



State of New Mexico
Medical Assistance Program Manual
Supplement



DATE: October 23, 2024

NUMBER: 24-19

TO: HOSPITALS AND ALL PROVIDERS

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SUBJECT: BILLING AND REIMBURSEMENT GUIDANCE FOR COMPREHENSIVE ADDICTION RECOVERY ACT (CARA) PROGRAM-PLAN OF SAFE CARE IN THE HOSPITAL SETTING

The New Mexico Health Care Authority, Medical Assistance Division (HCA/MAD) is issuing this Supplement with information on billing guidance for implementing plan of care reimbursement for infants (birth to one year of age) in the Comprehensive Addiction Recovery Act (CARA) program. These are infants who have prenatal exposure to substances (through a positive toxicology and/or mother's disclosure) and **require** a plan of safe care, prior to a hospital discharge, that includes ongoing wraparound services and family referrals to **voluntary** support and treatment services once discharged. The CARA Plan of Safe Care (POSC) is meant to facilitate communication and coordination among service providers to support the wellbeing of the infant, as well as identify services for the caregiver(s).

Effective October 1, 2024, HCA/MAD will reimburse hospitals for the development and initiation of POSC services for infants in the CARA program to ensure community transition.

1. **Provider Eligibility Requirements:** Medicaid enrolled hospitals.
2. **MCO Member Eligibility requirements:**
 - a. Medicaid eligible infants who have prenatal exposure to substances as defined by positive toxicology reports for infants or pregnant person or disclosure by pregnant person.
 - b. Eligibility must be documented in the eligible infant's medical record.
3. **Prior Authorization:** No prior authorization is required.
4. **Billing & Reimbursement:**
 - a. **Hospital:** The hospital provider will bill and be paid for the infant's and mother's inpatient stay just as they do now. The POSC services for CARA infants will be billed as an outpatient hospital service on the UB 04 claim format using the infant's information. The hospital provider will bill and be paid for a complete POSC prior to a hospital discharge, that includes ongoing wraparound services and family referrals to voluntary support and treatment services once discharged and should not bill for POSC that the MCO Care Coordinator has completed.

The claim will be submitted using the infant’s billing information and the following revenue code, and a procedure code & modifier combination. This billing requirement will keep the claim for POSC services from denying against the inpatient hospital claim.

- i. **Revenue Code:** 0220 SPECIAL CHARGES - GENERAL CLASSIFICATION
- ii. **Procedure Code:** Enter the appropriate POSC procedure code and modifier from Table 1: “Plan of Safe Care Procedure Codes & Modifiers.” The modifiers will be used for tracking purposes.
- iii. The hospital is reimbursed at the OPPS Fee Schedule rate published at <https://www.hca.nm.gov/providers/fee-schedules/>

b. Table 1: Plan of Safe Care Procedure Codes & Modifiers

Procedure Code	Description	Modifier
	Attending Physician	
99238	Hospital discharge day management, 30 minutes or less	U1 Hospitals
99239	Hospital discharge day management, more than 30 minutes	U1 Hospitals
	Physicians/qualified nonphysician, other than the attending physician	
99231	Hospital discharge day management, 30 minutes or less	U1 Hospitals
99232	Hospital discharge day management, more than 30 minutes	U1 Hospitals
99233	Subsequent hospital care with moderate level of medical decision making, if using time, at least 50 minutes	U1 Hospitals

- 5. **Submitting a claim for CARA POSC Services:** HCA/MAD will allow providers to submit claims who have met the requirements listed above and provided CARA POSC to Medicaid eligible infants within dates of service October 1, 2024, to the present. HCA/MAD will allow providers 90 days from the date on this Supplement to submit a claim and avoid untimely filing denial.

For questions regarding this guidance, please contact the Medical Assistance Division, Benefits and Reimbursement Bureau at madinfo.hca@hca.nm.gov.