

Behavioral Health ASO Transition FAQ #4

Enrollment & Registration

Which provider types may register with VO using ProviderConnect, and what are the requirements to do so?

In order to register with VO using ProviderConnect, all Medicaid providers must have active Medicaid and NPI provider numbers unique to each program location. OHCQ-certified SUD programs including Methadone Maintenance Providers (provider type 32), Certified Addiction Programs (provider type 50) and Intermediate Care Facility–Addictions (provider type 55) do not need to separately enroll individual providers offering services under their program. Individual licensed mental health providers may deliver mental health services to participants with a SUD primary diagnosis, and individual physicians may deliver buprenorphine services. Additional details for each provider type are available via transmittals posted on the VO website: <http://maryland.valueoptions.com/whats-new.html>.

Should each provider within a program obtain their own ProviderConnect login or is each program limited to one ProviderConnect account?

Providers who enter authorizations or submit claims through the ProviderConnect system can request separate login IDs or each program can designate a "super user" who assigns IDs for their organization. Providers can contact VO's EDI Help Desk Department at 888-247-9311 to coordinate login IDs.

Do clinicians who provide both mental health and SUD assessments need two logins for the ProviderConnect system?

Providers who perform both mental and SUD assessments do not need two separate accounts; they should access the ProviderConnect system with one login ID.

If a provider delivers services at multiple locations, how many Medicaid and NPI numbers should they obtain?

Program providers must have a unique Medicaid number and a unique NPI number for each practice location. Individual providers may use one Medicaid number and NPI for all services.

How can an adolescent addictions clinic enroll as an authorized SUD provider?

Providers who wish to offer SUD services to adolescents should obtain OHCQ certification and enroll with Medicaid as a Medicaid provider type 50. Those who wish to provide intensive inpatient SUD services to adolescents should enroll as a Medicaid provider type 55, following the procedures detailed in the DHMH transmittal on ValueOptions' website: <http://maryland.valueoptions.com/whats-new.html>.

When can providers enroll with PaySpan?

Providers may enroll with PaySpan after they receive their ProviderConnect login, submit a claim and receive reimbursement. The first paper check will include instructions on how to enroll with PaySpan.

Where can providers access information about trainings opportunities with ValueOptions?

Information about provider trainings can be found on ValueOptions' website:
<http://maryland.valueoptions.com/whats-new.html>.

When can SUD providers register with the VO?

The registration process for SUD providers began on December 8th. Please note that providers must be enrolled with Medicaid before registering with VO.

Do individual SUD providers such as Physicians Assistant and Nurse Practitioners that serve in addiction programs have to register individually with VO?

Independently practicing licensed mental health practitioners may enroll to provide mental health services to individuals with a primary diagnosis of SUD. The list of such providers can be found in COMAR 10.09.59 and includes licensed psychologists, psychiatrists, psychiatric nurse practitioners, nurse psychotherapists, social workers, and professional counselors.

Rates and Services

What are the reimbursement rates, units of service, authorization periods, and limitations for Medicaid SUD services?

Please refer to SUD matrix posted on the ValueOptions website: <http://maryland.valueoptions.com/whats-new/Substance-Use-Disorder-Services-Matrix.pdf>.

Will VO process claims for Medicare recipients for services not covered by Medicare?

VO will authorize services not covered by Medicare for dual eligible recipients. Providers will not need to receive a denial from Medicare to receive Medicaid reimbursement for SUD services categorically not covered by Medicare.

If a patient is admitted for a primary diagnosis of SUD but is bedded on an inpatient psychiatric unit, will ValueOptions reimburse the claim?

ValueOptions will reimburse a claim that has a primary diagnosis of SUD with a psychiatric inpatient revenue code (0114, 0124, 0134, or 0154).

Uninsured Population/Grant-Funded Services

What services will LAA's continue to provide for the uninsured population and will LAA's continue to receive grant funding for contracted services?

The LAAs will continue to provide the same services they currently provide, subject to budget availability. Please refer to the 12-10-14 memos located on the VO website for additional information regarding grant-funded and uninsured services: <http://maryland.valueoptions.com/whats-new.html>.

What are the eligibility criteria for the uninsured, and does this vary between SUD and Mental Health services?

As of January 1, 2015, the eligibility criteria pertain only to mental health services since grant funding for SUD services remain with the local jurisdictions. Please refer to the following provider alert for more information: <http://maryland.valueoptions.com/provider/alerts/2014/2014-Uninsured-Eligibility-Letter.pdf>.

Will the Department inform stakeholders of any restrictions on which uninsured can be put into publicly funded slots?

For SUD services, the same criteria used in the past will continue. However, SUD providers must complete the uninsured workflow so that Medicaid and other insurance can be accessed when appropriate.

Since the Department allocates grant funded slots to those who are at 250% of the poverty level, can the Department provide a chart that shows the poverty level?

The Department uses the federally-set poverty measures to determine eligibility, which are available here: <http://aspe.hhs.gov/poverty/14poverty.cfm>.

Will clients who have Medicare as their primary coverage be eligible for public/grant funds?

For those with Medicare only, grant funds can be used to pay for SUD services not covered by Medicare.

What happens if an individual loses Medicaid eligibility while receiving treatment?

If an individual is not eligible for Medicaid, the individual should seek grant funds for SUD services. The SUD program should assist the consumer in re-applying for Medicaid benefits.

Do the uninsured receive substance use disorder visits?

Through FY15 local jurisdictions will continue to receive funds to provide SUD services for the uninsured through the grant programs.

Will LAA's have prevention dollars and responsibility?

Prevention funds remain unchanged.

Should providers submit claims to ValueOptions when providing services to uninsured clients?

In order to receive reimbursement for grant funded services, the provider should coordinate with the applicable LAA and submit claims through the provider's regular billing method. Providers should also participate in ValueOptions' data collection by registering clients in ProviderConnect. Providers should enter authorizations in ProviderConnect and receive a payment of \$0.00 on the EOP or Remittance.

Managed Care Organizations (MCOs)

How will ValueOptions reimburse for weekly Methadone Maintenance services during the first week of the ASO transition if the provider uses Monday as the beginning of the week?

Since methadone maintenance programs bills on a weekly basis and most programs use Monday as the beginning of the week, the MCOs will be responsible to pay for services through the week of December 29, 2014. This will avoid the need to split the weekly bill.

Pharmacy

How will PCPs who deliver buprenorphine services in an office-based setting be reimbursed for these services?

Buprenorphine treatment services provided by a PCP to a Medicaid recipient continue to be managed by the participant's MCO. Lab services related to this treatment are also covered by the MCO. Services provided by a specialty physician (psychiatrist or addictionologist) who is not the participant's PCP will be managed by ValueOptions Maryland. For more information, please refer to the ValueOptions provider alert: <http://maryland.valueoptions.com/provider/alerts/2014/121914-Medicaid-Billing-Enrollment-Physicians-Providing-Buprenorphine-Services.pdf>.

What role does Xerox play in the ASO transition?

Effective January 1, 2015, Maryland Medicaid carved out SUD medications from the HealthChoice MCOs that are now covered by Fee-For-Service. Xerox is the contractor that handles prescription prior authorizations for MA FFS pharmacy. For more information, please refer to the following ValueOptions provider alert: <http://maryland.valueoptions.com/provider/alerts/2015/010515-Maryland-Medicaid-Pharmacy-Alert.pdf>.

Other

What is the difference between DSM-IV and DSM-5 and which system does ValueOptions use?

DSM-4 and DSM-5 are national coding systems used for diagnostic evaluation. VO uses DSM-5 for all services in the ProviderConnect system.

How should providers enroll clients that move from face-to-face treatment to Avatar status, and vice versa?

If a client moves from face-to-face treatment to Avatar status, they must be discharged and readmitted as an Avatar client. If a client moves from Avatar status to face-to-face treatment, they must be discharged as an Avatar client and readmitted.