



Multnomah Other Auth/Fee Changes Effective 7/1/2019

The following changes are effective on 7/1/2019 unless otherwise indicated

Outpatient DUII Diversion Authorizations

Members enrolled in DUII Diversion must meet criteria for a SUD diagnosis to be eligible for DUII Diversion. Members who do not meet ASAM criteria for a SUD diagnosis are not eligible for DUII Diversion.

Please see the DUII Diversion – SUD Diagnosis Required memo for additional information.

Adult Induction/OBOT Medication Assisted Treatment Authorization

Providers who are not certified as Opioid Treatment Programs (OTPs) may provide some MAT services, as their provider contract allows. This authorization is for members receiving Office Based Opioid Treatment (OBOT) MAT services through a contracted Non-OTP provider. Provider entered authorizations will auto-approve in CIM for OBOT contracted providers. Authorizations entered by contracted OTP providers will also auto-approve; however, OPT providers should note that not all MAT services (e.g. Methadone) are covered under an Induction/OBOT MAT authorization.

This authorization should **NOT** be used if the member is eligible for **DUII** services. Members receiving DUII services should have a MAT DUII Dual Enrollment authorization entered.

Adult Induction/OBOT Medication Assisted Treatment - DUII Dual Enrollment

This authorization should be used for members who are eligible for a DUII program **AND** receiving MAT services. Providers who are contracted to provide both MAT and DUII services may enter this authorization; please note MAT services that require an OTP provider (e.g. Methadone) are not covered by this authorization type.

This authorization **ONLY** covers MAT services and does **NOT** cover any other outpatient services (e.g. counseling, peer services, case management, etc.) The member should also have an Outpatient DUII authorization, which will cover all other non-MAT services.

If the member requires MAT services that require an OPT provider **AND** is enrolled in a DUII program, enter an OTP MAT - DUII Dual Enrollment authorization. If the member is **NOT** enrolled in a DUII program, enter a MAT (non-DUII) authorization type instead.

Adult OTP Medication Assisted Treatment Authorizations

Previously named 'Adult Medication Assisted Treatment' - 'OTP' has been added to the authorization name. Contracted MAT providers who are certified Opioid Treatment Programs (OTPs) should select this authorization type. Non-OTP providers who are contracted to provide office based MAT should select one of the Induction/OBOT MAT authorizations.

This authorization should NOT be used if the member is eligible for DUII services, even with OTP providers. These members should have the appropriate DUII authorization entered AND a DUII MAT authorization.

Adult OTP Medication Assisted Treatment - DUII Dual Enrollment

This authorization should be used for members who are eligible for a DUII program and receiving MAT services. Only providers who are a certified Opioid Treatment Program (OTP) provider should select this authorization type. This authorization ONLY covers MAT services and does NOT cover any other outpatient non-MAT services (e.g. counseling, peer services, case management, etc.)

The member should also have one of the Outpatient DUII authorizations that will cover all other non-MAT services (e.g. counseling, peer services, case management, etc.).

If the delivering provider is not an OPT and enrolled in a DUII program, enter an Induction/OBOT MAT – DUII Dual Enrollment authorization. If the member is NOT enrolled in a DUII program, enter a MAT (non-DUII) authorization type instead.

Adult Non-Formulary Medication Assisted Treatment Authorizations

Only non-formulary medications are now included in this authorization, as well as any covered outpatient services the member may need while receiving non-formulary Medication Assisted Treatment. All formulary medications have been removed from this authorization type.

Members who are receiving formulary medications should have another MAT authorization entered.

This authorization should only be selected for members who have failed adequate trials of formulary medications and alternative medications are medically contraindicated.

H0016 HF/HG – Medical/somatic intervention in ambulatory setting

Plan staff have noticed that the rate for this service was listed incorrectly on the fee schedule. The rate for this service will be reduced to \$79.19. This is the rate set by both DMAP and Health Share.

H0033 - Oral Medication Administration, direct observation

This service has been added to ambulatory withdrawal management and all MAT authorizations.

J2315 HF/HG - Naltrexone (Vivitrol injection)

Vivitrol no longer requires a KO modifier. Vivitrol has been removed from the non-formulary MAT authorization. Effective 4/1/19 it placed in the formulary MAT authorization.

S5190 - Evaluating Treatment & Social Outcome Assessment

Effective 4/1/19: Providers are no longer using this assessment so it has been removed from the fee schedule. Providers were initially notified of this change as a follow up to the March 2019 AD Provider Billing Meeting.

T1016 HF/HG – Case Management

T1016 HF/HG – Case Management has been added to the fee schedule. Any authorizations which cover H0006 will also cover T1016.

T1502 - Medication administration (not methadone)

This service will only be available if the member has a MAT or ambulatory withdrawal management authorization; other outpatient authorizations will no longer cover T1502.

This code will require either a HF or HG modifier; previously this code required a HG modifier. This will enable non-OTP providers to use the code.

TPL Waiver

90849 and any J-Codes do not require Medicare to be billed first.

Timely Filing – Secondary Payer

Due to the nature of funding for Multnomah Other, the timely filing deadline when Multnomah Other is the secondary payer has been reduced to 180 days. An Explanation of Benefits (EOB) from the primary payer must still be submitted with the Multnomah Other claim.

When a primary payer's adjudication date is more than 90 days after the claim received date this will be considered an extenuating circumstance for a Multnomah Other timely filing waiver. Please ensure that the date the claim was received by the primary payer and the adjudication date are documented in the timely filing waiver. A Timely Filing Waiver form is posted on the AD Provider website:

<https://multco.us/mhas/addiction-provider-resources>.