



Numbered Advisory Memorandum

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Originator(s):
Angie Bergefurd, Assistant Deputy Director
Office of Health Integration

Subject: Allocations
 Certification
 Licensure
 Medicaid
 Policy and/or Procedure
 Other Critical Information

Approval(s):
Donald C. Anderson, Deputy Director
Administrative Services Division

To: Community Mental Health Medicaid Providers

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Required Action: No Yes, by this date:

All ODMH policy memoranda are posted on the ODMH Web site at mentalhealth.ohio.gov/partner-resources

Title: Updates & Reminders for Community Mental Health Medicaid Providers

Amendments to Ohio Administrative Code Rule 5101:3-27-02

As you are aware, Ohio Administrative Code Rule (OAC) 5101:3-27-02 was emergency filed with an effective date of November 1, 2011 to implement the benefit changes that were shared with providers last summer. The rule was subsequently regular filed with JCARR and became effective on January 30, 2012. In addition to the service limits that were included in the emergency-filed version of the rule, other amendments were included in this version that became effective in late January. These amendments include the following:

- EPSDT provisions (known as the Healthchek benefit) apply to children up to the age of 21;
- A maximum of two hours *psychiatric diagnostic interview services* (90801) and a maximum of four hours of *mental health assessment services* (H0031) are allowed per twelve month period as opposed to the previous language that referenced *physician provided mental health assessment* and *non-physician mental health assessment*. This change was made to allow clinicians, other than physicians, to provide psychiatric diagnostic interview services as long as that clinician is providing this service in accordance with scope of practice regulations and licensure requirements;
- The restriction related to consultation between staff in a multi-service agency has been removed. We hope this will promote and encourage care coordination activities. Please note that although the restriction has been removed, the paragraph containing the restriction is still referenced later in the rule. ODMH will work with ODJFS on a technical amendment to remove this reference.
- CPST services are not covered under this rule when provided to an adult or child in a hospital setting, except for the purpose of coordinating admission to the inpatient hospital

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or facilitating discharge to the community following inpatient treatment for an acute episode of care.

House Bill 153 Exemptions from Prior Authorization – Use of the “TJ” modifier

House Bill 153, the FY 12-13 state budget, states that for FY 12 and 13, “a Medicaid recipient who is under twenty-one years of age automatically satisfies all requirements for any prior authorization process for community mental health services provided under a component of the Medicaid program administered by the Department of Mental Health” if any of the following applies:

- The recipient is in the temporary custody or permanent custody of a public children services agency or private child placing agency or is in a planned permanent living arrangement.
- The recipient has been placed in protective supervision by a juvenile court.
- The recipient has been committed to the Department of Youth Services.
- The recipient is an alleged or adjudicated delinquent or unruly child receiving services under the Felony Delinquent Care and Custody Program operated under section 5139.43 of the Revised Code.

The exemptions from prior authorization for this population will be accomplished through the use of the “TJ” modifier to by-pass the service limits for CPST and partial hospitalization in MACSIS. The modifier code “TJ” should be placed in the modifier 3 position on the 837P claim line.

Please note that this modifier is different from the one that is used for soft authorization of other services for children. It will be incumbent upon providers to assure that proper documentation is maintained in the client record indicating that the child meets the circumstances listed above and therefore supporting the use of the modifier to by-pass the service limits.

Guidelines related to documents that may be used to support the use of the “TJ” modifier can be found at: <http://mentalhealth.ohio.gov/assets/numbered-advisories/fy2012/11-FY12-4.pdf>.

Use of the “SC” modifier

A “soft authorization” can be used to bypass the service limits for all services to children (except partial hospitalization and CPST). This “soft” authorization is implemented by placing the modifier code “SC” in the modifier 3 position on the 837P claim line. Please note that the “SC” modifier can only be used for children to bypass the service limits for the following services:

- 90862 – Pharmacologic Management
- H0004 – Counseling
- H0031 and 90801 – Assessment

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Prior Authorization

Information related to prior authorization trainings and procedures can be found at the following locations:

<http://www.hce.org/medicaid>

<http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/medicaid/index.shtml>

Health Home Information

A draft state plan amendment (SPA) for health homes for Medicaid beneficiaries with severe and persistent mental health conditions has been informally submitted to CMS. This submission will allow Ohio to begin working collaboratively to develop a health homes model upon which CMS and the State can agree. Once an agreement is reached, a formal SPA will be sent to CMS. Information related to the development of the draft SPA, including background information, committee meeting minutes and recommendations and the draft SPA can be found at:

<http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/medicaid/health-home-committees.shtml>

Psychiatrist Prior Authorization Exemption through Managed Care Plans

As in the past, the Ohio Department of Mental Health (ODMH) Medicaid Office (now Office of Health Integration) is coordinating this effort. In order for Community Mental Health Center psychiatrists to qualify for the prior authorization exemption, providers must submit information for each psychiatrist that is directly employed by or contracting with your agency. If you have not done so, please complete the form, which is downloadable at: <http://www.mh.state.oh.us/what-we-do/protect-and-monitor/medicaid/index.shtml> and email it to Theresa.Rohrbaugh@mh.ohio.gov.

NOTE: Even though you or someone in your agency may have completed the old form, you must list all your psychiatrist(s) on the new form. There will not be any transferring of information from the old process to the new process by ODMH. Any psychiatrist(s) that are not listed on the new form will not be included in the final list which will be distributed to the Managed Care Plans. Instructions for completing the form can be found at:

<http://mentalhealth.ohio.gov/assets/medicaid/Psychiatrist-prior-authorization-final-signed-11-14-11.pdf>

Since this is an ongoing process, providers must submit this information using the form for each new psychiatrist that becomes employed by or begins contracting with your agency after the deadline so the list can be updated. Also, to keep the list as up-to-date as possible, information about psychiatrists that need to be removed from the list should be emailed to Theresa Rohrbaugh along with their Prescriber DEA Number and First/Last Name.

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ODADAS/ODMH Medicaid Provider Web Portal

All Primary Users for the ODADAS/ODMH Provider Web Portal should verify that they have updated their account information, especially a correct e-mail address. This information is used when a Primary User is having problems accessing their account. Without the correct e-mail address, the Password Recovery Page cannot be used to reset your password or retrieve your User ID.

MITS - Invega Sustenna

ODJFS anticipates having a solution implemented in MITS by the end of February to correct the issues associated with claims for Invega Sustenna submitted by community mental health centers. ODMH will communicate with providers once it has been confirmed that providers are able to rebill for this injectable. The solution will be retroactive to August, 2011.

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