



Susana Martinez, Governor
Brent Earnest, Secretary
Nancy Smith-Leslie, Director

December 18, 2018

RE: Tribal Notification to Request Advice and Comments Letter 18-20 – Medicaid Fee Schedule Changes

Dear Tribal Leadership, Indian Health Service, Tribal Health Providers, and Other Interested Parties:

Seeking advice and comments from New Mexico's Indian Nations, Tribes, Pueblos and their health care providers is an important component of the government-to-government relationship with the State of New Mexico. In accordance with the New Mexico Human Services Department's (HSD's) Tribal Notification to Request Advice and Comments process, this letter is to inform you that HSD, through the Medical Assistance Division (MAD), is accepting written comments until **5:00pm Mountain Time (MT) through January 20, 2019**, regarding the new proposed fee schedule changes for Medicaid physical health, behavioral health and Applied Behavior Analysis (ABA) effective January 1, 2019.

The proposed fee schedules are posted on the HSD website at <http://www.hsd.state.nm.us/providers/fee-for-service.aspx> and are identified as follows:

- Applied Behavior Analysis (ABA) Services for Autism Fee Schedule Changes for January 1, 2019
- Physical Health Fee Schedule Changes for January 1, 2019
- Behavioral Health Fee Schedule Changes for January 1, 2019

All proposed changes are to establish prices for new codes; or, as in the case of some behavioral health and physical health services, to implement a proposed increase. There are no proposed decreases to existing fee schedule rates.

As described below, the Department will allow 30 days for public comments. Since the proposed changes will be effective on January 1, 2019, it is the intent of the Department to implement the changes for dates of service on or after that date. Any changes made in the rates based on public comments received after January 1, 2019, through the end of the comment period, will result in future revisions to the fee schedule documents as appropriate.

Summary of Changes:

Applied Behavior Analysis (ABA) Services for Autism Fee Schedule Changes for January 1, 2019

The Current Procedural Terminology (CPT) Coding Manual, as revised by the American Medical Association (AMA) for 2019, deletes some codes, redefines the use of other codes, changes the billing units, and assigns new codes for some ABA services. The intent of the Department is to show on the proposed fee schedule how the conversion and crosswalk from the current codes and units to the new codes and units will be made. Also, a new modifier (U9) is being added to accommodate services rendered by a Board Certified Assistant Behavior Analyst (BCaBA).

Physical Health Fee Schedule Changes for January 1, 2019

There are proposed rate increases of 25 percent for codes 11981 and 11983 for administration of Long-Acting Reversible Contraceptive (LARC) devices. There is also a 200 percent proposed rate increase for insertion of an Intra-Uterine Device (IUD). These new payment amounts were established based on comments received from various providers and other interested parties, and based on New Mexico's rates for these procedures compared to other states.

The proposed fee schedule also includes new covered services for neurological and neurosurgical consultations provided through telemedicine via the Access Remote Neuro Consult Experts (ACCESS) Program at the University of New Mexico (UNM). The rates proposed are based on the cost to hospitals for consultations provided by the ACCESS Program through contract with UNM. These services are not covered by Medicaid when the recipient is enrolled in Medicare; however, the deductible, co-insurance, and co-payments will be evaluated for payment by Medicaid when the service is covered by Medicare.

Additionally, there are proposed new codes and rates for Complex Chronic Care Management, Comprehensive Assessment and Care Planning. For these services, Medicaid is following the Medicare model to ensure that appropriate care is delivered. Please refer to <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/ChronicCareManagement.pdf> for additional guidance and information.

Behavioral Health Fee Schedule Changes and Additions for January 1, 2019

1. MAD is proposing to base pricing for the new service of Accredited Residential Treatment Centers (ARTCs) for adults with a substance use disorder (SUD) based on an individual cost analysis for each ARTC as they are developing the program:
 - a. Level 1, which is for American Society of Addiction Medicine (ASAM) 3.1 level of care;
 - b. Level 2, which is for ASAM 3.2WM (withdrawal management), 3.3 and 3.5 level of care; and
 - c. Level 3, which is for ASAM 3.7 and 3.7WM level of care.

2. MAD is proposing to reimburse Institutions for Mental Disease (IMDs) for inpatient stays based on a percent of billed charges.
3. MAD is proposing to base pricing for the fixed daily rate for new Crisis Triage Centers (CTCs) on an individual cost analysis for each CTC as they are developing the center. This will be true for outpatient-only CTCs, and for those that include residential beds. The CTCs will also be able to bill for other professional services at fee schedule rates if the rendering providers were not included in their cost analysis.
4. MAD is proposing a daily rate of \$875.00 for partial hospitalization services that are outpatient only in a psychiatric hospital or an acute care hospital with psychiatric services. In addition to the daily rate, other supplemental professional services such as occupational therapy, individual and group therapies, and psychological testing may be billed at fee schedule rates.
5. MAD is proposing to add newly reimbursable screening and brief intervention services with two groups of rates. The first is for Screening, Brief Intervention and Referral to Treatment (SBIRT), for which training and use of the state developed tool is required, and which will be payable at \$27.00 for the screening and \$54.00 for the brief intervention. The second set of rates is for the use of other validated screening tools for behavioral health, which will be payable at \$16.36 for the screening and \$22.79 for the brief intervention.
6. MAD is proposing a rate of \$7.20 per 15 minutes for group peer support services.
7. MAD is proposing a rate of \$28.42 per session for group activity therapy.
8. MAD is proposing a rate of \$27.49 per 15 minutes for the evidence-based practice of Cognitive Enhancement Therapy (CET).
9. Interdisciplinary teaming is a newly reimbursable service with the goal of increasing the integration of behavioral health and physical health for Medicaid beneficiaries with multiple co-morbidities. Interdisciplinary teaming requires that the individual be present at the evaluation and planning meeting. MAD is proposing two categories of rates. The first is for adult Medicaid beneficiaries with a serious mental illness (SMI), or for children or adolescents with a severe emotional disturbance (SED). The second category is for Medicaid beneficiaries with any behavioral health diagnosis coupled with other co-morbidities.
 - a. For SMI and SED individuals, only certain agencies with appropriate staffing may serve as the lead or coordinating agency. Up to three participating agencies with the potential of multiple practitioners may bill for the same encounter. Rates are dependent on lead or participating agency, and the number of practitioners from each agency. See the fee schedule for detailed rates.
 - b. For other behavioral health beneficiaries, any agency may serve as the lead, and any other one practitioner may bill for the same encounter.
10. One hour of mandatory education on HIV and other communicable diseases, and the impact of SUD is federally required in an opioid treatment program. MAD proposes to take this out of the bundled rate and give it a separate code for tracking purposes. The service is defined as Behavioral Health Prevention/Education Service with a Target Population to Affect

Knowledge, Attitude, and/or Behavior. It can be delivered individually or in a group at \$40.09 for 30 minutes, or \$32.00/person for a one-hour group.

Tribal Impact

HSD expects that these proposed changes will have a positive impact for Native Americans, pueblos, and Indian Health Service (IHS) or tribal health care providers. Because some services that were not previously offered will now be available, it is believed these changes will result in better access and improved quality of health treatment. The total fiscal impact is approximately \$1 million total (\$250,000 in state general funds) for physical health fee schedule changes; and approximately \$4 million total (\$1 million in state general funds) for behavioral health fee schedule changes. There is no fiscal impact anticipated as a result of proposed changes to the ABA fee schedule.

Tribal Advice and Comments

Tribes and tribal health care providers may view the proposed fee schedules on the HSD website at <http://www.hsd.state.nm.us/providers/fee-for-service.aspx> or <http://www.hsd.state.nm.us/providers/written-tribal-consultations.aspx> *Notification Letter 18-20.*

Important Dates

- **Written comments must be submitted by 5:00 p.m. Mountain Time (MT) on January 20, 2019.** Please send your comments to the MAD Native American Liaison, Theresa Belanger, at (505) 827-3122 or by email to Theresa.Belanger@state.nm.us. All written comments received will be posted as they are received on the HSD website at: <http://www.hsd.state.nm.us/providers/written-tribal-consultations.aspx> along with the applicable notification letter. The public posting will include the name and any contact information provided by the commenter.
- Comments and responses will be compiled and made available upon request by February 18, 2019.

Sincerely,



Nancy Smith-Leslie, Director
Medical Assistance Division

cc: Kari Armijo, HSD/MAD Deputy Director
Theresa Belanger, Native American Liaison, HSD/MAD