



PROVIDER ALERT

Information for Level 1 Programs and OTPs

DECEMBER 18, 2014

1. Authorization and Data Entry Requirements – Level 1 and OTP Programs – for MA Recipients beginning or continuing in care in 2015
 - a. Program **MUST** be enrolled as Medicaid provider with provider type 32 for OMT services and provider type 50 for Level 1 Outpatient services and have an NPI number. Provider type 35, Local Health Department, will not be paid as a SUD service provider.
 - b. For all new episodes of care beginning in 2015, providers will need to complete authorization request with ValueOptions before beginning treatment. Admission data entry will be part of the authorization process.
 - c. There will be a grace period of up to 4 months for Level 1 programs to request authorizations in VO system for patients/clients who were in active SUD treatment with the same provider at the time of transition. Providers will be advised of a recommended schedule for entering authorization requests within the grace period. During the grace period, claims will pay without an authorization. (The provider must be an appropriately enrolled Medicaid provider as indicated in 1.a. above)
 - d. There will be a grace period of up to 6 months for OTPs to request authorizations in VO system for patients/clients who were in active SUD treatment with the same provider at the time of transition. Providers will be advised of a recommended schedule for entering authorization requests within the grace period. During the grace periods, claims will pay without an authorization. (The provider must be an appropriately enrolled Medicaid provider as indicated in 1.a. above)

- e. For existing patients/clients, providers will NOT need to re-enter admission data that was entered into SMART. There will be required data elements that must be entered as part of the authorization process.
 - f. If the patient/client is discharged after receiving service in 2015, and the provider has obtained an authorization from VO for this patient/client, the provider will enter discharge data into VO system. No discharge data will need to be entered for patients/clients who were active in SUD services on 12/31/2014 if they did not receive services in 2015 or if they were discharged prior to the provider having to request an authorization in the VO system (i.e., during the grace period).
 - g. If the patient/client returns to treatment after a 30-day break in treatment to the same provider (even if at the same level of service), this will be considered as a new episode of care and a new authorization request must be submitted.
2. Patients/clients in grant funded services for reporting purpose (Non-MA services for patients/clients with MA eligibility, MA eligible services and Non-MA services for the eligible Uninsured, and MA eligible services and Non-MA services for MA and uninsured ineligible patients/clients)
- a. Providers will be required to register patients/clients starting treatment on or after 1/1/2015 in the VO system on admission.
 - b. Patients/clients active on 1/1/2015 must also be registered. Entry of data for these patients/clients can be staggered but must be entered in VO system by 4/30/15.
 - c. Once a patient/client is registered, the provider will submit claims for MA eligible services rendered to MA ineligible patients/clients provided in 2015 (including those provided prior to registering the patient/client – i.e., for service dates on or after 1/1/2015, regardless of when the patient/client was registered in VO system).
3. For any patient/client discharged from care on or before 12/31/2014, discharge information should be entered in SMART within 30 days of discharge, but no later than 02/28/2015.

4. No data will need to be entered into VO system for private insurance or cash pay patients/clients.

Information for Individual Practitioners

- a. Treatment requested and provided must be within the scope of the provider's license.
- b. The individual practitioner must be registered as a Medicaid provider.
- c. The individual practitioners will be required to enter authorization request for all patients/clients in SUD treatment. There will be no grace period for the individual practitioners.
- d. For individual practitioners treating patients/clients with MH diagnosis, current open authorizations will be honored and claims should be submitted with MH diagnosis.
- e. For individual practitioners requesting new authorizations for MA patients/clients beginning 1/1/15, the provider should identify the patient/client as having primarily MH or SUD diagnosis and claims under this authorization should indicate a diagnosis consistent with the authorization type (MH or SUD).
- f. Individual practitioners can provide treatment for MH or SUD as primary diagnosis consistent with the diagnosis in the approved authorization.