



CHANGING
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Maryland Opioid Treatment Program Reimbursement Rebundling Initiative

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Background

- Currently Medicaid reimburses OTPs through a bundled rate for methadone services that includes the full continuum of clinical services for their patients.
- Research indicates that methadone and counseling together result in better patient outcomes than treating patients with methadone alone.
- Rebundling was proposed to providers and stakeholders on December 14, 2015 to align payment policy with clinical best practices.
- A second proposal that represents stakeholder input was presented April 22, 2016 and a final third proposal was presented on September 6, 2016.



Methadone Induction

During the first week of treatment, OTPs may be reimbursed for the following services:

Current

H0001 Alcohol and/or drug assessment
(\$144.84 per assessment)

H0020 Methadone Maintenance (\$81.60
per week)

Proposed

H0001 Alcohol and/or drug assessment (\$144.84
per assessment)

H0020 Methadone Maintenance (\$63.00 per
week)

H0016 Medication Assisted Treatment Induction
(\$204.00 per induction week)

Group and Individual Counseling (\$39.78 per 60-
90 min session and \$20.40 per 15 min increment
respectively)



Physician and Nurse Practitioner Medication Management Visits (E&M codes)

Reimbursement for medication management:

Current

Medication management is included in the weekly bundle (H0020 Methadone maintenance/ H0047 Buprenorphine maintenance).

Proposed

Medicaid will reimburse OTPs for methadone medication management visits conducted by physicians or NPs for up to 6 E&M codes, with the flexibility, when clinically indicated, for up to 12 in a year.

Medicaid will reimburse OTPs for buprenorphine medication management visits conducted by physicians or NPs for up to 12 E&M codes per year.



Guest Dosing

When a patient needs to receive medication assisted treatment from an OTP other than the one they regularly attend, they may require a guest dose from another OTP. Reimbursement for guest dosing:

Current

There is no mechanism for Maryland Medicaid to reimburse the guest OTP treatment site.

Proposed

Home OTP: Reimbursed the weekly reimbursed rate (\$63.00 per week)

Guest dosing OTP: Also reimbursed a daily equivalent of the weekly bundled rate (\$9.00 per day) only for days medication is managed by the guest dosing agency.



Counseling

Reimbursement for counseling separate from the weekly bundled rates (H0020 Methadone Maintenance and H0047 Buprenorphine Maintenance):

Current

Counseling is a **required** part of the weekly bundled rate (H0020; H0047).

If there is clinical necessity for a more intensive level of treatment than the OTP is certified to provide, either the Certified Addictions Program (PT 50) **OR** the OTP will be reimbursed for the week, but not both.

Proposed

In addition to the weekly bundled rate (H0020; H0047), Medicaid will reimburse OTPs separately for outpatient counseling codes:

- H0004 Individual Outpatient Therapy (\$20.40 per 15 min.)
- H0005 Group Outpatient Therapy (\$39.78 per 60-90 min. session)

If there is clinical necessity for a more intensive level of treatment, OTPs may refer their patient to a PT 50.

The PT 50 will be reimbursed for intensive counseling **and** the OTP for the weekly bundled maintenance rate (H0020; H0047).



Face to Face Requirements

Face to face requirement for reimbursement:

Current

In order to be reimbursed for the weekly bundle, the participant must be seen in person during each week of treatment, even if they are on take-homes.

Proposed

For participants receiving take home doses, the OTP would be reimbursed the weekly bundle as long as the participant is seen for one face to face visit during the month.

*If a clinical session occurs during the monthly visit, the OTP could also be reimbursed for a clinical session.



Additional Information and Contacts

For additional information and links to the rebundling proposals please visit:
<http://dhmh.maryland.gov/bhd/Pages/Integration-Efforts.aspx>.

For questions and comments please contact
dhmh.mabehavioralhealth@maryland.gov.

Public notice will be published on the Maryland Public Register
(<http://www.dsd.state.md.us/MDR/mdregister.html>) in the coming months, soliciting
comments from stakeholders.

