Residential Level 3.1 RJOT Minutes

February 22, 2019

Attendees:

- Medicaid Nicholas Shearin
- BHA Marian bland, Kim Qualls, Steve Reeder, Sheba Jeyachandran, Cynthia Petion, Risa Davis
- Beacon Karl Steinkraus, Dr. Olivares, Joana Joasil

Provider: Kennedy Hinman, Bryce Hudak, Anne Schooley, Rhonda Moreland, Faythe Johnson, Stephanie Kersheskey, Barbara Trovinger

Announcements:

- All PWC applications are due by 2-27-19. BHA has extended the application due date.
- BHA will be sending out a brief technical assistance needs survey within the next week.
- One more RJOT call is scheduled for Friday, March 15, 2019 at 9:30am. Provider Council is held on Friday, March 8, 2019 at 10:00am at the Beacon Administrative offices.

BHA will be holding the Level 3.1 Quality Implementation Workgroup Provider Quality workgroup on Friday, March 22, 2019 (please note change in date). The purpose of this workgroup is to bring together level 3.1 residential SUD treatment providers and BHA staff to develop best practices and guidance recommendations for this level of care.

> If you are interested in joining this discussion, please send an email of interest to <u>marylandproviderrelations@beaconhealthoptions.com</u>

Discussion held around a late provider question:

We have 3.1 houses. Patients receive the 5 minimum hours of therapeutic services. We are partnered with an outpatient provider type 50 for MAT. I would like to know if this is an appropriate situation?

Our PT 54 bills the 3.1 W7310 w/ RESRB codes daily, the PT 50 has agreed to see these particular patients on a limited basis since they are receiving clinical hours in the 3.1. They would like to bill for the H0004 bi-weekly (1 hour session) and the H0005 weekly (1 hour session), in addition to the medication management codes 99211-99215 (as appropriate).

Will they be reimbursed for the assessment, H0001?

They (the PT 50) would like to do Urinary Drug Screening (UDS), per their usual schedule. They stated that LabCorp bills Medicaid for the services, their PT 50 does not get reimbursed for UDS. Is this appropriate for them to do? We know that UDS are included in our residential rates, so we do point of care testing often, with only necessary tests going out for lab screening.

Response: If they meet Medical Necessity Criteria for both levels, then 3.1 patients may receive both MAT services and Level 1 Outpatient services (H0004/H0005) from a Substance Use Disorder Treatment provider (PT 50) while receiving 3.1 services. The PT 50 may bill for the H0001 as long as the 3.1 and Level 1 are separate providers preforming separate assessments. If it is the same provider performing the same assessment for 3.1 and level 1 the program may not bill the H0001 twice. In addition, the 3.1 W7310 is an all-inclusive rate and may not be billed in conjunction with other drug testing codes (please see the SUD Fee Schedule service rule for ASAM 3.1).