

February 29, 2024

## New Billing Code for Enhanced Care Management Multidisciplinary Team Conference Services

Dear providers,

The Department of Health Care Services (DHCS) has recently added a new HCPCS code, G9007, to be used when billing for Enhanced Care Management services.

**Read DHCS' most recent Enhanced Care Management (ECM) & Community Supports (CS) coding guidelines here:** <https://www.dhcs.ca.gov/Documents/MCQMD/Coding-Options-for-ECM-and-Community-Supports.pdf>

Code	Description	Modifiers	Modifier Description
G9007	Multidisciplinary Team Conference: Provided/Initiated by ECM Provider's Clinical Staff	No modifiers	Used to indicate when a multidisciplinary team conference occurs between the Member's ECM lead care manager and one or more other Providers involved with managing a member's care. No modifier is required for the use of this code because it is assumed that these interactions will either be initiated by or involve participation of clinical staff.

Please note:

- This new code is to be used when a multidisciplinary team (MDT) conference/meeting occurs with the member's ECM lead case manager and one or more providers involved with managing the member's care. This can be a clinical supervisor, the member's primary care provider, a specialty care provider, HPSM integrated care management team, community supports provider, or a LTSS provider (i.e. CBAS staff and/or IHSS staff and/or caregiver).
- No modifier is required as DHCS and HPSM assumes the multidisciplinary team meeting is initiated, provided or facilitated by an ECM provider's clinical staff. Examples include:
  - ECM lead case manager (if a clinician).

- A clinical supervisor (if a clinician) on the ECM provider team alongside the ECM lead case manager.
  - A meeting between the ECM lead case manager and clinical supervisor, or any clinical care team member (e.g. HPSM ICM clinical care manager or medical director, primary care provider, specialty care provider) involved in managing member's care.
- G9007 is billable with an active ECM prior authorization and is to be used for members enrolled in ECM.
- If submitted as the first claim for the month, G9007 will be paid the same monthly case rate as G9008 and G9012. All other submissions will be paid zero. All other encounter codes should still be submitted as applicable.
- You may bill using G9007 for multi-disciplinary team meetings that occur as of January 2024.

Please direct questions to [PSInquiries@hpsm.org](mailto:PSInquiries@hpsm.org).

Thank you,  
The Health Plan of San Mateo