



Community Health Connections Health Home Initial 60 Days Billable Contact Note Guidance

A change was made to contact notes to allow them to be billable post-enrollment prior to a Plan of Care being completed. This is done by selecting "**201 – Billable Contact – Initial 60 Days Only**" from the service code dropdown. This use of this code should generally be an exception and not the norm.

Service Code*	
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201 - Billable Contact - Initial 60 Days Only 999 - No Bill	

When to use the 201 service code:

On newly enrolled members who do not yet have a Plan of Care in place. This service code should only be used on enrolled members prior to completing the Plan of Care. It should not be used on members in any status besides enrolled and should not be used once a Plan of Care has been created.

Only in the 1st **60 days after enrollment.** Since this is meant to allow for time for the Plan of Care to be completed and that Plan of Care must be done within 60 days after enrollment this service code is only intended to be used in that timeframe. If the Plan of Care is not in place within those 60 days, this service code should not be used as the member should not be billed at the enrolled rate until a Plan of Care is in place.

Only for core service delivery. If the activities would not qualify as a billable core service for enrollment, do not use this service code.

When to not use the 201 service code:

Do not use this service code in any status other than enrolled. This service code should not be used in any other status (such as client search or DSE).

Do not use this service code after 60 days post enrollment.

Do not use this service code once a Plan of Care is in place. Once a Plan of Care is in place a CareManager note should be used to document core service delivery.

Do not use this service code if a core service is not delivered. If the note would **not** meet the criteria for billable core service delivery, this service code should not be used.