IMPORTANT REMINDER: All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years. Providers should log into PROMISe to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the revalidation dates. Enrollment (revalidation) applications may be found at: https://www.dhs.pa.gov/providers/Providers/Pages/PROMIs-e-Enrollment.aspx.

PURPOSE:

The purpose of this bulletin is to inform providers that community-based care management services provided by Centers of Excellence (COEs) are covered in the Medical Assistance (MA) Fee-for-Service (FFS) delivery system, beginning January 1, 2022.

SCOPE:

This bulletin applies to all physicians, psychologists, case managers, inpatient facilities, clinics, and mental health/substance abuse providers enrolled in the MA Program with provider specialty 232 (Opioid COEs).

BACKGROUND/DISCUSSION:

COEs were developed in 2016 as a response to the opioid crisis. COEs address a patient’s clinical and non-clinical needs by facilitating connections to other providers using a community-based care management approach. COEs are not limited to providing services at their physical locations. COEs make outreach and provide recovery support services in the community, including at hospital emergency departments and homeless shelters.

On July 1, 2020, the Department issued MA Bulletin 01-20-08, “Addition of Opioid Use Disorder Centers of Excellence Provider Specialty”, to announce the process for providers to enroll as a COE specialty type provider. The Department began enrolling physicians,
psychologists, case managers, inpatient facilities, clinics, and mental health/substance abuse providers as COEs under a provider specialty type beginning January 1, 2021. This enrollment expanded the number of COE providers beyond the 45 initial grantees and increased beneficiary access to COE services.

To continue building on the positive results seen with the COE program, the Department is adding COE care management services to the Medicaid State Plan to provide coverage under the MA FFS delivery system. In addition, the Department is adding Current Procedural Terminology (CPT) code G9012 to the MA Program Fee Schedule, effective for dates of service on and after January 1, 2022.

The addition of COE care management services to the MA Program Fee Schedule allows Pennsylvania to continue to build on the results already seen through the first four years since implementing the COE program.

**PROCEDURE:**

COEs must be enrolled in the MA Program with provider specialty 232 for the provider type that reflects the provider’s current enrollment. Providers eligible for the COE specialty type include physicians, psychologists, inpatient facilities, federally qualified health centers, methadone clinics, mental health/substance abuse programs, and case managers, referred to as care managers. COE providers must comply with licensing requirements that apply to their particular provider type in providing COE services and must be enrolled in, and comply with all requirements that govern participation in, the MA Program.

COEs use community-based care management (CBCM) teams to coordinate the care of individuals with an opioid use disorder (OUD). The CBCM teams consist of a blend of licensed and unlicensed, clinical, and non-clinical staff to coordinate the care needs of an individual to ensure that their clinical and non-clinical needs are met. The CBCM teams must include a certified recovery specialist but may also include nurses, licensed Clinical Social Workers, physicians, counselors, care managers, peer navigators, and other licensed or unlicensed staff to provide recovery-focused care and supports.

The CBCM team members provide a variety of COE care management services which include screening and assessment, care planning, referrals, and monitoring. Below are descriptions of the COE care management services:

- Screening and Assessment
  - Assessments to identify an individual’s needs related to Social Determinants of Health, administered in home and community-based settings whenever practicable.
  - Level of Care Assessments, which may be completed either by the COE or through a referral. If a level of care assessment results in a recommendation of Medication Assisted Treatment (MAT), the COE must provide education related to MAT.
  - Screenings for clinical needs that require referrals or treatment.
• Care Planning
  o Development of integrated, individualized care plans that include, at a minimum, an individual’s treatment and non-treatment needs, the individual’s preferred method of care management (face-to-face meetings, phone calls, or secure messaging application), and the identities of the individual’s CBCM team members as well as the members of the individual’s support system.
  o Care coordination with an individual’s primary care provider, mental health service provider, drug and alcohol treatment provider, pain management provider, obstetrician or gynecologist, and Managed Care Organization (MCO), as applicable.
  o Facilitating referrals to necessary and appropriate clinical services according to the individual’s care plan.
  o Facilitating referrals to any ASAM Level of Care that is clinically appropriate according to a Level of Care Assessment.
  o Facilitating referrals to necessary and appropriate non-clinical services according to the results of the individual’s needs identified through a Social Determinants of Health Screening.

• Monitoring
  o Individualized follow-up with an individual and monitoring of an individual’s progress per the individual’s care plan, including referrals for clinical and non-clinical services.
  o Continued and periodic re-assessment of an individual’s Social Determinants of Health needs.
  o Performing urine drug screenings and reviewing results at least monthly or as identified in the care plan.

The care management services described above should be provided by a CBCM team member that has the appropriate licensure, certification, or qualifications to provide the service. The provision of any one of the services listed above that results in the initiation of a care plan or change to a care plan by a CBCM team member can be submitted for billing as long as there is also a documented interaction with the beneficiary that occurs on the same day as the service. When submitting claims for COE care management services, COEs should use procedure code G9012 to identify the service delivered as a COE care management service, the provider type assigned at enrollment, and provider type specialty code 232.

MA providers in the FFS delivery system may bill for the delivery of COE care management services to MA beneficiaries using the CPT code beginning on the effective date below.

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<th>Procedure Code</th>
<th>Description</th>
<th>Effective Date</th>
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Attached is the “Addition to the Medical Assistance Program Fee Schedule: Procedure Code for Community-Based Care Management Services provided by Centers of Excellence for Opioid Use Disorders”. The attachment identifies the procedure code, national code description, provider type, provider specialty, place of services, effective date, pricing and/or informational modifiers if applicable, and MA fee for the procedure code for providers submitting MA FFS claims.

Providers may access the online version of the MA Program Fee Schedule on the Department’s website at: https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/MA-Fee-Schedule.aspx.

**ATTACHMENT:**

Addition to the MA Program Fee Schedule: Procedure Code for Community-Based Care Management Services provided by COEs
Addition to the Medical Assistance Program Fee Schedule: Procedure Code for Community-Based Care Management Services provided by Centers of Excellence for Opioid Use Disorders

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