



**BHA/MA/Beacon Health Options, Inc.  
Provider Quality Committee Meeting Minutes  
Beacon Health Options  
1099 Winterson Road, Suite 200  
Linthicum, MD 21090  
Friday, December 8, 2017  
10:00 am to 11:30 am**

**In attendance:** Patricia Langston, Karl Steinkraus, Marian Bland, Jody Grodnitzky, Shannon Hall, Cynthia Petion, Dr. Kimberly Cuthrell, Stacey Diehl, Joana Joasil, Cristi Simmons, Jessica Allen, Dr. Lisa Kugler, Mark Plaster MD, Jenny Howes, Shaun Kistler, Sharon Jones, Toni Battle, Chris McCabe, Mike Drummond, Lori Peterson, Rose Frazier, Helen Lann MD, Catrina Scott, Bryce Hudale, Jarrell Pipkin, Candace Hawkins, Christine Branch, Shanntel Gladney, Kristen Tripp, Orlando Wright, Delverene Mills

**Telephonically:** Howard Ashkin, Mary Brassard, Abby Appelbaum, Anna McGee, Cam Chung, Becki Clark, Christina Trenton, Debbie Fike, Mary Winebrenner, Sharon Gudger, Kathleen Curry, Karyn Black, Coley Bennett, Renee Stokes, Cathy Baker, Rhonda Moreland, Carrie Medlin, Nkem Egudia, Barry Page, Nicol Lyon, Mindy Fleetwood, Linda McIntyre, Russel Berger, Racel Baker, Suk Ching AuYeungk, Vanessa Lyle, Sonja Moore, Steven Sahm, Sue Kessler, Craig Talley, Alisha Womack, Geoffrey Ott, Sara Haina, Karen Carloni, Tasha Gijon, Heather Dewey, Lavina Thompson Bowling, Jennifer Watson, Lillie Hinkelman, Paris Crosby, Mariana Izraelson, Kristi Plummer, Deborah Carpenter, Kara Pokras, Dustin Richardson, Charles Jay, Ayanna Hopkins, Maritrese Nash, Shereen Cabrera-Bentley, Jamie Cole, Gayle Parker, Joan Sperlein, Jennifer Aguglia, Fran Stouffer, Monica Kirkpatrick, Danica Thornton, Denisha Pendleton, Amanda Moran, Ken Weston, Cynthia Hurd, Shanntel Gladney, Christine Branch, Tim Santoni, Rosemarie Frazier, Belinda Strayhron, Michael Ostrowski, Eulanda Shaw, Yasmeen Mabry, Abiodun Onabiyi, Chandra McNeil-Johnson, Tekora Nichols, Tracy Bushee, Kristen Carrasco, Imelda Berry-Candelario, Lorraine McDaniels, Raffi Rodrigo, Franklin Beck, Shanzet Jones, Sierra English, Darrilyn Vassar-Jackson, Darleen Grupp, Allison Brady, Jen Cole, Emily Suminski, Janice Reuling, Mona Figueroa, Amy Xu, Ellen Weber, Rebecca Maloney, Sheba Jeyachandran, Mike Dunphy, Paula Catlett, Jennifer Cooper, James Jones, Tammy Fox, Beth Waddell, Sabrina Willis, Priscilla Oates, Kathy Miller, Mary Ann Bruce, Marcia Williamson, Michelle McCool, Lori Dembeck, Diana Long, Thomas Valayathil, Jennifer Carberry, Debbie Galloway, Robert Canosa, Amy Park, Debbie DeVincent, Dr. Lynn



Duffy, Heidi Kendall, Khalifa Emanuel, Oluwarotimi Ikusika, Elizabeth Lee, Carrie Mead, Todd Poorman, Nicolle Birkhead, Natalie Thomas, Anne Schooley, Steve Johnson, Paula Nash, Letisha Demory, Laura Higgins, Rebeca Gonzalez, Johanna Norris, Jason Phelan, Mary Brennaman, Elaine Hall, Jeffrey Brentley

## **Topics & Discussion**

### **Minutes**

Minutes were reviewed and approved by onsite attendees. Providers that attended via WebEx may submit any edits to [MarylandProviderRelations@beaconhealthoptions.com](mailto:MarylandProviderRelations@beaconhealthoptions.com). Providers may also use this mailbox to submit questions for Provider Council. To have your questions considered, please submit no later than the Wednesday prior to the council meeting to allow time for research and response.

### **BHA Update**

- Training is scheduled for December 14, 2017 from 11am-2pm at the Behavioral Health Administration (BHA) for providers interested in serving the specialty populations:
  - 8507,
  - pregnant women with children
  - special initiatives for substance exposed newborns; and
  - child welfare involved families.

Providers interested in serving the specialty populations must submit an application to BHA, and enroll with Maryland Medicaid as a PT54 provider. Training is available to those who have submitted an application to serve these specialty populations and providers are encouraged to attend.

- Effective January 1, 2018, reimbursement for gambling services that were previously managed under BHSB will be available through Beacon Health Options (Beacon). Mental health and substance use providers must be enrolled with Medicaid to be eligible for reimbursement for gambling services. A provider interest meeting will be held on December 19, 2017 from 1-3pm at BHA in the Rice Auditorium, and additional trainings and information will be made available through webinars on Beacon's website in the weeks following. BHA strongly encourages providers who choose to deliver gambling services take the training provided by the University of Maryland's Center of Excellence. The Center for Excellence will hold the first scheduled webinar on December 28, 2017 which is posted on the provider training schedule.
- BHA is receiving applications for licensing under COMAR 10.63 at a steady rate (8-10 a day). In order to assist providers in this process, for providers that have



missing information, BHA will provide technical assistance and provide direct outreach with providers to obtain necessary missing documents. The Behavioral Health Administration's Licensing Unit will accept scanned documents, but providers must provide pages with original signatures for the files. The application is a fillable word document; providers can type in the information, print it and sign where indicated, then send it in with all the required materials/documents. If an application is received that is totally incomplete, the application will be rejected and have to be resubmitted in those cases. Questions may be directed to Stacey Diehl at (410) 402-8289 or Doris Williams at 410-402-8198.

- The COMAR 10.63 license application is due January 1, 2018. If providers have questions in regards to the accreditation process, contact Spencer Gear, Director of Accreditation. For any Licensing questions contact Stacey Diehl. BHA has posted information on the website at <https://bha.health.maryland.gov/Pages/Index.aspx> . BHA is hosting several webinars on the COMAR 10.63 license process, as well as the accreditation process, in conjunction with Beacon Health Options.

### **Medicaid Update**

- Transmittals from the Department for behavioral health providers are available on the Beacon Provider Alerts page under the header Maryland Department of Health (MDH) Transmittals. Transmittals are legal documents and are used by auditors when reviewing Medicaid policy and reimbursement communications. The Provider Alerts system is Medicaid's primary delivery method for transmittals for behavioral health providers. All transmittals are also posted to the MDH website by fiscal year. Transmittals are in effect the same as COMAR and often provide additional clarifications than that posted in the regulations. Please review information in the transmittals and if you have Medicaid specific questions, please direct them to [MDH.MAbehavioralhealth@maryland.gov](mailto:MDH.MAbehavioralhealth@maryland.gov).
- CMS requires that all moderate risk providers be site visited to verify that a program is actually located and delivering services out of the enrolled location. Moderate risk providers include programs licensed under COMAR 10.21, 10.47, or 10.63. Re-validation is location specific which means for providers with multiple locations, please make sure you are responding to the MA/NPI number on the letter received, and only renew the location specific to that letter.

Separately, for individual providers: Individually licensed providers renew their license every 2 years but there is an interface between most licensing boards and Medicaid to assist in this process. For the purposes of revalidation requirements, individual providers (and mental health groups) are considered



limited risk which are re-validated every 5 years. This validation is essentially a confirmation of enrollment with Medicaid as a licensed provider.

Failure to respond to the re-validation letter, regardless of provider type, can result in a suspension of your account which then has an impact on your ability to obtain authorization from Beacon. We remind providers to please make sure to pay attention to mailings from MDH / Medicaid to not miss important deadlines. Completed Revalidation applications must be received within 45 days of receipt of the letter from the Department. To check a revalidation status call the vendor's Provider Enrollment Helpline: 844-463-7768.

- As providers have been aware, Medicaid's provider enrollment vendor has gone live for individually licensed providers and mental health therapy groups. For behavioral health provider questions regarding enrollment, you can still email the Medicaid BHU team at [MDH.BHenrollment@maryland.gov](mailto:MDH.BHenrollment@maryland.gov). Eventually, all enrollments will be directed to the vendor.
- The Department released a transmittal on November 21, 2017 announcing drug testing payment changes. The provider alert can be found here: <http://maryland.beaconhealthoptions.com/provider/alerts/2017/MDH-PT-09-18.pdf>. Utilization analysis of laboratory drug testing identified that 22% of the total spending for SUD services was for drug testing. The amount spent on drug testing was greater than all level 1 outpatient services, with the exception of medication assisted treatment. The Department encourages providers to follow ASAM's SMART testing guidelines and use drug testing only as clinically indicated for each individual. After consultation with our clinical partners, the Department determined that definitive testing for more than 14 drug classifications is not medically necessary for purposes of substance use testing. Therefore, effective January 1, 2018, Medicaid will no longer cover procedure codes G0482 (15-21 drug classes) and G0483 (22 or more drug classes). Additionally, after reviewing the presumptive testing strategies, and based on feedback from providers, Medicaid has added reimbursement for presumptive testing codes 80306 (Immunoassay – Instrument Assisted) and 80307 (Instrumented Chemical Analyzers) when performed in a Provider's office that has a CLIA waiver and the required equipment, effective January 1, 2018. CLIA is provided on a federal level and the Maryland Lab Permit validating availability of the required chemical analyzer is provided through Office of Health Care Quality.

Beacon stated that in conjunction with BHA and Medicaid they are working on a toolkit to assist with laboratory testing in reference to the ASAM guidelines.



As a reminder, drug testing is included in the weekly rate for OTPs; OTPs are required to have their own contracts with laboratories for these services. The OTP Quality workgroup will be discussing best practices for these contracts. Laboratories may not bill Medicaid for services ordered by an OTP.

- The Department sent out a transmittal on November 21, 2017 to provide clarifications to 10.09.06, Adult Residential Substance Use Disorder regulations. The transmittal can be found here: <http://maryland.beaconhealthoptions.com/provider/alerts/2017/MDH-PT-10-18.pdf>. The transmittal clarifies the staffing requirements for ASAM levels 3.3, 3.5, 3.7 and 3.7WM. All providers are required to come into compliance with all staffing requirements by April 1, 2018. If a provider's staffing attestation includes a recruitment plan, the attestation must be updated by April 1, 2018 with all positions filled. If you are interested in being licensed under COMAR 10.63 for level of care 3.7 you need a Certificate of Need through the Maryland Health Care Commission, because it is considered an inpatient level of care.
- Medicaid reminds providers of a change in the method used to review/suspend recipient eligibility. When mail to a recipient is returned as undeliverable, their eligibility account is automatically suspended. When possible, providers should remind Medicaid recipients to update Medicaid with any changes in their address and location information. .

### **Beacon Health Options Update**

- Additional trainings will be available on the DLA-20 Dashboard, Pregnant Women and Children provider, 8-507 Providers and Gambling providers. The trainings will be published via a provider alert and on Beacon's website.
- To provide buprenorphine treatment as provider type 50, there must be a DATA 2000 waiver provider on staff, but a license for withdrawal management (formerly detox) is not needed unless you are specifically providing withdrawal management services.
- For uninsured patients, the provider type 50's DATA 2000 provider may prescribe buprenorphine and if the provider dispenses the medication the provider will be reimbursed through Beacon (J codes only used when the provider has obtained buprenorphine in their office through a contract with a buprenorphine manufacturer). However, if the provider writes a prescription for buprenorphine the uninsured patient will be required to pay for the medication at the pharmacy. Providers need to coordinate access to buprenorphine through their local behavioral health authority (or local addiction authority) regarding how to obtain buprenorphine via prescription for the uninsured.



- Beacon will be sharing a provider alert on two important topics: Fentanyl Use and Adolescent suicides. These alerts are designed to inform providers and, when appropriate, share with patients.
- Beacon and the Department has resumed a Debugging Committee process. The committee is developing a charter regarding the purpose this committee will serve.
- Beacon received the Digital Health Award for Fall 2017 for the opioids and heroin article series. The website to access the opioids series is: <https://www.beaconhealthoptions.com/members/opioid-treatment-resources/>

### **Provider Questions**

1. Could you please provide a clearer definition of when we can use administrative days and for how long?

Up to 3 days of administrative days can be used when an individual is stepping down from hospitalization to residential level of care depending on the nature of the medical issues. The residential authorization remains open to allow the residential provider to hold the space for that individual and bill using the respective modifiers indicating the member was off site in a hospital bed. Once the member returns, the provider resumes billing the standard procedure codes for residential services. Providers must contact Beacon to notify care managers when this situation occurs, for approval and verification. Providers must clearly document in their notes how and why the situation occurred and Beacon will note the same in the authorization file so that claims are correctly paid.

Administrative days may only be used in specific circumstances and for limited periods of time (typically 2-3 days). These circumstances are as follows:

- **Admission to hospital** (due to somatic or behavioral health crisis): When a member requires inpatient hospitalization, the SUD residential provider is responsible for making sure there is an active SUD residential authorization on file that includes the days member is hospitalized. The SUD provider will hold the bed/ placement for that member & will bill the respective ASAM Level 3 procedural code w/ corresponding modifier indicating member was in a hospital bed. Upon the member's return to the Level 3 setting, the provider will ensure the member receives the expected amount of therapeutic treatment hours in order to resume billing the standard Level 3 procedural code for residential services.



- **Waiting for a bed to higher or lower level of SUD residential treatment** (ex. 3.7 to 3.5 or 3.5 to 3.7): When a member is currently in SUD residential setting but due to clinical presentation requires a “step up” or “step down” to a different intensity of residential treatment but that bed/ placement is not readily available. The provider is responsible for making sure there is an active authorization on file for current ASAM Level 3 placement while member is waiting for the new ASAM Level 3 placement. During this period of time, the SUD residential provider is responsible for meeting the needs of the member awaiting transfer and will bill the respective procedural code w/corresponding modifier indicating the member is waiting placement for an alternative level of SUD residential treatment.

Regardless if administrative days are initiated due to hospitalization or change in intensity of ASAM Level 3 services, providers must have an active authorization on file in order to bill for administrative days. Providers must inform Beacon of the circumstances requiring the use of administrative days. Providers can do so by calling 800-888-1965 and request to speak with a clinician in the Clinical Department or providers can email the information to the Clinical Department at: [marylandclinicaldept@beaconhealthoptions.com](mailto:marylandclinicaldept@beaconhealthoptions.com). A Beacon clinician will document the info in the member’s account but providers must also clearly document in the member’s medical record reason for use of administrative days. For specific information on the different rates for Administrative days, refer to: <http://maryland.beaconhealthoptions.com/provider/alerts/2017/SUD-Eff-Sept-1-2017.pdf>