

# State of California—Health and Human Services Agency Department of Health Care Services



DATE: May 29, 2015

MHSUDS INFORMATION NOTICE NO.: 15-020

TO: COUNTY BEHAVIORALHEALTH PROGRAM DIRECTORS

COUNTY DRUG AND ALCOHOL ADMINISTRATORS

COUNTY BEHAVIORALHEALTH DIRECTORS' ASSOCIATION

CALIFORNIA COUNCIL OF COMMUNITY MENTAL HEALTH AGENCIES

COALITION OF ALCOHOL AND DRUG ASSOCIATIONS DRUG MEDI-CAL DIRECT CONTRACT PROVIDERS

SUBJECT: PROPOSED DRUG MEDI-CAL REIMBURSEMENT RATES FOR FISCAL

YEAR 2015-16

#### **PURPOSE**

This Information Notice transmits the proposed Fiscal Year (FY) 2015-16 reimbursement rates for Drug Medi-Cal (DMC) services, effective July 1, 2015 through June 30, 2016.

#### DISCUSSION

These proposed rates, effective July 1, 2015, were developed in accordance with Welfare and Institutions Code Sections 14021.51, 14021.6 and 14021.9. For FY 2015-16, the cumulative growth in the Implicit Price Deflator used to develop the proposed rates was 11.2 percent, as reported by the Department of Finance. These rates reflect the Department of Health Care Services' (DHCS') analysis of costs for the non-Narcotic Treatment Program (NTP) dosing DMC treatment modalities.

These rates are applicable to DMC services provided under current DMC regulations and do not necessarily apply to any services that would be provided by counties participating in the proposed Medicaid DMC Organized Delivery System Section 1115 Waiver.

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For billing DMC services for service dates on or after July 1, 2015, please refer to the following tables when populating the procedure and modifiers on the 837P electronic claim file of DMC claims submitted for adjudication.

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Non-Perinatal Service Groups, Types and Billing Codes

Service	1 11			
	Service Type	Procedure	Modifier	Modifier
IOT	Intensive Outpatient Treatment	H0015		
NAL	Naltrexone (NAL) generic	S5000	HG	
NAL	Naltrexone (NAL) brand name	S5001	HG	
NTP	NTP – Individual Counseling	H0004	HG	
NTP	NTP - Group Counseling	H0005	HG	
NTP	NTP - Methadone	H0020	HG	
ODF	ODF – Individual Counseling	H0004		
ODF	ODF – Group Counseling	H0005		

Perinatal Service Groups, Types and Billing Codes

Service		Billing Codes			
	Service Type	Procedure	Modifier	Modifier	
IOT	Intensive Outpatient Treatment	H0015	HD		
NTP	NTP – Individual Counseling	H0004	HD	HG	
NTP	NTP - Group Counseling	H0005	HD	HG	
NTP	NTP - Methadone	H0020	HD	HG	
ODF	ODF – Individual Counseling	H0004	HD		
ODF	ODF – Group Counseling	H0005	HD		
RES	Residential - Short-Term	H0018	HD		
RES	Residential – Long-Term	H0019	HD		

# **REFERENCES**

Sections 51516.1, Title 22, California Code of Regulations Sections 14021.51, 14021.6 and 14021.9, Welfare and Institutions Code MHSD INFORMATION NOTICE NO.: 15-020

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# **HISTORY**

Section 51516.1, Title 22, California Code of Regulations

## **QUESTIONS/MAINTENANCE**

Questions regarding the DMC rates may be directed to Eric Martinez at (916) 327-2698 or <a href="mailto:Eric.Martinez@dhcs.ca.gov">Eric.Martinez@dhcs.ca.gov</a>.

## **EXHIBIT**

Exhibit: Proposed Drug Medi-Cal Rates for Fiscal Year 2015-16

Additional copies of this notice and its exhibits may be downloaded from the DHCS website at: http://www.dhcs.ca.gov/formsandpubs/Pages/MHSUDS-InfoNotices.aspx

Sincerely,

Original signed by

Karen Baylor, Ph.D., LMFT, Deputy Director Mental Health & Substance Use Disorder Services