

**To:** All Providers Participating in the Nebraska Medicaid Program  
**From:** Drew Gonshorowski, Director *DG*  
**Date:** June 15, 2026  
**Re:** Billing changes and clarifications for Crisis Intervention Mental Health and Social Detoxification services

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This provider bulletin is being issued to notify Nebraska Medicaid providers of upcoming changes to crisis stabilization coverage **effective July 1, 2026**, and to clarify billing guidelines.

## Changes to Coverage Codes

The following coverage changes will apply to dates of service on and after July 1, 2026:

- HCPCS code S9484 with the 52 modifier - Crisis Stabilization (15 minutes) – Not covered

## Billing Clarifications

HCPCS code S9484– Crisis Intervention Mental Health Services (per hour):

- This code may be billed for a maximum of 10 units per day per beneficiary
- This code is only for facility-based care and may not be used for mobile crisis response
- May NOT be billed on the same day as:
  - S9485
  - H0012
  - 90791 (with or without the 52 modifier)
  - 90792
  - H0001 (with or without the 52 modifier)
  - H2011 (with or without the HT modifier)
  - 90832-90834 (modified or unmodified)
  - 90836-90840 (modified or unmodified)
  - 90846-90847 (modified or unmodified)
  - 90853 (modified or unmodified)

HCPCS code S9485 – Crisis Intervention Mental Health Services (per diem):

- May be billed a maximum of one time per day per beneficiary
- This code is only for facility-based care and may not be used for mobile crisis response
- May NOT be billed on the same day as:
  - S9484
  - H0012
  - 90791 (with or without the 52 modifier)
  - 90792

- H0001 (with or without the 52 modifier)
- H2011 (with or without the HT modifier)
- 90832-90834 (modified or unmodified)
- 90836-90840 (modified or unmodified)
- 90846-90847 (modified or unmodified)
- 90853 (modified or unmodified)

HCPCS code H0012 – Adult Substance Use Disorder Social Detoxification (per diem):

- May be billed a maximum of one time per day per beneficiary
- This code is only for facility-based care and may not be used for mobile crisis response
- May NOT be billed on the same day as:
  - S9484
  - S9485
  - H2011 (with or without the HT modifier)
  - 90832-90834 (modified or unmodified)
  - 90836-90840 (modified or unmodified)
  - 90846-90847 (modified or unmodified)
  - 90853 (modified or unmodified)

## Provider Resources

Nebraska Administrative Code Title 471, Chapters 20 and 32:

<https://rules.nebraska.gov/rules?agencyId=37&titleId=226>

Nebraska Medicaid State Plan:

<https://dhhs.ne.gov/Documents/Medicaid%20State%20Plan%20Part%202.pdf>

Nebraska Medicaid Service Definitions:

<https://dhhs.ne.gov/Behavioral%20Health%20Service%20Definitions/Medicaid%20Requirements%20for%20Substance%20Use%20Disorder%20and%20Applied%20Behavior%20Analysis%20Services.pdf>

Mental Health and Substance Use fee schedule: <https://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx>

If you have questions regarding this bulletin, please contact [DHHS.MedicaidMHSU@nebraska.gov](mailto:DHHS.MedicaidMHSU@nebraska.gov). Health plans should also copy their contract manager.

Provider Bulletins, such as this one, are posted on the DHHS website at

<http://dhhs.ne.gov/pages/Medicaid-Provider-Bulletins.aspx>. Please subscribe to the page to help you stay up to date about new Provider Bulletins.