



**Guidance for Medicaid Managed Care Plans (Plans) and
Comprehensive Psychiatric Emergency Programs (CPEP) Providers:
CPEP Extended Observation Beds (EOB)**

CPEP services, including observation in a CPEP EOB, are Emergency Services. Prior authorization is never required. Plans must cover and pay for Emergency Services regardless of whether the provider that furnishes the services has a contract with the Plan.

An individual may not be involuntarily retained in a CPEP for more than 24 hours unless the individual is admitted to an EOB. Retention in a CPEP EOB may not exceed 72 hours (voluntarily or involuntarily), calculated from the time the individual is initially received into the CPEP emergency room.

CPEP EOB Claiming to Plans:

- The EOB rate may only be claimed when a person has been held in the CPEP more than 24 hours.
- For billing purposes admission to the EOB is the calendar day after the calendar day in which the CPEP full or brief visit is completed. A CPEP brief or full visit claim is submitted for the calendar day in which the visit is completed. Claims for the EOB are submitted for each subsequent day, up to 72 hours from the individual's initial arrival in the CPEP.
- Coding:
 - Rate Code 4049* – Extended Observation Bed
 - Revenue Code – Plans will accept, at a minimum, the following codes:
 - 0114 Room & Board - Private (Medical or General), Psychiatric
 - 0124 Room & Board - Semi-Private Two Bed (Medical or General), Psychiatric
 - 0129 Room & Board - Semi-Private Two Bed (Medical or General), Other
 - 0134 Room & Board - Semi-Private - Three and Four Beds, Psychiatric
 - 0154 Room & Board - Ward (Medical or General), Psychiatric
 - 0169 Room & Board - Other, Other
 - 0450 Emergency Room, General Classification
 - 0459 Emergency Room, Other Emergency Room
- If the individual is admitted to the psychiatric inpatient unit the EOB rate is not claimed. The psychiatric inpatient unit rate is claimed instead, from the beginning of the admission to the CPEP EOB.
- *Rate code 4049 is not currently available for Fee-For-Service (FFS) claiming. Continue to use the psychiatric inpatient rate code 2852 for CPEP EOB claims to FFS until further notice.

For more information please refer to the Behavioral Health Billing Guidance document and Coding Taxonomy chart on the OMH website: <http://www.omh.ny.gov/omhweb/bho/billing-services.html>

If you have any questions please contact OMH-Managed-Care@omh.ny.gov.