



State of New Jersey
Department of Human Services
Division of Medical Assistance & Health Services

NEWSLETTER

Volume 29 No. 06

March, 2019

TO: Independent Clinics, Physicians, Physician Assistants, Advanced Practice Nurses and Managed Care Organizations – **For Action**

SUBJECT: Office Based Addictions Treatment (OBAT) and Elimination of Prior Authorization for Medication Assisted Treatment (MAT) for All MAT Providers

EFFECTIVE: January 1, 2019

PURPOSE: The Division of Medical Assistance and Health Services, in collaboration with the Division of Mental Health and Addiction Services, has developed a new program to cover and support Medication Assisted Treatment (MAT) – the Office Based Addictions Treatment (OBAT) program. The OBAT program is designed to enhance access and improve utilization of non-methadone MAT services for Medicaid beneficiaries by establishing additional supports and reducing administrative barriers for primary care providers (PCPs) providing these addiction services.

One administrative barrier being collectively eliminated for ALL providers is prior authorization for MAT services and any associated behavioral health treatment provided under a bundled payment.

BACKGROUND: Increasing PCPs participation in substance use disorder (SUD) treatment, particularly MAT, offers an opportunity to improve access and to expand integration of care within NJ FamilyCare. The majority of NJ FamilyCare beneficiaries are covered by a Medicaid managed care organization (MCO) and receive their primary care through contracted provider practices. Until now, many PCPs have not participated in the treatment of substance use-related disorders (beyond referral) because of perceived barriers to providing treatment, a perceived lack of reimbursement, and/or a lack of experience/knowledge treating these conditions. These barriers include prior authorization requirements and discerning what is covered by the MCO and/or the State. NJ FamilyCare has designed the OBAT program to support providers by increasing rates, removing prior authorization requirements, allowing PCPs to bill the managed care plan for this SUD service when the beneficiary is covered by managed care and offering clinical guidance and support.

ACTION: Effective 1/1/2019, NJ FamilyCare, and its contracted MCOs, shall reimburse eligible providers who meet OBAT provider standards:

- From January 1, 2019 to March 31, 2019, Medicaid pays \$325 for a “one-time, per patient” intake and evaluation assessment (90792HF). Effective 4/1/19, this amount increases to \$438.17.
- OBAT providers can continue to bill the appropriate E&M codes for services (Includes reimbursement at the State fee-for-service (FFS) rate -- approximately 100% Medicare) for SUD related office visits utilizing evaluation and management (E/M) codes 99201HF-99205HF or 99211HF-99215HF.
- In addition to the E&M codes, the OBAT provider is able to utilize a service code for the provision of Navigator services related to medication-assisted treatment. OBAT providers can bill \$152 (one time) for the “Navigator” psychosocial assessment and establishment of a patient specific treatment plan (H0006HFHG).
- Navigator services may then be billed weekly at \$76 (H0006HFSU) for up to six weeks (E&M codes can continue to be billed concurrently. Billing for H0006HFSU does not need to be continuous weeks but ends once the sixth unit is billed or the next phase is billed. Navigator services can then be billed monthly at \$76 (H0006HF) for as long as issues identified on the treatment plan remain unresolved. E&M codes can continue to be billed concurrently.
 - Note - Counseling services provided through an affiliation agreement with a community-based provider will be billed separately by that provider and be in addition to the PCP payment.

“Navigator” services, an essential component of OBAT, were designed to reimburse PCP practices for addressing the patient’s psychosocial concerns and coordination of care. Navigator services are considered necessary to ensure successful treatment outcomes. While the navigator works within the provider practice, they are encouraged to work with individuals outside of the provider interaction to address any non-medical factors related to SUD. Outside of the physician intake visit required to establish a need for MAT services, billing for these services does not require the individual to be seen by the physician, APN or PA on the same date of service. However, they must have at least one face-to-face encounter with the navigator during each time unit (weekly or monthly) that is billed. While the PCP does not need to see the beneficiary on the same date of service, the primary care provider should see the patient at least monthly to demonstrate the individual is still receiving MAT services. The practice may bill for these services as per the attached schedule. Please note:

- Federally Qualified Health Centers (FQHCs), Opioid Treatment Programs (OTPs), and Certified Community Behavioral Health Centers (CCBHCs) are already paid bundled rates that can encompass these services and therefore are not eligible for the new navigator reimbursement.
- Fully integrated providers (FQHCs, OTPs, and CCBHCs providing medical, MAT, and counseling services) also are paid rates that can encompass these services and are not eligible for navigator reimbursement.

- Fully integrated providers (FQHCs, OTPs, CCBHCs) may bill for peer support. Peers are individuals with lived experience who can support a person with SUD's path to recovery. Peers are responsible for assisting beneficiaries to keep appointments and connect with community programs that may assist individuals establishing and maintaining recovery.

Please note that the use of peers within OBAT is a service currently under development and will not be available prior to July 1, 2019

Prior Authorization

Effective 4/1/2019, no prior authorization shall be allowed for medications and/or bundled services that include administering medication for the treatment of opioid or alcohol use disorders. Safety edits, posted as a result of prospective drug utilization review (DUR), are allowed. For claims billed through the pharmacy program, formulary preferences may be utilized.

Buprenorphine/naloxone combination products- No PA

Buprenorphine only- No PA

Naltrexone (oral)- No PA

Naltrexone XR- (For opioid, alcohol or both)- No PA

Methadone (oral) for the treatment of SUD- No PA

Sublocade- No PA

Probuphine- No PA

For independent clinics providing MAT services, there shall be no prior authorization for methadone (H0020HF) or non-methadone (H0033HF) dispensed per diem or as bundled services billed under H0020HF26 (methadone) or H0033HF26 (non-methadone).

OBAT Provider Standards:

- Prescribing of approved MAT medications onsite by qualified prescriber (DATA 2000 waiver). Induction may occur onsite or via home induction but must be available onsite.
- Follow standard best practice guidelines for prescribing of MAT.

- Physician, nurse, or other qualified healthcare professionals provide education that is consistent with the nature of the problem(s) and the patient's and/or family's needs related to substance use, MAT, and associated health conditions.
- Participate in training or consultation offered through the Centers of Excellence (COE) as needed.
- Develop and maintain integrated care relationships.
- Provide, or arrange, for substance use counseling on an as needed basis, consistent with American Society of Addiction Medicine (ASAM) guidelines. Must offer counseling in conjunction with MAT or refer for counseling, which includes establishing referral relationships for services not provided by the OBAT. This includes referrals to Premier Providers or COE as needed.
- Assess and maintain risk management criteria such as Prescription Monitoring Program (PMP) checks, random drug screening, and managing client service plans for adherence.
- Utilize multi-disciplinary staff to provide MAT, counseling and care management. Primary care providers may not serve as the primary care provider and the Navigator.

NJ FamilyCare OBAT is a matrix of providers who are encouraged to work together to support an individual's treatment goals. The provider type that is required to meet an individual's needs depends on the needs of that individual. Providers are encouraged to work together, share experience and knowledge and promote wellness for their SUD patients. There are three OBAT provider types:

- 1) Office Based Addictions Treatment (OBAT) providers- Consists of primary care physicians, APNs and PAs with a Data 2000 Waiver who meet established standards for participation. OBAT providers must employ Navigators (RN, LPN, SW, Baccalaureate degree with 2 years lived experience or an Associate degree with 4 years lived experience). OBAT providers (including Navigator services) must bill for this service through the beneficiary's managed care plan. FFS billing is available prior to managed care enrollment only.
- 2) Premier provider- consists of independent clinics or DOH licensed physician practices capable of providing fully integrated care (MAT, counseling and primary medical care). Fully integrated care providers are not eligible for separate reimbursement for the use of a navigator given that these services are supported in their current reimbursement. However, providers may be reimbursed for peers to provide support to beneficiaries in their recovery. FQHCs and ambulatory care clinics shall bill the MCO for OBAT services (physical and counseling services) for all Medicaid eligible recipients. CCBHCs shall continue to be paid FFS as per their prospective payment arrangement. Independent clinics, including OTPs, shall bill MCOs for OBAT services provided to a DDD, FIDE-SNP or MLTSS beneficiary. All other eligible beneficiaries shall be covered under FFS.

- 3) Centers of Excellence (COE)- a State contracted provider capable of providing mentorships, provider peer services, and developing future office based MAT providers through provider (MD, DO, APN or PA) training. COEs are required to provide clinical advice to OBAT providers for complex cases. The COE will provide care for those beneficiaries with complex needs, as needed, and will transition stable and appropriate beneficiaries to partnered Premier and OBAT providers. Billing depends on the provider type of the COE or their affiliated care provider and shall follow the billing guidance under OBAT and Premier providers above.

Primary Care Providers (PCP)

In order for a PCP to qualify as an OBAT provider, they must be DATA 2000 waived to prescribe Buprenorphine. Those who are not yet waived can take advantage of DMHAS training opportunities and are encouraged to become DATA 2000 waived providers and participate in this new model of care. DATA 2000 waived providers can also take advantage of available support and mentorship provided by COEs.

Once the provider meets the established standards and is properly waived, the provider **must** offer “Navigator” services in order to receive the additional reimbursement. Navigators must be registered nurses, licensed practical nurses, social workers or individuals with a baccalaureate degree and at least two years of life experience related to SUD or an associate degree with four years of life experience related to SUD. Navigators may meet with the patient independently or with the PCP present, but provide a separately reimbursable service that functions primarily to address the psychosocial needs of the patient with an SUD. The position may share other duties depending on the size of the provider’s population being treated.

Navigators are responsible to work with the patient to establish a comprehensive, individualized treatment plan that addresses the non-medical factors that have an impact on SUD treatment. This may include connecting patients with social service organizations, recovery supports, family education or referrals to alternate levels of care as required. The navigator and PCP then work together to ensure all of the patient’s SUD needs are being addressed and to fully provide integrated care.

Since research has shown that patients have better outcomes with counseling in addition to MAT, the navigator is responsible for establishing relationships with community counselors and programs, as required, and to assist their patients in arranging for, and keeping, appointments. Additionally, when primary providers have complex cases or situations, navigators may coordinate referrals for consultative services at clinics or centers of excellence that may offer additional clinical experience.

Premier Providers

Premier providers are integrated care providers who offer both the medical and counseling components of OBAT within a single practice. They include most FQHCs, OTPs, CCBHCs and ambulatory care clinics licensed to provide substance use services

in addition to MAT services. Since these providers are capable of providing integrated care, they do not qualify for navigator reimbursement.

FQHCs, OTPs, and CCBHCs are paid bundled rates that are inclusive of navigator-like services and are not eligible for navigator reimbursement.

Centers of Excellence

Centers of Excellence (COE) are contracted providers capable of providing clinical leadership and support for other providers. Currently contracted COEs include the Rutgers University Medical School – Newark, and the Cooper Medical School of Rowan [University and Rowan University School of Osteopathic Medicine](#). In addition to the provision of OBAT, these contracted providers offer mentorships and consultation, offer training opportunities to PCPs to become OBAT providers, fellowships to increase the pool of SUD specialists available in New Jersey, and provide consultation for medically complex cases. COEs are also available to provide treatment for individuals with multiple failed treatment attempts. COEs may provide MAT and/or counseling services directly or through provider affiliations. If the COE is fully integrated, they are eligible to provide peer services and assist beneficiaries to obtain services in the community (housing, job programs, and/or legal issues) that will assist them to maintain their recovery. Peer services remain under development and will be described in a future newsletter.

Treatment Phases

OBAT consists of three phases of treatment: Initiation, Stabilization and Maintenance. These phases and how they should be billed are listed in the table below:

Treatment Phase	Units	E&M Code
<p>Initiation</p> <p>Visit type: Adult Wellness Visit or acute visit for Opioid Use Disorder or Dependence.</p> <p>A comprehensive evaluation must be related to chemical addiction (excluding nicotine) and must require MAT to qualify for enhanced rates</p>	<p>Unit of Service:</p> <p>One-time fee billed on initial visit</p> <p>H0006 HF HG</p> <p>Proposed Rate for Navigator intake and treatment planning billed with H0006 HF HG: \$152.00</p>	<p>90792 HF- physician intake for OBAT program:\$325 (\$438.17 after April 1, 2019)</p> <p>Includes history and physical, appropriateness for MAT, medication mgmt., toxicology screening, medication/health education and treatment planning.</p> <p>Providers cannot bill</p>

	*H0006 HF HG must be billed with E/M or 90792 HF		for the enhanced E/M rate and 90792 HF for the same visit and 90792 HF may be billed once per patient per episode of care.
<p>Stabilization</p> <p>Visit type: follow up visit for symptom management, evaluation of cravings and potential adjustment of MAT</p> <p>Buprenorphine, Naltrexone (injectable or oral), Acamprosate and others drugs in evidence based treatment protocols for alcohol or opioids</p>	<p>Unit of Service: Weekly (estimated 4-6 weeks)</p> <p>H0006 HF SU</p> <p>Proposed Rate: \$76.00 (limited to once per week, maximum of 6 weeks)</p> <p>The treatment phase may be billed for the calendar week following induction and weekly thereafter</p> <p>May or may not be billed with E/M</p> <p>Must see Navigator face-to-face to bill. May or may not be billed with E/M code</p>	<p>Navigation. Range of services include: assisting with patient follow up for setting up and keeping counseling appointments; community connections, employment and/or housing support and necessary education for treatment compliance and recovery planning initiation.</p>	<p>99211-99215 HF- Treatment review, medication mgmt., toxicology screening, medication/health education and treatment plan.</p>

<p>Maintenance</p> <p>Visit type: MAT Medication evaluation and ongoing treatment</p>	<p>Unit of Service: Monthly (continues based on individual need)</p> <p>H0006HF</p> <p>Proposed rate: \$76.00</p> <p>(billed first calendar month following final H0006 HF SU billing and each subsequent calendar month thereafter)</p> <p>May be billed for opioid and/or alcohol MAT treatment</p> <p>Must be billed after face to face visit with Navigator. May or may not be billed with E/M code</p>	<p>Navigation services.</p> <p>Determined stable and actively working on their recovery treatment plan. Range of services include: continued treatment system navigation, counseling, advocacy, community connection, support for education, and employment or housing issues, as needed, and implementing patient's recovery plan.</p> <p>Care management services may include non-face to face time working on care planning, care coordination and data analysis but at least one face to face visit per month</p>	<p>99211-99215 HF- billed for Medication, medication management, medication/health education, toxicology screening and treatment planning.</p> <p>In addition to any E/M code paid for physician's physical evaluation and treatment planning participation</p>
--	--	--	---

* OBAT is for any chemical addiction. The above estimated treatment durations are an example and are based on the treatment for opioid addiction. Alcohol or other chemical addictions may require the two hour intake followed by "as needed" (1-2) weekly payments during the treatment phase followed by monthly billing during the maintenance phase. Services should be provided based on individual need following ASAM guidelines.

If there are any questions regarding the information listed in this Newsletter, please contact The Office of Customer Service at 609-631-4642.

RETAIN THIS NEWSLETTER FOR FUTURE REFERENCE