



State of New Mexico
Medical Assistance Program Manual
Supplement



DATE: September 24, 2012

NUMBER: 12-10

TO: OPIATE TREATMENT PROGRAMS

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SUBJECTS: MEDICATION ASSISTED TREATMENT SERVICES FOR OPIOID ADDICTION

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Effective September 1, 2012 the New Mexico Medicaid program will begin covering medication assisted treatment (MAT) services for New Mexico Medicaid eligible recipients when provided by an Opiate Treatment Program (OTP). These centers are often called methadone clinics.

Methadone for treatment of opioid addiction can only be provided by a federally certified OTP. Methadone cannot be prescribed in an office-based setting to treat opioid addiction.

OPTs must comply with the federal requirements as outlined in 42 CFR Part 8, *Certification of Opioid Treatment Programs* and Section 5.7 of Chapter 24, Article 1, of the Public Health Act (NMSA 1978), as well as the Medicaid rule 8.325.11 NMAC, *Medication Assisted Treatment for Opioid Addiction*, and the general rules applicable to being a Medicaid provider including general billing information and program sanctions found at <http://www.hsd.state.nm.us/mad/RPolicyManual.html>.

MAT is a benefit when using a drug or biological that is recognized in the treatment of substance use disorder and provided as a component of a comprehensive treatment program. MAT is also a benefit as a conjunctive treatment regimen for individuals who are addicted to substances that can be abused and who meet the DSM-IV-TR criteria for a substance use disorder.

The following information is intended to help you enroll in the Medicaid Program and begin to bill for services.

For the start-up period of enrolling providers, the NM Medicaid program will be able to grant up to 60 days of retroactive provider enrollment, counting from the date of the receipt of the OTP application, but not prior to September 1, 2012. However, all claims must still be filed within 90 days of the date of service.

I. ENROLLMENT

In order to be reimbursed for providing MAT services to New Mexico Medicaid eligible recipients, the OTP must first enroll with the NM Medicaid program through their fiscal agent, Xerox; and then enroll with the behavioral health statewide entity OptumHealth New Mexico.

In order to provide additional physical health services (beyond the initial required physical health exam rendered prior to beginning treatment), an OTP may also choose to enroll with the NM Medicaid Managed Care Organizations (MCOs) who are contracted with the NM Medicaid Program to provide physical health services to their enrollees, which constitute approximately 80% of the total Medicaid recipients.

A. Enrollment of Opiate Treatment Centers

i. Fee-for-Service Enrollment

Opiate Treatment Centers must enroll with the fee-for-service (FFS) NM Medicaid program through its fiscal agent, Xerox.

When enrolling, the following must be provided:

- A completed and signed MAD Provider Participation Agreement form MAD 335
- City or county business license (or explain why one is not required)
- Proof of malpractice, professional liability, or medical liability insurance
- Federal tax identification letter
- Completed W-9 form
- NM Gross Receipts (CRS) number documentation
- Copy of Drug Enforcement Administration (DEA) certificate
- Copy of SAMHSA/CSAT approved to operate an OTP
- Copy of accreditation by the Joint Committee (JCAHO) or Commission on Accreditation of Rehabilitation Facilities (CARF) accreditation as an OTP
- Copy of approval letter from the NM Behavioral Health Services Division (BHSD) as a Methadone provider. (You may contact Terry Griffith-Evans at 505-476-9268 if you need a copy of your original letter.)

The Provider Participation Agreement MAD form 335 can be found on the Medical Assistance Division website at:

http://www.hsd.state.nm.us/mad/pdf_files/Total%20MAD%20335%20PPA%20April%202012%20fillable%20extended.pdf.

Use provider type 343 on the form.

Initially, in order to expedite your application, you may send the completed application and supporting documentation directly to the Medical Assistance Division rather than to Xerox. Applications may be sent directly to:

Provider Enrollment
Attn: Jeanne Cournoyer
New Mexico Human Services Department
Medical Assistance Division
P.O. Box 2348
Santa Fe, NM 87504-2348

To find out more about OTP enrollment with the FFS program, providers may contact Jeanne Cournoyer at (505) 827-3181 or NM Medicaid's fiscal agent, Xerox, at 505-246-9988 extension 193 or visit the NM Medicaid web portal at <https://nmmedicaid.acs-inc.com/>.

After applying to enroll, providers will be notified by Xerox when a Medicaid provider number has been assigned.

- That provider number is necessary to set up access to the NM Medicaid web portal which can then be used to (1) set up Electronic Funds Transfer for payment; (2) check the recipient's Medicaid eligibility on the web portal, including any enrollment of the recipient with a physical health managed care organization; and (3) to see your remittance advice showing payment, denials, announcements and other information.
- To find out more about the NM Medicaid web portal, contact NM Medicaid's fiscal agent, Xerox, at 505-246-0710 or visit the NM Medicaid web portal at <https://nmmedicaid.acs-inc.com/>.

ii. OptumHealth Enrollment

Most MAT services provided by OTPs to NM Medicaid eligible recipients are considered to be behavioral health services. Because of this, OTPs must also enroll with New Mexico's Behavioral Health statewide entity, OptumHealth New Mexico.

To enroll with OptumHealth New Mexico as a provider, please contact OHNM at 1-866-660-7182 or visit them online at <https://www.optumhealthnewmexico.com/>.

OHNM, like FFS Medicaid, has a 90 day filing limit policy. Claims filed within that time period (typically 90 days as calculated from the date of service) will be accepted.

B. Enrollment of Practitioners

i. Additional Physical Health Services

All physical health services (beyond the initial required physical health exam rendered prior to beginning treatment) provided to NM Medicaid eligible recipients must be billed to the entity from which the recipient receives his or her physical health benefits, either to a Managed Care Organization (MCO) or to Xerox for the fee-for-service (FFS) Medicaid program.

In addition to the OTP being enrolled with the Medicaid FFS program, the individual practitioner must also be enrolled with the FFS program to provide any additional physical health services to a FFS enrolled eligible recipient. This may be initiated by contacting NM Medicaid's fiscal agent, Xerox, at 505-246-9988 extension 193 or by visiting the NM Medicaid web portal at <https://nmmedicaid.acs-inc.com/>. To become a rendering individual provider, the Provider Participation Agreement - Individual Applicant Within Group MAD form 312 may be used to enroll. Medicaid FFS provider participation agreements can be found on the MAD website at: <http://www.hsd.state.nm.us/mad/PErollmentPolicy.html>.

Individual practitioners must enroll with an MCO if he or she intends to provide additional physical health services (beyond the initial required physical health exam rendered prior to beginning treatment) to a MCO enrolled eligible recipient. To enroll as a provider with a MCO, please contact each MCO individually at:

- Molina Salud : 1-800-377-9594 or at <http://www.molinahealthcare.com/>
- Presbyterian Salud: 1-888-923-5757 or at <http://www.phs.org/phs/healthplans/medicaid/presbyteriansalud/index.htm>
- Lovelace Salud: 1-800-808-7363 or at <http://www.lovelacehealthplan.com/providers>
- Blue Salud: 1-888-349-3706 or at <http://www.bcbsnm.com/provider/>
- UnitedHealthcare: 1-877-842-3210 or at <http://www.uhccommunityplan.com/>
- Amerigroup: 1-800-454-3730 or at <https://providers.amerigroup.com/>

ii. Additional Behavioral Health Services

Additional behavioral health services, beyond those described in 42 CFR 8.12, provided to NM Medicaid eligible recipients, must be billed to New Mexico's Behavioral Health statewide entity, OptumHealth New Mexico. The individual rendering providers must also be enrolled with OptumHealth New Mexico. To enroll with OptumHealth New Mexico as a provider, please contact OHNM at 1-866-660-7182 or visit them online at <https://www.optumhealthnewmexico.com/>.

Note that if the OTP provider chooses to provide additional physical health service (beyond the initial required physical health exam rendered prior to beginning treatment) instead of referring the recipient to another appropriate provider, the OTP provider shall not bill OptumHealth for these services. Instead the OTP shall bill Xerox (for a FFS enrolled recipient) or a NM Medicaid Physical Health MCO (for a managed care enrolled recipient) for the additional physical health services provided.

II. ELIGIBLE RECIPIENTS

Reimbursement will be made only when these services are provided to eligible recipients who have full New Mexico Medicaid benefits (including pregnancy related categories of eligibility).

These services are not a benefit for recipients in the NM State Coverage Insurance (SCI) program or the Family Planning Only program. Benefits may also be restricted when the recipient is incarcerated. Contact the Medical Assistance Division for more information on treating incarcerated recipients.

A provider may check a recipient's eligibility on the NM Medicaid web portal, at <https://nmmedicaid.acs-inc.com/> or by calling the Automated Voice Response System (AVRS) at 1- 800-820-6901.

Currently enrolled providers can register for NM Medicaid web portal access using their provider ID numbers on Web Registration at <https://nmmedicaid.acs-inc.com/nm/general/registrationHomeOptions.do> or by calling Xerox at 1-800-299-7304.

III. BILLING INSTRUCTIONS

The following medication assisted treatment (MAT) procedure codes and services are benefits of the New Mexico Medicaid program at the indicated reimbursement rates.

New codes will be developed and added to this list as necessary and such information will be mailed to providers. A provider may check for updates by visiting the Fee Schedules section of the MAD website at <http://www.hsd.state.nm.us/mad/PFeeSchedules.html>.

The claim must always have an ICD-9-CM diagnosis code which supports the need for treatment. Usually this would be in the range of codes 304.0 through 304.73.

Reimbursement Rate and Procedure Code	Service Description	Medicaid Coverage	Who to Bill	Required NPI	Citation for Required Service
H0020 \$13.30 (per service)	Administering or dispensing methadone or other narcotic replacement or agonist drug items	Included in procedure code H0020, “Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program)” The quantity is the number of doses administered or dispensed. For example, if one dose is administered and six more “take home” doses are dispensed, then a total of seven doses for that date of service are billed.	OptumHealth	Clinic’s NPI	8.325.11.16 NMAC C.(2)(a)
Included in the \$13.30 reimbursement for H0020	Cost of methadone	Included in procedure code H0020, “Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program)”	OptumHealth		
Included in the \$13.30 reimbursement for H0020.	Treatment plan, goals, and supportive services. Note: Medicaid cannot pay for vocational, educational, or employment services	Included in Code H0020, “Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program)” These services are not payable as separate services.	OptumHealth	Clinic’s NPI	42 CFR 8.12(f) (4)
Included in the \$13.30 reimbursement for H0020.	Substance abuse and HIV counseling services. Note: Medicaid cannot pay for vocational, educational, or employment counseling.	Included in Code H0020, “Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program)” The reimbursement of the H0020 includes substance abuse and HIV counseling. These services are not payable as separate services. Much of this may be done by LADAC’s, and their services are not reimbursed separately.	OptumHealth	Clinic’s NPI	42 CFR 8.12(f) (5)
Included in the \$13.30 reimbursement for H0020.	Drug abuse testing services Additional services payable to the MAT provider are: laboratory	Drug testing and all other lab work performed on the OTP site is considered included in Code H0020, “Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a	OptumHealth	Clinic’s NPI	42 CFR 8.12(f) (6) 8.325.11.16 NMAC

	services provided by a certified laboratory facility when billed by the offsite laboratory.	licensed program)” Services provided in independent clinical or hospital laboratories can be billed by the laboratory. This would be billed to the appropriate physical health MCO or the FFS program, depending on the recipient enrollment.			C.(2)(d)
H0001 \$50.52	Initial Medical Exam by program physician A “complete, fully documented physical evaluation by a program physician or a primary care physician, or an authorized healthcare professional under the supervision of a program physician, before admission to the OTP” is payable as a separate service.	Procedure code H0001, “Alcohol and/or drug assessment”.	OptumHealth	Clinic’s NPI.	42 CFR 8.12(f) (2) 8.325.11.16 NMAC C.(2)(c)

The quantity of service billed for administering or dispensing for each day cannot exceed the combined total of the drug items administered that day plus the number of drug items dispensed on that day. One initial required physical health examination (procedure code H0001) may be reimbursed per client. If the recipient discontinues treatment but later returns and is readmitted to the program, another physical health examination may be billed when the physical health examination is required under 42 CFR 8.

Documentation that supports the medical necessity of MAT must be maintained in the client’s medical record per the requirements in 42 CFR Part 8, *Certification of Opioid Treatment Programs*.

When the FFS program is billed, electronic billing is mandatory. Instructional and training information on using the PayerPath system is found on the NM Medicaid web portal at <https://nmmedicaid.acs-inc.com/nm/general/loadstatic.do?page=ProviderInformation.htm>.

If you have questions regarding the above information, you may contact the Medicaid Program Benefits Bureau at (505) 827-3171.

We appreciate your participation in the Medicaid program.