



State of New Jersey  
Department of Human Services  
Division of Medical Assistance & Health Services

# NEWSLETTER

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Volume 29 No. 18

November 2019

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**TO:** Independent Clinics, Physicians, Advanced Practice Nurses and Managed Care Organizations – **For Action**

**SUBJECT:** Office Based Addictions Treatment (OBAT) and Elimination of Prior Authorization for Medication Assisted Treatment (MAT) for All MAT Providers

**EFFECTIVE:** January 1, 2019

**PURPOSE:** The Division of Medical Assistance and Health Services (DMAHS) has made several important changes to the Office Based Addictions Treatment (OBAT) program. **This Newsletter is intended to replace Newsletter Volume 9, No. 26.** As OBAT continues to grow and expand, we have received valuable input from the provider network that will add benefit to the OBAT program. As a result, the OBAT Newsletter has been updated with additional information. While much of the original Newsletter remains intact, significant changes were made to the requirements surrounding navigators found in the “Providers” section as well as a new announcement for “no charge” navigator training. This training covers how to identify a patient’s strength and needs, how to make patient centered referrals, how to establish connections with resources in the community, and how to support a patient-driven care plan.

The OBAT program is designed to enhance access and improve utilization of non-methadone MAT services for Medicaid beneficiaries by establishing additional supports and reducing administrative barriers for office-based providers providing these addiction services. Therefore, prior authorization for MAT, including Buprenorphine and Naltrexone, has been eliminated.

**OBAT is open to all specialties** and can be provided by any privately practicing physician or Advance Practice Nurse (APN).  
OBAT is **NOT** limited to primary care providers (PCPs).

**BACKGROUND:** Increasing privately practicing provider participation in substance use disorder (SUD) treatment, particularly MAT, offers an opportunity to improve access and to expand integration of care within NJ FamilyCare. The majority of NJ FamilyCare beneficiaries are covered by a Medicaid managed care organization (MCO) and receive their primary care through contracted provider practices. Until now, many providers have not participated in the treatment of substance use-related disorders (beyond referral) because of perceived barriers to providing treatment, a perceived lack of

reimbursement, and/or a lack of experience/knowledge treating these conditions. NJ FamilyCare has designed the OBAT program to support providers by increasing rates, removing prior authorization requirements, allowing providers to bill the managed care plan for this SUD service when the beneficiary is covered by managed care and offering clinical guidance and support.

**Prior authorization for MAT services, and any associated behavioral health treatment provided under a bundled payment, is eliminated.**

**ACTION:** Effective 1/1/2019, NJ FamilyCare, and its contracted MCOs, shall reimburse eligible providers who meet OBAT provider standards:

- Effective 4/1/19, Fee-for-Service providers, and providers contracted with their managed care plan as an OBAT specialist, shall be reimbursed utilizing 90792HF for the initial intake, evaluation and planning at \$438.17.
- For follow-up substance use related office visits, OBAT providers shall bill the appropriate E&M codes for substance use disorder services utilizing evaluation and management (E/M) codes with the HF modifier (99201HF-99205HF or 99211HF-99215HF). These codes shall be reimbursed at approximately 100% of the Medicare rate.
- To qualify as an OBAT provider, providers must designate an employee to function as a “Navigator”. In addition to the physician intake, and billing for E&M codes, OBAT providers can bill \$152 (one time) for the “Navigator” psychosocial assessment and establishment of a patient specific treatment plan (H0006HFHG) as well as for ongoing Navigator services, billed weekly at \$76 (H0006HFSU) for up to six weeks and then monthly at \$76 (H0006HF) for as long as identified issues remain unresolved. E&M codes can continue to be billed concurrently.

“Navigator” services, an essential component of OBAT, were designed to reimburse provider practices for addressing the patient’s psychosocial concerns and coordination of care. Navigator services are considered necessary to ensure successful treatment outcomes. While the navigator works within the provider practice, they are encouraged to work with individuals outside of the provider interaction to address any non-medical factors related to SUD. If a patient refuses navigator services and only wants MAT, the physician or APN may still receive the enhanced E/M rates. Navigator services need only be available.

**Recognizing that navigator services are new to most privately practicing providers, The State is providing periodic full day trainings at no cost. Providers interested in this training can call the Office of Behavioral Health at 609-631-4641 for more information.**

Outside of the physician intake visit (required to establish a need for MAT services), billing for navigator services does not require the individual to be seen by the physician or APN on the same date of service. However, they must have at least one face-to-face encounter with the navigator during each time unit (weekly or monthly) that is billed. While the provider does not need to see the beneficiary on the same date of service, the provider should see the patient at least monthly to demonstrate the individual is still receiving MAT services. The practice may bill for these services as per the attached schedule. Please note:

- Fully integrated providers such as Federally Qualified Health Centers (FQHCs), Opioid Treatment Programs (OTPs), and Certified Community Behavioral Health Centers (CCBHCs) are already paid bundled rates that can encompass these services and therefore are not eligible for the new navigator reimbursement.
- Fully integrated providers (FQHCs, OTPs, CCBHCs) may utilize peer support. Peers are individuals with lived experience who can support a person with SUD on their path to recovery. Peers are responsible for assisting beneficiaries with keeping appointments and connecting with community programs that may assist individuals establishing and maintaining recovery.

**Please note that the use of peers is limited to  
Independent Clinics, FQHCs and Community Providers.  
Physician practices may not bill for Peers.**

### **Prior Authorization**

Effective 4/1/2019, no prior authorization (PA) shall be allowed for medications and/or bundled services that include administering medication for the treatment of opioid or alcohol use disorders. Safety edits, posted as a result of prospective drug utilization review (DUR), are allowed. For claims billed through the pharmacy program, formulary preferences may be utilized.

Buprenorphine/naloxone combination products - No PA

Buprenorphine only - No PA

Naltrexone (oral) - No PA

Naltrexone XR - (For opioid, alcohol or both) - No PA

Methadone (oral) for the treatment of SUD- No PA

Sublocade - No PA

Probuphine - No PA

For independent clinics providing MAT services, there shall be no prior authorization for methadone (H0020HF) or non-methadone (H0033HF) dispensed per diem or as

bundled services billed under H0020HF26 (methadone) or H0033HF26 (non-methadone).

### **OBAT Provider Standards:**

- Prescribing of approved MAT medications onsite by qualified prescriber (DATA 2000 waiver). Induction may occur onsite or via home induction, but must be available onsite.
- Follow standard best practice guidelines for prescribing of MAT.
- Physician, nurse, or other qualified healthcare professionals provide education that is consistent with the nature of the problem(s) and the patient's and/or family's needs related to substance use, MAT, and associated health conditions.
- Participate in training or consultation offered through the Centers of Excellence (COE) as needed.
- Develop and maintain integrated care relationships.
- Provide, or arrange, for substance use counseling on an as needed basis, consistent with American Society of Addiction Medicine (ASAM) guidelines. Must offer counseling in conjunction with MAT or refer for counseling, which includes establishing referral relationships for services not provided by the OBAT provider. This includes referrals to Premier Providers or COE as needed.
- Assess and maintain risk management criteria such as Prescription Monitoring Program (PMP) checks, random drug screening, and managing client service plans for adherence.
- Utilize multi-disciplinary staff to provide MAT, counseling and care management. Providers may not serve as the provider and the Navigator.

NJ FamilyCare's OBAT model is a matrix of providers who are encouraged to work together to support an individual's treatment goals. The provider type that is required to meet an individual's needs depends on the needs of that individual. Providers are encouraged to work together, share experience and knowledge and promote wellness for their SUD patients. There are three OBAT provider types:

- 1) Office Based Addictions Treatment (OBAT) Providers: Consists of physicians and APNs with a Data 2000 Waiver who meet established standards for participation. OBAT providers must employ Navigators. Navigators can be any licensed individual such as an RN, LPN, or SW; or an individual with a Baccalaureate degree with 2 years clinical (office) or lived experience; or an individual with an Associate degree or a certified medical assistant with 4 years clinical (office) or lived experience (or 4 years combined). OBAT providers (including Navigator services) must bill for this service through the beneficiary's managed care plan. FFS billing is available prior to managed care enrollment only.

- 2) Premier Providers: Consists of independent clinics or DOH licensed physician practices capable of providing fully integrated care (MAT, counseling and primary medical care). Premier providers include FQHCs, Opioid Treatment Providers (OTPs) and CCBHCs. These fully integrated care providers are not eligible for separate reimbursement for navigator services given that these services are supported in their current reimbursement. However, premier providers may be reimbursed for peers to provide support to beneficiaries in their recovery. FQHCs and ambulatory care clinics shall bill the MCO for OBAT services (physical and counseling services) for all Medicaid eligible recipients. CCBHCs shall continue to be paid FFS as per their prospective payment arrangement. Independent clinics, including OTPs, shall bill MCOs for OBAT services provided to a DDD, FIDE-SNP or MLTSS beneficiary. All other eligible beneficiaries shall be covered under FFS.
- 3) Centers of Excellence (COE): A State contracted provider capable of providing mentorships, provider peer services, and development for future office based MAT providers through provider (MD, DO, APN or PA) training. COEs are required to provide clinical advice to OBAT providers for complex cases. The COE will provide care for those beneficiaries with complex needs, as needed, and will transition stable and appropriate beneficiaries to partnered Premier and OBAT providers. Billing depends on the provider type of the COE or their affiliated care provider and shall follow the billing guidance under OBAT and Premier providers above.

## Providers

In order for a provider to qualify as an OBAT provider, providers must be DATA 2000 waived to prescribe Buprenorphine. Those who are not yet waived can take advantage of Division of Mental Health and Addiction Services (DMHAS) training opportunities and are encouraged to become DATA 2000 waived providers and participate in this new model of care. DATA 2000 waived providers can also take advantage of available support and mentorship provided by COEs.

**Recognizing that navigator services are new to most privately practicing providers, The State is providing periodic full day trainings at no cost. Providers interested in this training can call the Office of Behavioral Health at 609-631-4641 for more information.**

Once the provider meets the established standards and is properly waived, the provider **must** offer “Navigator” services in order to receive the additional reimbursement. Navigators can be any licensed individual such as an RN, LPN, or SW; or an individual with a Baccalaureate degree with 2 years clinical (office) or lived experience; or an individual with an Associate degree or a certified medical assistant with 4 years clinical (office) or lived experience. Navigators may meet with the patient independently or with the provider present, but provide a separately reimbursable

service that functions primarily to address the psychosocial needs of the patient with a SUD. The position may share other duties depending on the size of the provider's population being treated.

**Navigators now may include Certified Medical Assistants (CMA) with 4 years of lived or clinical experience.**

Navigators are responsible to work with the patient to establish a comprehensive, individualized treatment plan that addresses the non-medical factors that have an impact on SUD treatment. This may include connecting patients with social service organizations, recovery supports, family education or referrals to alternate levels of care as required. The navigator and provider then work together to ensure all of the patient's SUD needs are being addressed and to fully provide integrated care.

Since research has shown that patients have better outcomes with counseling in addition to MAT, the navigator is responsible for establishing relationships with community counselors and programs, as required, and to assist their patients in arranging for, and keeping, appointments. Additionally, when providers have complex cases or situations, navigators may coordinate referrals for consultative services at clinics or centers of excellence that may offer additional clinical experience.

### **Premier Providers**

Premier providers are integrated care providers who offer both the medical and counseling components of OBAT within a single practice. They include most FQHCs, OTPs, CCBHCs and ambulatory care clinics licensed to provide substance use services in addition to MAT services. Since these providers are capable of providing integrated care, they do not qualify for navigator reimbursement.

**FQHCs, OTPs, and CCBHCs are paid bundled rates that are inclusive of navigator-like services and are not eligible for navigator reimbursement.**

### **Centers of Excellence**

Centers of Excellence (COE) are contracted providers capable of providing clinical leadership and support for other providers. Currently contracted COEs include the Rutgers University Medical School – Newark, and the Cooper Medical School of Rowan University and Rowan University School of Osteopathic Medicine. In addition to the provision of OBAT, these contracted providers offer mentorships and consultation, training opportunities to providers to become OBAT providers, fellowships to increase the pool of SUD specialists available in New Jersey, and consultation for medically complex cases. COEs are also available to provide treatment for individuals with multiple failed treatment attempts. COEs may provide MAT and/or counseling services directly or through provider affiliations. If the COE is fully integrated, they are eligible to provide peer services and assist beneficiaries to obtain services in the community (housing, job programs, and/or legal issues) that will assist them to maintain their

recovery. Peer services remain under development and will be described in a future newsletter.

### Treatment Phases

OBAT consists of three phases of treatment: Initiation, Stabilization and Maintenance. These phases and how they should be billed are listed in the table below:

Treatment Phase	Navigator Services	Billing Code
<p><b>Initiation-</b> Visit type: Adult wellness visit or acute visit for Opioid Use Disorder or Dependence. Includes separate billing for Navigator and Physician intake. A comprehensive evaluation must be related to chemical addiction (excluding nicotine) and must require MAT to qualify for enhanced rates. Includes history and physical, appropriateness for MAT, medication mgmt., toxicology screening, medication/health education and treatment planning.</p>	<p>Range of services include: treatment system navigation, advocacy, community connections, support and education for treatment compliance, recovery planning. Must include a plan of care.</p>	<p><b>90792 HF-</b> physician intake for OBAT program: \$438.17</p> <p>Providers cannot bill for the enhanced E/M rate and 90792 HF for the same visit and 90792 HF may be billed once per patient per episode of care.</p> <p><b>H0006HFHG-</b> Navigator intake and treatment planning: \$152.00. Requires physician certification of the need for MAT services. Should be billed with 90792 or E/M code.</p>
<p><b>Stabilization-</b> Visit type: follow up visit for symptom management, evaluation of cravings and potential adjustment of MAT</p>	<p>Range of services include: assisting with patient follow up for setting up and keeping counseling appointments; community connections, employment and/or housing support and necessary education for treatment compliance and recovery planning initiation.</p>	<p><b>99211-99215 HF-</b> Physician treatment review, medication mgmt., toxicology screening, medication/health education and treatment plan.</p> <p><b>H0006 HF SU:</b> \$76.00 (limited to once per week, maximum of 6 weeks)</p> <p>The treatment phase may be billed for the calendar week following induction and weekly thereafter</p> <p>May or may not be billed with E/M</p>

<p><b>Maintenance-</b> Visit type: MAT Medication evaluation and ongoing treatment</p>	<p>Determined stable and actively working on their recovery treatment plan. Range of services include: continued treatment system navigation, counseling, advocacy, community connection, support for education, and employment or housing issues, as needed, and implementing patient's recovery plan.</p> <p>Maintenance care management services may include non-face to face time working on care planning, care coordination and data analysis but at least one face to face visit per month.</p>	<p><b>99211-99215 HF-</b> billed for Physician medication management, medication/health education, toxicology screening and treatment planning.</p> <p><b>H0006HF-</b> \$76.00 per month for Navigator services</p> <p>(billed first calendar month following final H0006 HF SU billing and each subsequent calendar month thereafter)</p> <p>Must be billed after face to face visit with Navigator. May or may not be billed with E/M code.</p>
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\* OBAT is for any chemical addiction. The above estimated treatment durations are an example and are based on the treatment for opioid addiction. Alcohol or other chemical addictions may require the two hour intake followed by "as needed" (1-2) weekly payments during the treatment phase followed by monthly billing during the maintenance phase. Services should be provided based on individual need following ASAM guidelines.

If there are any questions regarding the information listed in this Newsletter, please contact The Office of Customer Service at 609-631-4642.

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