

**April 16, 2025**

**Partnership HealthPlan of California Medi-Cal – Updated April 16, 2025**

**Important Provider Notice #462**

**Subject: Dyadic Care Services – Effective January 1, 2023**

Dyadic services may only be provided by the following providers who are specially trained and qualified to deliver dyadic services within their respective scope of practice as defined by the applicable California licensing body:

- Physicians (MD/DO), including licensed psychiatrists
- Licensed clinical social workers (LCSWs)
- Licensed professional clinical counselors (LPCCs)
- Licensed marriage and family therapists (LMFTs)
- Psychiatric physician assistants (PAs)
- Licensed psychologists
- Associate marriage and family therapists (AMFTs)\*
- Associate professional clinical counselors (APCCs)\*
- Associate clinical social workers (ASWs)\*
- Psychology associates\*

\*Note: Associate-level provider types may render dyadic services under the supervision of a licensed, enrolled Medi-Cal provider who submits claims on their behalf. On the CMS-1500 claim form (or 837P electronic equivalent), the associate provider's name must be listed in the additional claim information field (Box 19) or in an attachment, along with the supervising provider's National Provider Identifier (NPI) number as the "billing provider."

Partnership covers the following dyadic services:

- Dyadic behavioral health visits
- Dyadic comprehensive community support services
- Dyadic psychoeducational services
- Dyadic family training and counseling for child development
- Brief emotional/behavioral assessments
- Adverse childhood experiences (ACEs) screenings
- Screening, brief intervention, and referral to treatment (SBIRT)
- Depression screenings
- Health behavior assessments and interventions
- Psychiatric diagnostic evaluations
- Tobacco cessation counseling

The following billing codes, along with identified diagnosis code(s), modifier(s), and frequency limits, may be used for the covered dyadic services listed above when submitting claims:

#### DBH Visits

Billing Code	Description	Diagnosis Code	Modifier	Frequency Limit
H1011	DBH visit	Z13.39	U1 (dyadic service)	Two per year

#### Dyadic Comprehensive Community Support Services

Billing Code	Description	Diagnosis Code	Modifier	Frequency Limit
H2015	Dyadic Comprehensive Community Support Services, per 15 minutes	Any ICD-10 diagnosis code may be used	U1 (dyadic service)	24 per year

#### Dyadic Family Training and Counseling for Child Development Services

Billing Code	Description	Diagnosis Code	Modifier	Frequency Limit
T1027	Dyadic Family Training and Counseling for Child Development, per 15 minutes	Any ICD-10 diagnosis code may be used	U1 (dyadic service)	24 per year

#### Dyadic Psychoeducational Services

Billing Code	Description	Diagnosis Code	Modifier	Frequency Limit
H2027	Dyadic Psychoeducational Services, per 15 minutes	Any ICD-10 diagnosis code may be used	U1 (dyadic service)	24 per year

#### ACE Screening

Billing Code	Description	Diagnosis Code	Modifier	Frequency Limit
G9919	Screening performed and positive and provision of recommendations) is to be used when the member's ACE score is four or greater (high risk)	Any ICD-10 diagnosis code may be used	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per year for ages 0 to 20 One per lifetime for ages 21 to 64
G9920	(Screening performed and negative) is to be used when the ACE score is between zero and three (lower risk)	Any ICD-10 diagnosis code may be used	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per year for ages 0 to 20 One per lifetime for ages 21 to 64

**Screening: Brief Intervention and Referral to Treatment**

<b>Billing Code</b>	<b>Description</b>	<b>Diagnosis Code</b>	<b>Modifier</b>	<b>Frequency Limit</b>
G0442	Annual alcohol misuse screening, 15 minutes	Any ICD-10 diagnosis code may be used	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day, per provider
H0049	Alcohol and/or drug screening	Any ICD-10 diagnosis code may be used	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day, per provider
H0050	Alcohol and/or drug services, brief intervention, per 15 minutes	ICD-10 diagnosis code specific to alcohol and/or drug use or condition when service is for child  Z71.89 when service is for caregiver	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day, per provider

**Emotional/Behavioral Assessment**

<b>Billing Code</b>	<b>Description</b>	<b>Diagnosis Code</b>	<b>Modifier</b>	<b>Frequency Limit</b>
96127	Brief Emotional/Behavioral Assessment	Any ICD-10 diagnosis code may be used when service is for child  Z13.39 when service is for parent(s)/caregiver(s)	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	Two per day, per provider

### Depression Screening

Billing Code	Description	Diagnosis Code	Modifier	Frequency Limit
G8431	Depression Screening (Positive with Follow-up Plan)	Any ICD-10 diagnosis code may be used	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per year
G8510	Depression Screening (Negative)	Any ICD-10 diagnosis code may be used	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per year

### Health Behavior Assessment and Interventions

Billing Code	Description	Diagnosis Code	Modifier	Frequency Limit
96156	Health behavior assessment	ICD-10 diagnosis code specific to child's physical health Z71.89 when service is for parent(s)/caregiver(s) physical health	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day, any provider
96167	Health Behavior Intervention (HBI); family with patient	ICD-10 diagnosis code specific to child's physical health Z71.89 when service is for parent(s)/caregiver(s) physical health	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day, any provider
96168	HBI, family with patient; each additional 15 minutes	ICD-10 diagnosis code specific to child's physical health Z71.89 when service is for parent(s)/caregiver(s) physical health	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	Six per day, any provider

**Health Behavior Assessment and Interventions (continued)**

<b>Billing Code</b>	<b>Description</b>	<b>Diagnosis Code</b>	<b>Modifier</b>	<b>Frequency Limit</b>
96170	HBI, family without patient	ICD-10 diagnosis code specific to child's physical health Z71.89 when service is for parent(s)/caregiver(s) physical health	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day, any provider
96171	HBI, family without patient; each additional 15 minutes	ICD-10 diagnosis code specific to child's physical health Z71.89 when service is for parent(s)/caregiver(s) physical health	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day, any provider

**Psychiatric Diagnostic Evaluation**

<b>Billing Code</b>	<b>Description</b>	<b>Diagnosis Code</b>	<b>Modifier</b>	<b>Frequency Limit</b>
90791	Psychiatric diagnostic evaluation	ICD-10 code specific to child's mental health or DSM-5-TR diagnosis Z13.39 when service is for parent(s)/caregiver(s) mental health	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day
90792	Psychiatric diagnostic evaluation with medical services	ICD-10 code specific to child's mental health or DSM-5-TR diagnosis Z13.39 when service is for parent(s)/caregiver(s) mental health	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day

### Tobacco Cessation Counseling

<b>Billing Code</b>	<b>Description</b>	<b>Diagnosis Code</b>	<b>Modifier</b>	<b>Frequency Limit</b>
99406	Smoking and tobacco use cessation counseling visit; intermediate, greater than three minutes up to 10 minutes	Any ICD-10 diagnosis code may be used when service is for child Z71.89 when service is for parent(s)/caregiver(s)	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day
99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	Any ICD-10 diagnosis code may be used when service is for child Z71.89 when service is for parent(s)/caregiver(s)	U1 (dyadic service) If applicable, UK (parent(s)/caregiver(s) not enrolled in Medi-Cal) or HB (parent(s)/caregiver(s) enrolled in Medi-Cal)	One per day

For further information regarding this, please contact the Partnership Claims Department at **(707) 863-4130** or **(855) 798-8757**.