



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



EDMUND G. BROWN JR.
GOVERNOR

DATE: June 17, 2015

MHSUDS INFORMATION NOTICE NO.: 15-028

TO: COUNTY BEHAVIORAL HEALTH PROGRAM DIRECTORS
COUNTY DRUG & ALCOHOL ADMINISTRATORS
COUNTY BEHAVIORAL HEALTH DIRECTOR'S ASSOCIATION
CALIFORNIA COUNCIL OF COMMUNITY MENTAL HEALTH AGENCIES
COALITION OF ALCOHOL AND DRUG ASSOCIATIONS

SUBJECT: NARCOTIC TREATMENT PROGRAM COUNSELING MINUTE
MAXIMUMS

The Department of Health Care Services (DHCS) is issuing this Information Notice to provide clarification to counties and direct providers regarding the circumstances in which Narcotic Treatment Program (NTP) counseling services may exceed 200 minutes per month.

Background

Pursuant to DHCS obtaining approval of State Plan Amendment (SPA) 13-038 from the Centers for Medicare and Medicaid Services (CMS), the 200-minute limit on counseling services, provided in NTP settings and paid for with Drug Medi-Cal (DMC) funds, was removed. Implementation of the SPA provisions was retroactive to January 2014. Information Notice 14-031.

However, the SFY 14-15 State-County contract for substance use disorder services, which allowed NTP providers to bill for counseling hours in excess of 200 minutes per month under specific circumstances, was not fully executed by many counties until the fall of 2014. This delay may create the potential for unintentional DMC regulatory non-compliance by NTP contractors.

For more information, please click the link below to access MHSUDS Information Notice No. 14-031:

http://www.dhcs.ca.gov/services/MH/MHSUD/Documents/Information_Notices/14-031.pdf

Discussion

For counseling services provided to DMC beneficiaries, NTP providers may be reimbursed for up to 200 minutes (20-10 minute increments) of individual and/or group counseling per calendar month per beneficiary. If medical justification is provided that requires additional NTP counseling beyond 200 minutes per calendar month, NTP contractors may bill and be reimbursed for additional counseling (in 10 minute increments). Medical justification for the additional counseling must be clearly documented in the beneficiary record. Reimbursement for covered NTP services shall be limited to the lower of the NTP's usual and customary charge to the general public for the same or similar services or the Uniform Statewide Daily Reimbursement Rate.

Due to the processing timelines in DHCS receiving official notification by CMS, and based on the date that the State-County contracts were fully executed, NTP providers began implementing the provision of services above and beyond the initial treatment plan without obtaining additional documentation of medical justification. DHCS will allow progress note documentation of the additional services within the beneficiary records to serve as evidence for payment for these services from January 1, 2014 to June 30, 2015.

Please direct any questions regarding this Information Notice to Ms. Tracie Walker, Chief, Performance Management Branch at (916) 327-2750.

Sincerely,

Original signed by

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

Enclosure