



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

NEWSLETTER

Volume 27 No. 13

November 2017

TO: Providers of Behavioral Health Services – **For Action**
Health Maintenance Organizations – **For Information Only**

SUBJECT: **NJ FamilyCare (NJFC) Coverage and Reimbursement for Ambulatory Withdrawal Management Services**

EFFECTIVE: Claims with service dates on or after June 5, 2017

PURPOSE: To notify providers of behavioral health services of a decision by the New Jersey Division of Medical Assistance and Health Services (DMAHS) to provide NJFC fee-for-service (FFS) coverage for Ambulatory Withdrawal Management (AWM) services.

BACKGROUND: The provision of ambulatory outpatient withdrawal management (WM) or detoxification services shall apply to substance abuse treatment programs licensed by the Division of Mental Health and Addiction Services (DMHAS) to provide ambulatory WM. Programs shall accept and provide WM services only to clients who meet the ASAM Criteria for Level 2-WM with extended on-site monitoring. Ambulatory WM is indicated when an individual experiences physiological dysfunction during withdrawal, but neither life nor significant bodily functions are threatened. Ambulatory outpatient WM is defined as an organized service delivered by medical and nursing professionals who provide a range of services including medical and clinical interventions, laboratory testing, the dispensing and/or administration of approved medications provided to treat and monitor clients undergoing withdrawal from drugs and alcohol. All programs must comply with N.J.A.C. 10:161B subchapters specific to WM services.

ACTION: Effective for claims with service dates on or after June 5, 2017, AWM services (**HCPCS H0014 HF**) shall be covered by the NJFC FFS program **except** Medicaid Long Term Services and Supports (MLTSS), Division of Developmental Disabilities (DDD) or Fully Integrated Dual Eligible Special Needs Program (FIDE SNP) members who are enrolled in a NJFC managed care plan on or after January 1, 2018. On or after January 1, 2018, coverage of AWM services for these members becomes the responsibility of the managed care plan.

The NJFC FFS allowance for H0014 HF is \$220.00 per day. H0014-HF does not include the initial intake assessment. The intake assessment can be billed in addition to the per diem rate for Ambulatory WM.

The Interim Management Entity (IME) is responsible for issuing prior authorization for SUD treatment services, including AWM services (HCPCS H0014 HF) **with the exception** of MLTSS, DDD or FIDE SNP members who will receive their prior authorization from the managed care plan for AWM services provided on or after January 1, 2018. As performed for other SUD-related treatment services, the IME conducts ASAM review of AWM placements after completing a comprehensive review of supportive clinical documentation to determine medical necessity and the appropriateness of requested SUD treatment (see Medicaid Newsletter Volume 26, No. 06 for additional information).

Initial prior authorizations are limited to 5 days of AWM services. Continuing care authorizations may be provided for extended treatment when the beneficiary continues in AWM with extended on-site monitoring until one of the following criteria are met:

- withdrawal signs and symptoms are sufficiently resolved such that he or she can participate in self-directed recovery or ongoing treatment without the need for further medical or nursing detoxification monitoring; or
- signs or symptoms of withdrawal have failed to respond to treatment and have intensified such that transfer to a more intensive level of WM service is indicated.

AWM services shall include a minimum of two (2) hours of on-site monitoring through face-to-face interactions with the client. AWM services shall include, but may not be limited to:

- daily medical supervision, including physician services and observation of withdrawal;
- monitoring of symptoms, temperature, heart rate, blood pressure and respiratory rate by the program nurse, physician, advanced practice nurse or physician assistant;
- dispensing and/or administration of approved medications for WM;
- twenty-four (24) hour on-call access to a nurse for clients and family; and
- referral and linkages with other providers or services as indicated.

Clients requiring extended on-site monitoring may participate in outpatient (OP) or intensive outpatient (IOP) programs as soon as medically able. OP or IOP services can be billed and provided concurrently with H0014-HF with prior authorization for IOP. Minimum criteria for IOP must be met in addition to the AWM criteria listed above.

Beneficiaries are not eligible to participate in a SUD partial care program while receiving AWM services.

SUD treatment programs providing Medication Assisted Treatment (MAT) are not qualified to provide AWM services. Providers of AWM services must be licensed by the New Jersey Division of Mental Health and Addiction Services (DMHAS). These

programs shall only accept consumers who meet the American Society of Addiction Medicine (ASAM) Criteria, Level 2-WM with extended onsite monitoring.

Providers may contact the IME at 1-844-276-2444 for any FFS policy questions or Molina Medicaid Solutions Provider Services at 1-800-776-6334 for any questions regarding the submission of FFS claims.

On or after January 1, 2018, providers may contact the NJFC managed care plan for any AWM coverage or claim submission concerns related to MLTSS, DDD or FIDE SNP members.

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