Executive Summary

The Behavioral Health Unit proposes re-bundling the methadone reimbursement rates to include a $42 per week per patient bundle for methadone maintenance, and the ability for Opioid Treatment Programs (OTP) to bill, in addition to alcohol and/ or drug assessment (H0001), for outpatient counseling (H0004 and H0005) separately, as clinically necessary.

The goal of this program is to address the practical needs of providers and participants and create flexibility in the administration of Methadone maintenance and the provision of counseling services. This proposal aims to strengthen continuity of care across the substance use disorder service spectrum. The re-bundled weekly rate will allow providers to bill for the outpatient counseling services provided by an OTP but also allow participants to continue receiving their methadone when they need to attend more intensive levels of treatment, such as treatment in an intensive outpatient program. This change will also enable the Department to address the needs of participants requiring temporary dosing at their non-OTP home site (guest dosing) and creates a mechanism of payment for providers whose participants are clinically appropriate to receive take home medication.

Current Methadone Reimbursement

Currently Maryland Medicaid reimburses OTPs for methadone maintenance at a bundled weekly rate of $80. According to COMAR 10.09.80.05.E, this bundle includes a comprehensive substance use disorder assessment; an individualized treatment plan; methadone dosing; substance use disorder and related counseling; medical services; ordering and administering drugs; and discharge planning.

Proposed OTP Methadone Reimbursement

OTP providers will continue to bill the current reimbursement code for methadone maintenance (H0020). This code will be adjusted to be a weekly bundled rate of $42 per week per participant, to cover the following:

- Medical plan of care
- Once a month face to face meeting
- Methadone dosing
- Initial medical service (evaluation and ordering of Methadone)
• Nursing services related to dispensing methadone
• Ordering and administering drugs
• Point of care toxicology testing (G0434)
• Transitional Care Coordination

Counseling services may be billed in addition to the bundled rates and the H0001 Alcohol and/or Drug Assessment code. OTPs that are certified to deliver level 1 counseling may choose to bill H0004 and H0005 procedure codes for individual and group counseling respectively. In this plan OTPs will be compliant with 42 CFR 8.12 by having the capacity to bill counseling codes.

In order to bill for IOP level of care an OTP provider (Medicaid Provider Type 32) must obtain credentialing from the appropriate credentialing agency. The OTP providers that are certified to deliver IOP level of care would then need to register with Medicaid as a Provider Type 50 in order to obtain authorization and claims payment for IOP services.

Under this plan, OTP providers who are qualified to provide higher levels of counseling will have the ability to be reimbursed for doing so. OTP providers who do not have the credentials to provide higher levels of counseling, will still be able to refer participants out to other providers and be reimbursed for the methadone maintenance services they are providing. These changes will allow for better continuity of care for patients needing higher level counseling services.

**Guest Dosing**

When a patient needs to receive methadone treatment at an OTP other than the one they regularly attend, they may need a guest dose from another OTP. Currently, there is no authorization for Maryland Medicaid to pay the guest OTP treatment site. Under this proposal the Department would authorize payment of $3.00 per day to the provider delivering the guest dosing assuming coordination with the “home” provider to ensure correct dosing and avoid duplicative dosing.

Under this proposal the home provider will receive the weekly rate and the guest dosing provider will receive the $3.00 per day rate (only for days medication is managed by the guest dosing agency).

Participants will be allowed up to 30 days of guest dosing per year, with the ability for their home provider to request additional units for special circumstances through a clinical review. It will be the responsibility of the guest provider to be in touch with the home provider in order to receive information about dosing and ensure that the home provider is not dosing while the guest provider is.

Guest providers will bill H0020 with a modifier that will mark the claim for the reduced guest dosing reimbursement amount of $3 per day.
**Face to Face Requirements**

According to federal regulations 42 CFR 8.12, the maximum time allowed for take home methadone treatment is for 31 days. This means all patients must be seen at least once a month for medication management.

OTPs are required to update the individualized treatment plan according to state regulations every 90 days via a face to face evaluation (COMAR 10.47.02.04; 10.47.02.11). However, if a patient at an OTP is receiving take home methadone treatment and has been stable for one year, the treatment plan may be updated every 180 days.

**Proposed OTP Buprenorphine Reimbursement**

Similar to the proposed methadone reimbursement plan, OTP providers will continue to bill the current reimbursement code for buprenorphine maintenance (H0047). However, this code will be reduced to be a bundled rate of $35.00 per week per patient, to cover the following:

- Medical plan of care
- Once a month face to face meeting
- Buprenorphine dosing
- Initial medical service (evaluation and ordering of Buprenorphine)
- Nursing services related to dispensing
- Ordering and administering drugs
- Point of care toxicology testing (G0434)
- Transitional Care Coordination

The reimbursement rate for buprenorphine inductions will remain the same (H0016 $200.00); as will the reimbursement rate for buprenorphine itself when purchased and administered by the OTP (J8499 $7.43 per 8mg or J8499 $4.15 per 2mg).