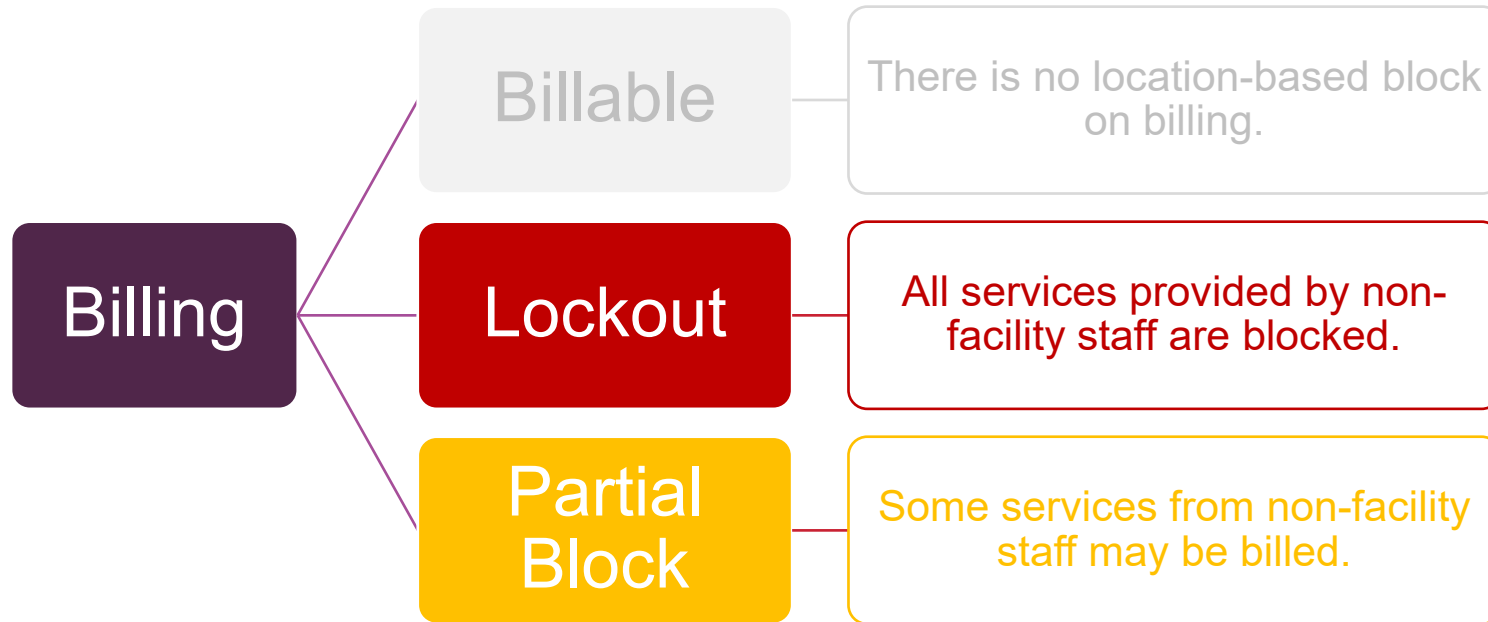
Lockout and partial block location codes refer to certain outpatient services being blocked for billing when the service was provided by NON-FACILITY STAFF.

For example, PES staff will be reimbursed for billable services they provide while an individual is at PES.

However, if a BHRS Outpatient provider visits the individual while the individual is placed at PES, the billing for their services will be blocked because the BHRS Outpatient staff is not a PES facility staff.



Blocked Billing Location Codes



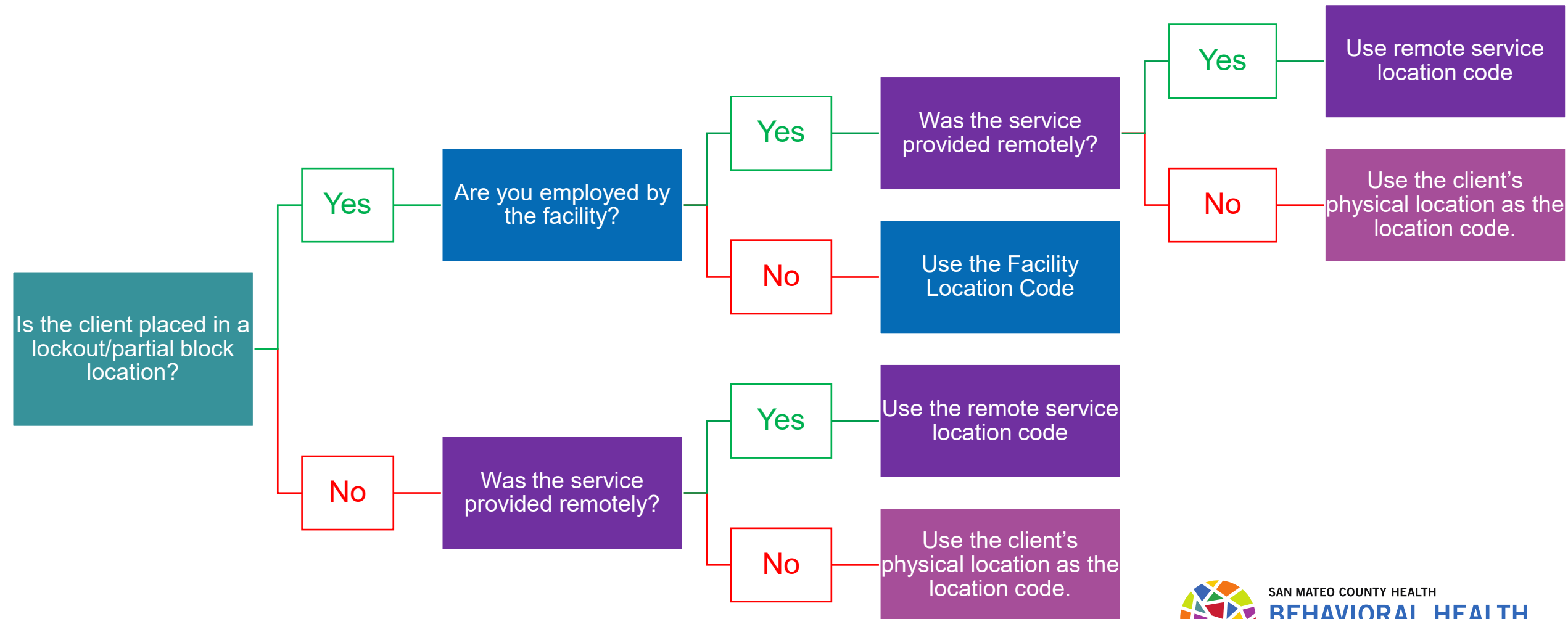
But what location codes should facility staff use?

Facility staff are not restricted to using only the location code associated with the facility. Facility staff should use the full list of location codes available to determine the correct location code.

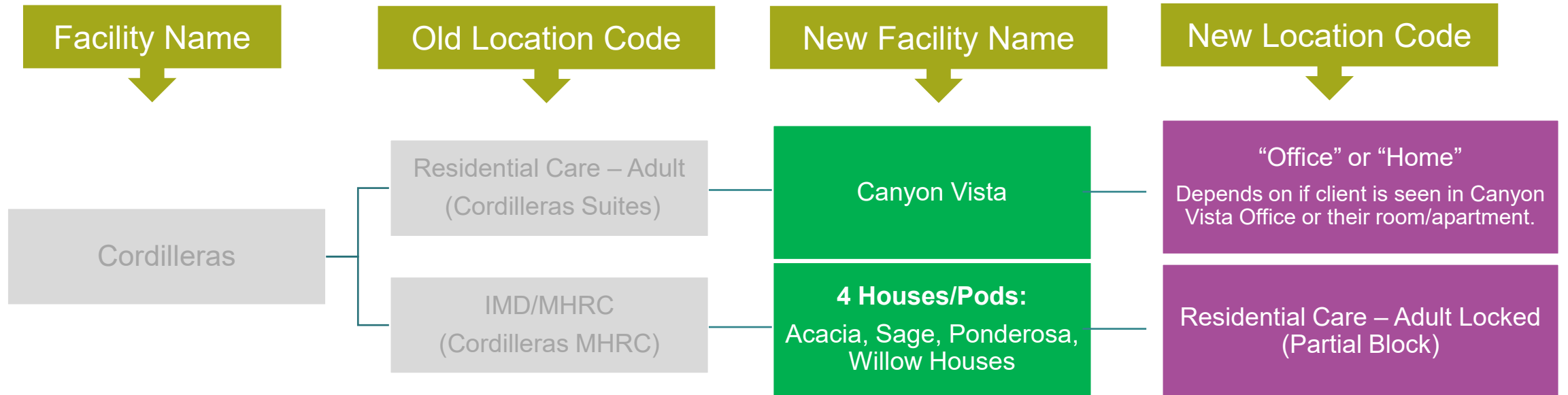
Example: Residential staff of a Caminar Residential site, if providing a service via Telehealth should code Telehealth (not Telehealth Home).



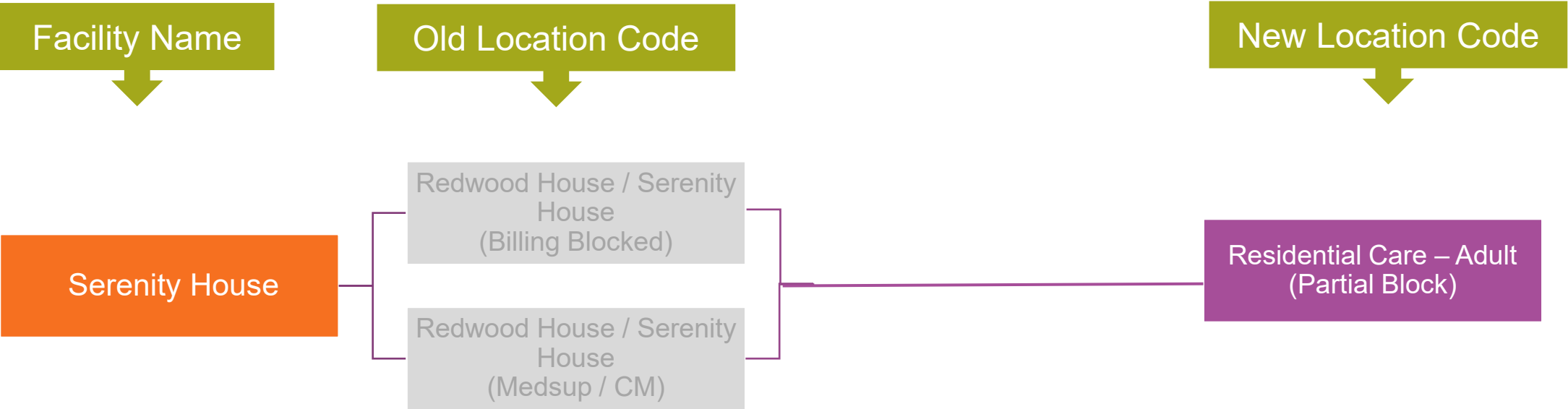
Blocked Billing Location Codes



Updated Location Codes Categories



Updated Location Codes Categories

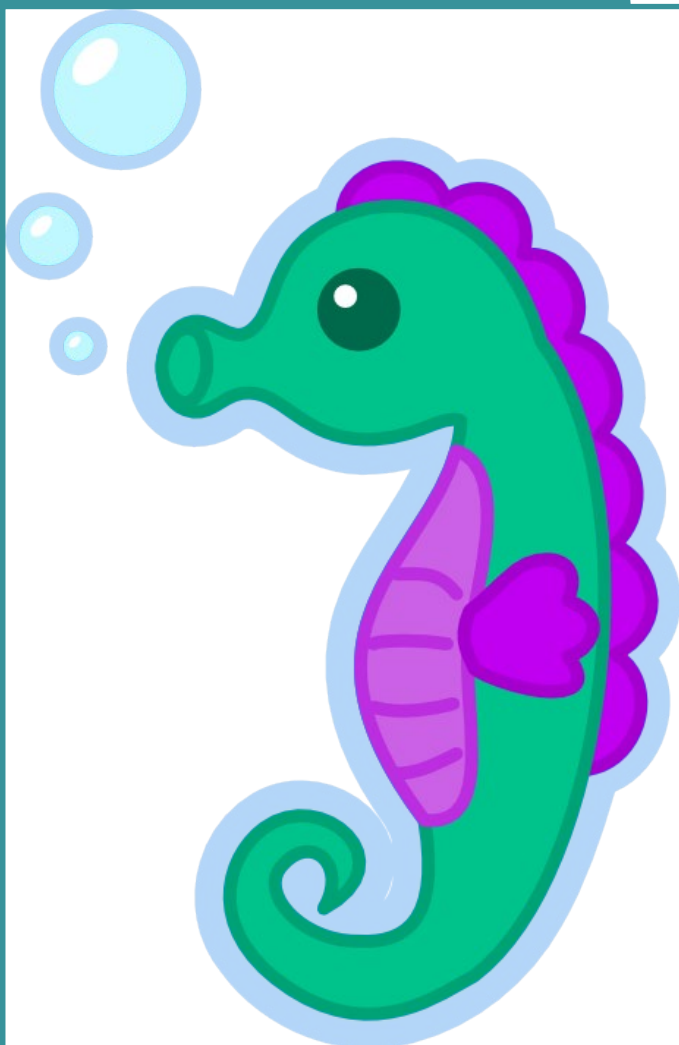




Poll 4

The 4 new “Pods” (formerly the Cordilleras MHRC) are considered...

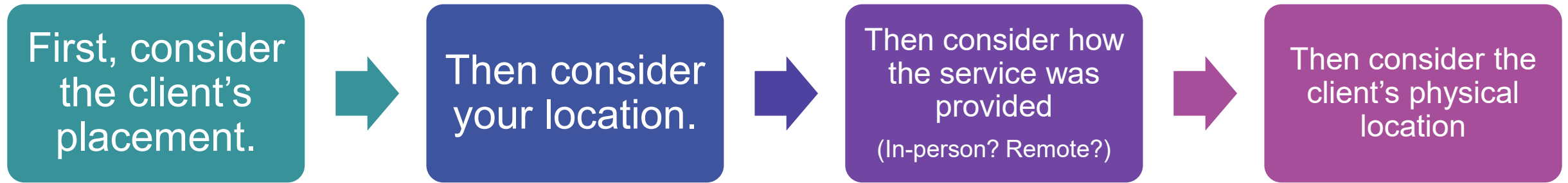
- ☒ A **locked** facility but not a **lockout** location
- B. A **lockout** location but are not **locked** facilities
- C. Both a **lockout** location and a **locked** facility



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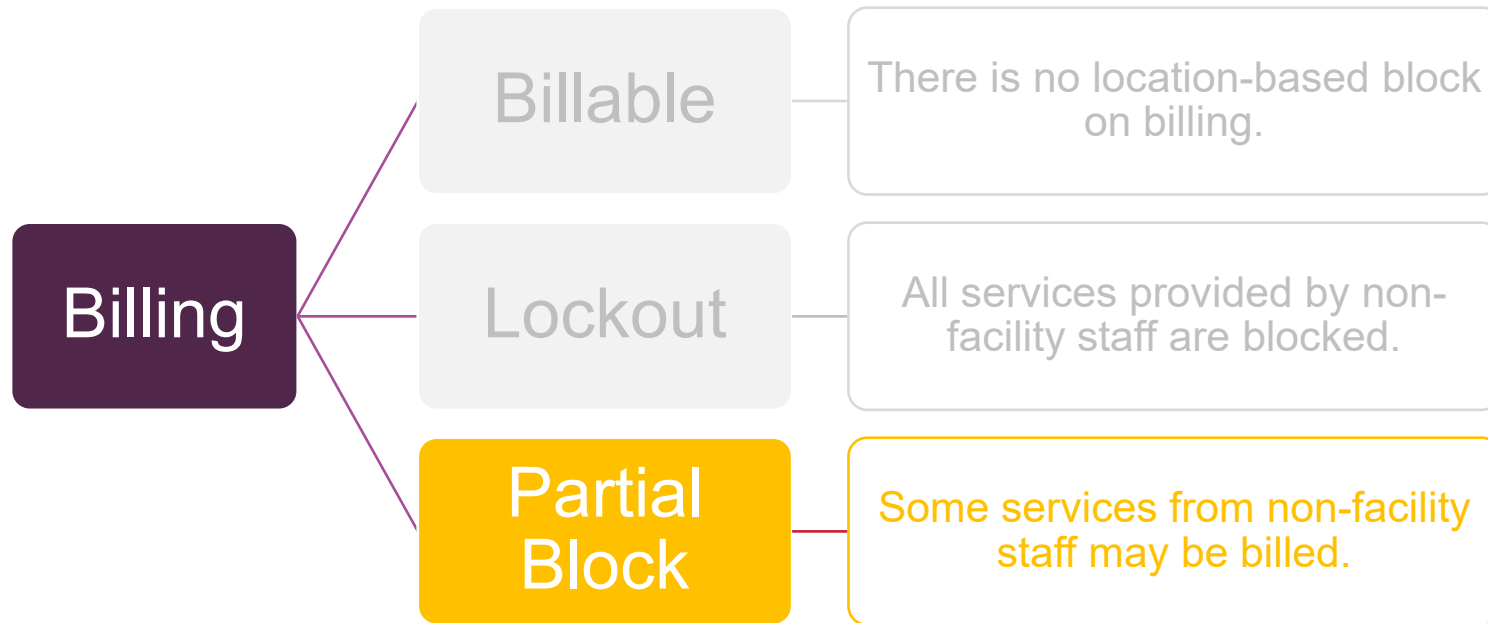
Blocked Billing Location Codes



A Lockout or Partial Block Location Supersedes / Overrides all other Location Codes



Partial Block Location Codes



Some facilities that used to be considered full lockout locations may now bill for certain services.

These facilities are referred in BHRS as “**Partial Block**” locations.

The Partial Block location type eliminates the need for multiple location codes for the same facility or type of facility.



Partial Block Location Codes

Type of Staff			
Partial Block Location	Only billable on date of Admission or Discharge	May be billed in between Admission and Discharge Dates	
	Any Outpatient SMHS	Service Type	Service Type
Psychiatric Hospital			
Residential Care – Adults (Locked) (Licensed Community Care Facility)		Please refer to the updated Location Code Index for examples of each Partial Block Location.	
Residential Care – Adults (Licensed Community Care Facility)			

Partial Block Location Codes

For Staff Providing Non-Medication Services

Partial Block Location	Only billable on date of Admission or Discharge	May be billed in between Admission and Discharge Dates Any service that is not listed below is NOT billable.	
		Case Management	Peer Support Specialist Services
Psychiatric Hospital	Yes	Yes	Yes
Residential Care – Adult Locked (Prtl Blk) (Licensed Community Care Facility)	Yes	Yes	Yes
Residential Care – Adult (Prtl Blk) (Licensed Community Care Facility)	Yes	Yes	Yes



Partial Block Location Codes

For Staff Who Provide Medication Services

	Only billable on date of Admission or Discharge	May be billed in between Admission and Discharge Dates	
Partial Block Location	Any Outpatient SMHS	Medication Support Services	Other Medication Services (e.g. Medication Injection/Administration)
Psychiatric Hospital	Yes	No	No
Residential Care – Adults (Locked) (Licensed Community Care Facility)	Residential Care <u>not</u> considered a partial block for staff providing medication services. But there are still certain rules regarding which service codes and location codes to use for clients place in a residential treatment facility.		
Residential Care – Adults (Licensed Community Care Facility)			



Partial Block Location Codes

For Staff Who Provide Medication Services for clients placed in psychiatric residential facilities

Residential Care – Adults (Locked)
(Licensed Community Care Facility)

Residential Care – Adults
(Licensed Community Care Facility)

Adult Residential is **not** considered a Partial Block Location for **staff who provide medication services**.

This means that the rules about “Residential Care Adults...” superseding other locations do **NOT** apply for these staff.

If providing medication services in-person and on-site and in-person at the facility...

- ✓ Use one of the “**Residential Care Adult**” location codes and
- ✓ MD/NPs must use one of the Medication Service Codes in the **99347CA-99350CA** series.

If providing medication services outside the facility or via telehealth/phone...

Follow the same service code and location code guidelines you use when seeing an outpatient client who is not in a blocked billing placement.

(e.g., use Med Opt Codes, Telehealth location code, etc.)

Get Ready to WIN a \$25 Visa GIFT CARD



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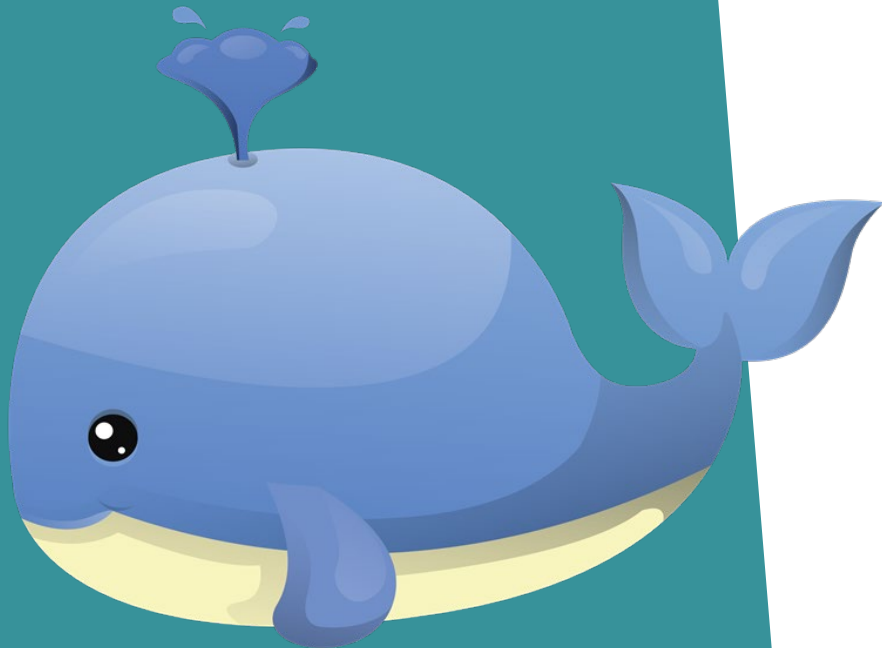


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- Next Poll is to win a \$25 Visa Gift Card
- Rules are:
 - ☐ Wait to hear Eri say **“GO”**
 - ☐ First person to answer the question correctly IN THE CHAT will win.



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Poll 5

Which of the following statements are true?

- A. “**Partial Block**” location codes block some outpatient billing and allow other outpatient billing.
- B. “**Lockout**” location codes block all outpatient billing.
- C. When using **Partial Block** or **Lockout** location codes, you should code all your services as 55.
- D. When using **Partial Block** or **Lockout** location codes, you should code all your services using an actual service code (not 55) if an actual service was provided.



A, B, and D.

Putting it All Together: Relationship Between Services and Location



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Summarizing Our Learnings



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How Coding Blocks Billing

What type of provider provided the service?

Which Service Code best represents the service you actually provided?

How was the service provided? (In Person, Remote, Voicemail/Email/Text)?

Is the client in a placement that is considered locked or partially blocked?

Did the client miss the visit?



How Coding Blocks Billing

What type of provider provided the service?

Which Service Code best represents the service you actually provided?

How was the service provided? (In Person, Remote, Voicemail/Email/Text)?

Always use the service code that is accurate to what you provided or intended to provide.

Only use 55 if:

- The service is a non-reimbursable service or
- The note is excessively late



How Coding Blocks Billing

The answers to the questions below are provided through Location Codes.

Remember: In addition to Code 55 Service Code, Location Codes also block billing, depending on the location code you select.

How was the service provided? (In Person, Remote, Voicemail/Email/Text)?

Is the client in a placement that is considered locked or partially blocked?

Did the client miss the visit?



What Information Blocks Billing?

Scenario 1

What type of provider provided the service?

- Case Manager

Which Service Code best represents the service you actually provided?

- Rehabilitation

How was the service provided?
(In-Person, Remote, Voicemail, Email, etc.)

- In-Person

Is the client in a placement that is considered locked or partially blocked?

- Yes. Serenity House which is a Partial Block location.

Did the client miss the visit?

- No

What Information Blocks Billing?

Scenario 1

What type of provider provided the service?

- Case Manager

Which Service Code best represents the service you actually provided?

- Rehabilitation

How was the service provided?
(In-Person, Remote, Voicemail, Email, etc.)

- In-Person

Is the client in a placement that is considered locked or partially blocked?

- Yes. Serenity House which is a Partial Block location.

Did the client miss the visit?

- No

What Information Blocks Billing?

Scenario 2

What type of provider provided the service?

- Therapist

Which Service Code best represents the service you actually provided?

- Therapy

How was the service provided?
(In-Person, Remote, Voicemail, Email, etc.)

- N/A

Is the client in a placement that is considered locked or partially blocked?

- No. The client lives in the community.

Did the client miss the visit?

- Yes.

What Information Blocks Billing?

Scenario 2

What type of provider provided the service?

- Therapist

Which Service Code best represents the service you actually provided?

- Therapy

How was the service provided?
(In-Person, Remote, Voicemail, Email, etc.)

- N/A

Is the client in a placement that is considered locked or partially blocked?

- No. The client lives in the community.

Did the client miss the visit?

- Yes. Use **“Missed Visit”** location code.

What Information Blocks Billing?

Scenario 3

What type of provider provided the service?

- Case Manager

Which Service Code best represents the service you actually provided?

- Unbillable Service (55). I helped the client move in to a new apt, but no MH services were provided.

How was the service provided?
(In-Person, Remote, Voicemail, Email, etc.)

- In-Person

Is the client in a placement that is considered locked or partially blocked?

- No. The client lives in the community.

Did the client miss the visit?

- No

What Information Blocks Billing?

Scenario 3

What type of provider provided the service?

- Case Manager

Which Service Code best represents the service you actually provided?

- Unbillable Service (55). I helped the client move in to a new apt, but no MH services were provided.

How was the service provided?
(In-Person, Remote, Voicemail, Email, etc.)

- In-Person

Is the client in a placement that is considered locked or partially blocked?

- No. The client lives in the community.

Did the client miss the visit?

- No

2025 QM Training Schedule

CalAIM Trainings

Join QM every 3rd Thursday of the month from 10:30am - 12pm at the [Zoom link here!](#)

Training is mandatory for all contractors and BHRS. Please mark your calendars!

APRIL 17 Coding Services Part 2 (MH only)

MAY 15 Progress Notes (MH & SUD)

JULY 17 Access to SMHS (Medical Necessity) Part 1 (MH only)

AUG 21 Access to SMHS (Medical Necessity) Part 2 (MH only)

SEPT 18 Care Plan/Problem List (MH & SUD)

All trainings
will include
live Q&A!

RECORDINGS AVAILABLE NOW IN LMS



- Documentation Manual Training (MH only)
- Access/Medical Necessity Training (MH only)
- Service Codes Training (MH only)
- Bonus Z-Code Training (MH only)
- Progress Notes Training (MH & SUD)
- Assessment Training (MH only)
- Coding Services Part 1 (MH only)

All trainings will be made available on LMS subsequently.
For questions, email hs_bhrrs_ask_qm@smcgov.org.

Flyer updated 4/16/25.

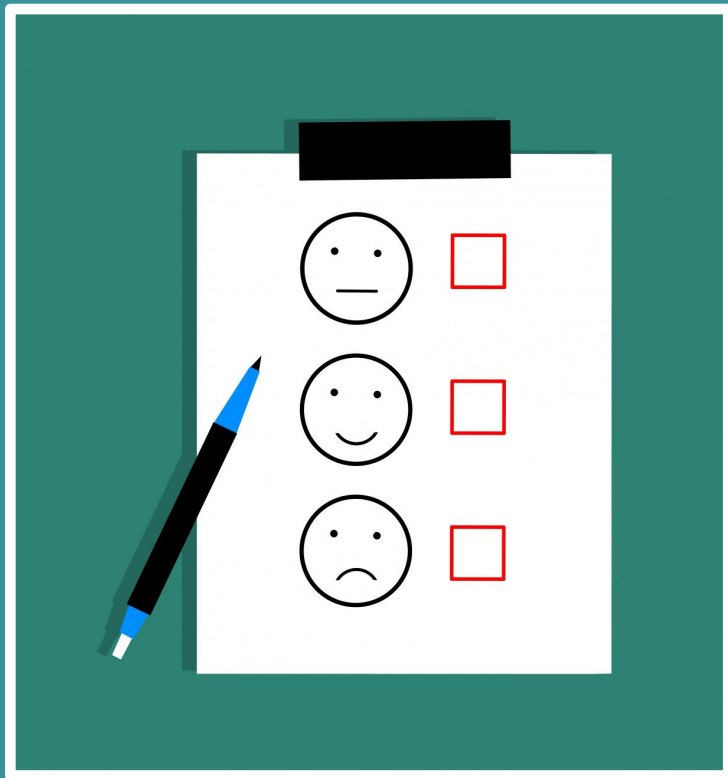
Resources



- [BHRS QM Website](#)
- [HS_BHRS_ASK_QM@smcgov.org](#)
- [BHRS Service Codes Cheat Sheet](#)
- [Location Codes Index](#)
- [Scope of Practice Matrix](#)
- [Avatar NX Updates and Tips](#)
- [BHRS CalAIM Hub](#)



Training Evaluation



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Questions?