	MEDICAL ASSISTANCE BULLETIN **COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE**		
	NUMBER: 08-04-01	**ISSUE DATE**: April 2, 2004	**EFFECTIVE DATE**: April 2, 2004
SUBJECT: Federally Qualified Health Centers and Rural Health Clinics Providing Behavioral Health Rehabilitation Services		**BY:** **David S. Feinberg** **Deputy Secretary for Medical Assistance Programs**	

PURPOSE:

The purpose of this bulletin is to notify all applicable Medical Assistance (MA) enrolled providers that the Department of Public Welfare (Department) will now recognize duly approved and credentialed Federally Qualified Health Centers (FQHCs)/Rural Health Clinics (RHCs) as providers of Behavioral Health Rehabilitation Services (BHRS) to MA eligible recipients under 21 years of age.

SCOPE:

This bulletin applies to all FQHCs (specialty code 080) and RHCs (specialty code 081) providing services in either the Fee-for-Service (FFS) or Managed Care delivery system. FQHCs/RHCs providing services under the Managed Care delivery system should direct operational questions to the Managed Care Organization (MCO) with which they contract.

BACKGROUND:

In 2001, the Federal Centers for Medicare and Medicaid Services and the Bureau of Primary Health Care, United States Health Services, modified the program expectations and requirements for FQHCs/RHCs to encourage expansion of certain types of health care services in underserved areas. Included were policies that encouraged FQHCs/RHCs to expand services to offer a full range of primary, preventative and supplemental services including mental health (behavioral health) and substance abuse services.

In accordance, FQHCs/RHCs that have obtained the proper Departmental approvals and licensure will now be able to provide BHRS. This change will facilitate the prompt delivery of medically necessary BHRS such as Therapeutic Staff Support (TSS), Mobile Therapy (MT) and Behavioral Specialist Consultant (BSC) to MA eligible recipients under 21 years of age.

PROCEDURE:

FQHCs/RHCs may provide BHRS through one of the two following options

1. BHRS may be provided by an FQHC/RHC if the BHRS services are provided and/or supervised by a licensed psychologist or

psychiatrist, employed by the FQHC/RHC, who is individually enrolled in the MA Program; to provide BHRS, and credentialed by the Behavioral Health Managed Care Organization (BH-MCO) as applicable. The provider is responsible for ensuring staff qualifications are met and required supervision of BHRS is maintained.

2. The FQHC/RHC provider is licensed by the Office of Mental Health and Substance Abuse Services (OMHSAS) as an Outpatient Psychiatric Clinic according to the licensing requirements for Outpatient Psychiatric Clinics as set forth in 55 Pa. Code Chapter 5200; a Psychiatric Partial Hospitalization Program according to the licensing requirements for Psychiatric Partial Hospitalization Programs as set forth at 55 Pa.Code Chapter 5210 or, licensed to provide Family Based Mental Health Services. The FQHC/RHC is responsible for ensuring staff qualifications are met and required supervision of BHRS is maintained.

Additionally the FQHC/ RHC or enrolled provider must meet the following requirements

1. The FQHC/RHC or enrolled provider must submit a service description to the Department and receive Department approval of the service description prior to providing BHRS.

2. The provision of BHRS represents a change in the scope of services provided by an FQHC/RHC whether the FQHC/RHC is the licensed entity or employs the enrolled provider. FQHCs/RHCs must submit a new cost report and trial balance document clearly identifying the costs specific to the provision of BHRS, along with a copy of the OMHSAS licensure documents and service description to the following address:

   Office of Medical Assistance Programs
   Bureau of Fee-for-Service Programs
   Division of Rate Setting
   P.O. Box 8047
   Harrisburg, Pennsylvania 17105

The FQHC/RHC will not have to re-enroll with MA. Services will be provided under the FQHC/RHC PROMISe provider type code 08, with specialty code 080 for FQHCs and specialty code 081 for RHCs.

If enrolling under option 1, the practitioner must be enrolled with MA, as a BHRS Service provider. Services will be provided under the psychiatrist PT/Specialist or psychologist PT/Specialist.

If enrolling under option number 2, upon receiving OMHSAS licensure as an Outpatient Psychiatric Clinic, Psychiatric Partial Hospitalization Program or a Family Based Mental Health Program, FQHCs/RHCs may provide BHRS to MA eligible recipients under 21 years of age. Upon enrollment with MA, and credentialed with the BMCO as applicable, the practitioner may provide BHRS to MA eligible recipients under the age of 21, receiving BHRS through the Managed Care Delivery System.

Reimbursement Requirements

	Fee-for-Service Delivery System	Managed Care Delivery System
Prior Authorization	TSS Note: MT and BSC are not prior authorized.	TSS, MT, BSC and Summer Therapeutic Activities Program (STAP).
Program Exception	BHRS services not currently included in the MA Program fee schedule or that exceed current limits.	BHRS services not currently included in the MA Program, fee schedule or exceed the limits.

Payment	TSS, MT, BSC, and STAP will be billed using the appropriate procedure code from the MA Program fee schedule.	TSS, MT, BSC and STAP are billed at the rate that the MCO negotiates with the FQHC/RHCs or practitioner. Payments made to the FQHCs/RHCs must be consistent with payments made to other providers rendering similar services.
PPS Settlemen	Prospective Payment System (PPS) settlement will occur after the first year that the FQHCs/RHCs offer BHRS. Annual PPS settlement thereafter will be revised as necessary under the Prospective Payment System. Encounters reported on the cost report must satisfy the Federal definition of a visit as set forth at 42 CFR 405.2463 and are subject to review by site audit of clinic financial and medical records. FQHCs/RHCs must contact the Bureau of Fee-for-Service Programs for special instructions for proper preparation of the cost report.	The PPS settlement is done quarterly. Encounters reported on Worksheet 5 Schedule A of the cost report must satisfy the Federal definition of a visit as set forth at 42 CFR 405.2463 and are subject to review by site audit of clinic financial and medical records. FQHCs/RHCs must contact the Bureau of Fee-for- Service Programs for special instructions for proper preparation of the cost report.

Additional Information:

The following is a list of MA Bulletins governing the provision of BHRS. FQHCs/RHCs and the enrolled practitioner, as applicable, providing BHRS are bound by requirements set forth in these bulletins.

Behavioral Health Rehabilitation Services Medical Assistance Bulletins

Bulletin Number	Title	Issue Date	Effective Date
01-94-01	Outpatient Psychiatric Services for Children Under 21 Years of Age	1/11/1994	1/1/1994
1153-95-01	Accessing Outpatient Wraparound Mental Health Services Not Currently Included in the Medical Assistance Program Fee Schedule for Eligible Children Under 21 Years of Age	9/8/1995	9/8/1995
50-96-03	Summer Therapeutic Activities Program	4/25/1996	4/25/1996
01-97-16	Change in Procedure for Requesting and Billing Therapeutic Staff Support (TSS) Services	9/17/1997	9/17/1997
99-97-06	Accurate Billing for Units of Service Based on Periods of Time	9/17/1997	9/17/1997
01-97-08	Diagnostic and Psychological Evaluations	5/28/1997	5/28/1997
01-98-10	Change in Billing Procedure for Behavioral Health Rehabilitation Services	7/10/1998	7/1/1998
01-98-20	Accessing Outpatient Behavioral Health Services Not Currently Included on the Medical Assistance Program Fee Schedule for Eligible Recipients Under 21 Years of Age	12/31/1998	12/31/1998

17-99-02	Procedures for Licensed, Enrolled Mental Retardation Providers to Access and Submit Claims for Outpatient Behavioral Health Services for Individuals Under 21 Years of Age	12/3/1999	12/3/1999
01-00-16	Freedom of Choice for Medical Assistance Recipients Requiring Behavioral Health Services	12/29/2000	12/29/2000
01-00-13	Prior Authorization of Therapeutic Staff (TSS) Services	12/29/2000	3/1/2001
00-01-01	Reporting Requirements for Behavioral Health Rehabilitation Services in the HealthChoices Program	6/1/2001	7/1/2001
01-01-04	Behavioral Specialist Consultant and Mobile Therapist	4/26/2001	4/26/2001
01-01-05	Revisions to Policies and Procedures Relating to Mobile Therapy, Behavioral Specialist Consultant and Therapeutic Staff Support Services	6/1/2001	7/1/2001
01-01-06	Revision to Prior Authorization of Therapeutic Staff Support (TSS) Services	6/1/2001	7/1/2001
01-01-07	Addition of Behavioral Health Rehabilitation Service to the Medical Assistance (MA) Program Fee Schedule	6/21/2001	7/1/2001
41-02-02	Documentation and Medical Record Keeping Requirements	3/21/2002	3/21/2002
01-02-05	Reissue of Medical Assistance (MA) Bulletin Addition of Behavioral Health Rehabilitation Services to the MA Program Fee Schedule	3/6/2002	7/1/2001
01-02-07	Reminder to Providers Who Prescribe Behavioral Health Rehabilitation Services of Documentation Requirements	4/3/2002	3/1/2001

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:
The appropriate toll-free number for your provider type.
Visit the Office of Medical Assistance Programs website at **www.dpw.state.pa.us/omap**.