



Group Counseling Notes Tip Sheet DMC-ODS

What is Group Counseling?

The DMC-ODS Intergovernmental Agreement (2022-2027) defines group counseling as: “Group Counseling consists of contacts with multiple beneficiaries at the same time. Group Counseling shall focus on the needs of the participants. Group counseling means contacts in which one or more therapists or counselors treat two or more beneficiaries at the same time with a maximum of 12 in the group, focusing on the needs of the individuals served. A beneficiary that is 17 years of age or younger shall not participate in-group counseling with any participants who are 18 years of age or older. However, a beneficiary who is 17 years of age or younger may participate in group counseling with participants who are 18 years of age or older when the counseling is at a provider's certified school site” (Exhibit A, Attachment I, Program Specifications)

Required Progress Note Elements

Progress notes document the actual services delivered to the client. DHCS requires that each progress note provide sufficient detail to support the service code selected, and include the following:

- ✓ The type of service rendered.
- ✓ The date of service was provided to the client.
- ✓ Duration of the service
 - which does not include travel & documentation time. Please note travel and documentation time are no longer reimbursable as of 7-1-23.
 - AVATAR will have a defined fields to still enter travel and documentation times to help us determine future rates.
- ✓ Location of the beneficiary at the time of service
- ✓ A narrative describing the service, including how the service addressed the client’s behavioral health need (e.g., symptom, condition, diagnosis, social determinants of health, and/or risk factors)
- ✓ Next steps including, but not limited to, planned action steps by the beneficiary, collaboration with the beneficiary, collaboration provider(s) and any update to the problem list as appropriate.

Additional Requirements

- ✓ The progress note information above remains consistent for services provided in a group setting, with the following additional requirements: For groups facilitated by multiple practitioners, a single progress note signed by one of the practitioners shall be used to document the group service provided. That one progress note shall clearly document the specific involvement and the specific amount of time of involvement of each provider of the group activity.
- ✓ Please note, that Avatar does not allow for different service times for each facilitator. If the co-practitioners are claiming for a different duration of service time, then each provider must write a separate note to capture accurate service time.
- ✓ The group progress note must include an “individualized” portion that is specific to the client—for example, documenting each client’s participation and response to the service, how the group met



the client's specific needs, and/or client progress. When creating the individualized portion of the note for a client, do not include the names of other clients or group participants in a client's medical record.

- ✓ For group counseling services, a list of group participants shall be maintained by the provider. To maintain privacy, client names should not be included in the records of other clients or group participants. Therefore, the list of participant names for group services must not be kept in individual client charts. When using an EHR system to document group services, typically, the system requires you to create and maintain a list of group members. Please refer to your EHR vendor (or BHS Informatics, BHS IT)"
- ✓ The provider shall complete progress notes within three (3) business days of providing a service. The day of service shall be considered day zero (0).

Key tips to remember when writing Group Counseling notes:

1. **Who can provide groups?** Every provider needs to work within their scope of practice to bill for group counseling. Staff must have the credential to provide group counseling to claim for this service.
 - a. Registered and Certified Drug Counselors
 - b. LPHA Physicians and LPHA Non-Physicians—with the exception of Registered Pharmacists

https://www.sfdph.org/dph/files/CBHSdocs/DMC-ODS_Desk_Reference.pdf

2. Billing Code and Units of Time

The HCPCS code for group counseling is H0005, but the exact billing code label will vary based on the EHR (e.g., Avatar vs. Welligent vs. EPIC)

Group Counseling codes are in 15-mn unit increments up to 96 units.

References

- [DMC-ODS Billing Manual v.1.4 \(ca.gov\)](#)
- [BHIN23-068](#)
- [DMC-ODS Intergovernmental Agreement \(2022-2027\)](#)