



Medicaid Handbook Transmittal Letter (MHTL) No. 3341-19-01

**TO: Eligible Providers of Medicaid Services
Chief Executive Officers, Managed Care Plans (MCPs)**

FROM: Maureen M. Corcoran, Director

SUBJECT: Behavioral Health Policy Updates Effective August 1, 2019

Summary

The following Ohio Administrative Code rules were amended through an emergency rule filing effective August 1, 2019.

Rule 5160-8-05 entitled “Behavioral health services-other licensed professionals” sets forth general Medicaid policy regarding the provision of behavioral health services by specified providers. The rule states related definitions, provider requirements, and services the providers may render. Reimbursement policy is stated as well as provider billing limitations and service provision documentation requirements. The proposed revisions include an updated policy related to behavioral health services performed in an inpatient or outpatient hospital setting.

Rule 5160-27-01 entitled “Eligible provider for behavioral health services” sets forth the requirements for behavioral health services provided by community mental health and substance use disorder treatment providers. The proposed revision provides for a registered nurse to perform a nursing regimen, in accordance with Section 4723.01 of the Ohio Revised Code, without an order from a medical practitioner.

Rule 5160-27-03 entitled “Reimbursement for community behavioral health services” sets forth the general reimbursement policy for behavioral health services provided by community mental health and substance use disorder treatment providers. The proposed revisions increase the reimbursement rate to one hundred per cent of the Medicaid maximum for evaluation and management and psychiatric diagnostic evaluation services when rendered by Certified Nurse Practitioners, Certified Nurse Specialists, or Physician Assistants. It also increases the reimbursement rate for crisis services for mental health (MH) and substance use disorders (SUD) as well as for group psychotherapy and group therapeutic behavioral services (TBS) for MH and group counseling for SUD. Finally, smoking cessation counseling codes have been added.

Rule 5160-27-04 entitled “Mental health assertive community treatment service” states activities that constitute the service as well as eligibility requirements to receive the service. Provider requirements are stated as well as provider billing policy and prior authorization requirements. New language refines the face-to-face requirement for provider and Medicaid recipient interactions.

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Rule 5160-27-08 entitled “Mental health therapeutic behavioral services and psychosocial rehabilitation” states activities that constitute both of these services. Limitations on the provision of both services are stated as well as service provision documentation requirements. The proposed revision permits licensed mental health practitioners to render the therapeutic behavioral service.

Access to Rules and Related Material

The main Ohio Department of Medicaid (ODM) web page includes links to valuable information about its services, programs, and rules; the address is <http://www.medicaid.ohio.gov>

Additional Information

Questions pertaining to this letter should be addressed to:

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