NJ MATrx Model

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The MATrx Model

- The Division of Medical Assistance and Health Services, in collaboration with the Division of Mental Health and Addiction Services, is proposing Office Based Addictions Treatment (OBAT) as a Medicaid reimbursable service.
- OBAT is designed to enhance access and improve utilization of non-methadone medication-assisted treatment (MAT) services for Medicaid beneficiaries by establishing additional supports and reducing administrative barriers for primary care providers (PCP) providing these addiction services.



Background The MATrx Concept

- low incidence of PCPs participating in substance use disorder (SUD) treatment, particularly MAT
- offers an opportunity to improve access and to expand integration of care within NJ FamilyCare
- The majority of NJ FamilyCare beneficiaries are covered under a Medicaid managed care organization (MCO)
- The majority of NJ FamilyCare beneficiaries currently do not receive SUD services through their primary care providers
- Until now, many PCPs have elected not to participate in the diagnosis and treatment of substance use related disorders because of a lack of reimbursement, a lack of experience and knowledge treating these conditions and/or perceived barriers to providing treatment



Perceived Barriers

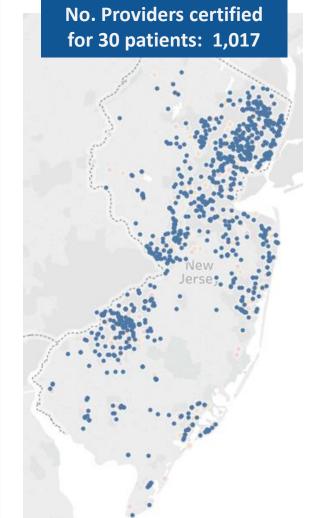
Barriers include:

- Prior authorization requirements
- Discerning what services are covered by the MCO and/or the State
- Low reimbursement
- Lack of knowledge or experience

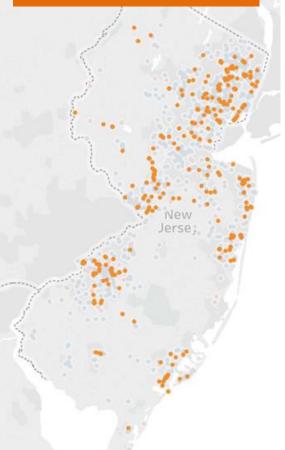
NJ FamilyCare has designed the OBAT program to support providers by increasing rates, reducing prior authorization requirements, and offering clinical guidance and support.



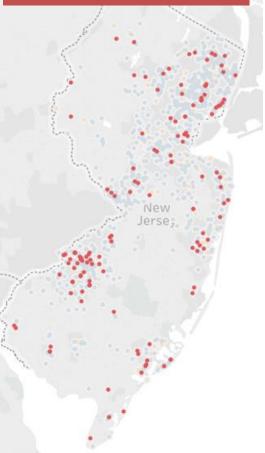
New Jersey waivered Buprenorphine Providers



No. Providers certified for 100 patients: 273



No. Providers certified for 275 patients: 136

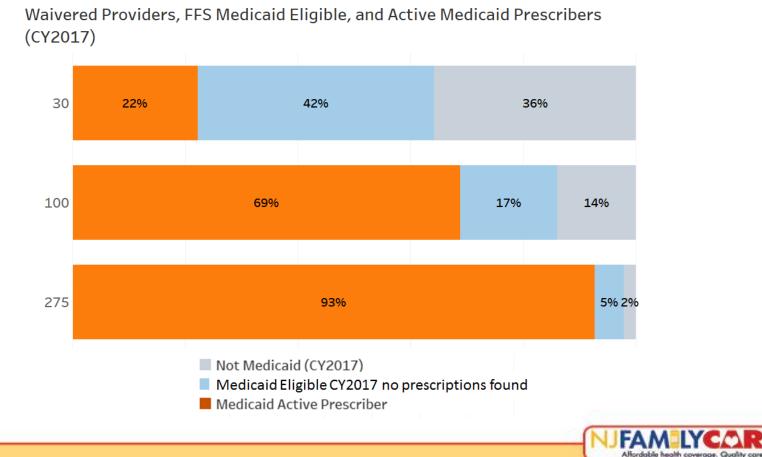


CMS Data Analytics Project. Waivered buprenorphine providers. Distinct NPI count by Provider capacity



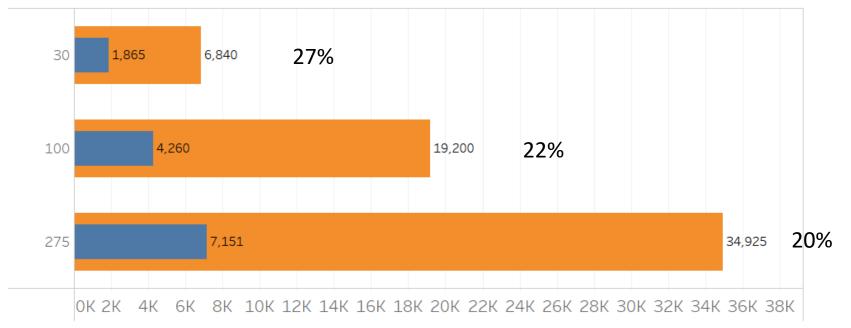
Waivered Buprenorphine Providers Medicaid Eligible vs. Active Prescribers

Larger providers are more likely to be active Medicaid providers and/or active prescribers of buprenorphine (CY2017) to a Medicaid recipient.



Waivered Prescribers with Buprenorphine Prescriptions CY2017 Capacity vs. Medicaid Patients

Certified Patient Capacity vs. Medicaid Beneficiaries Served (CY2017)





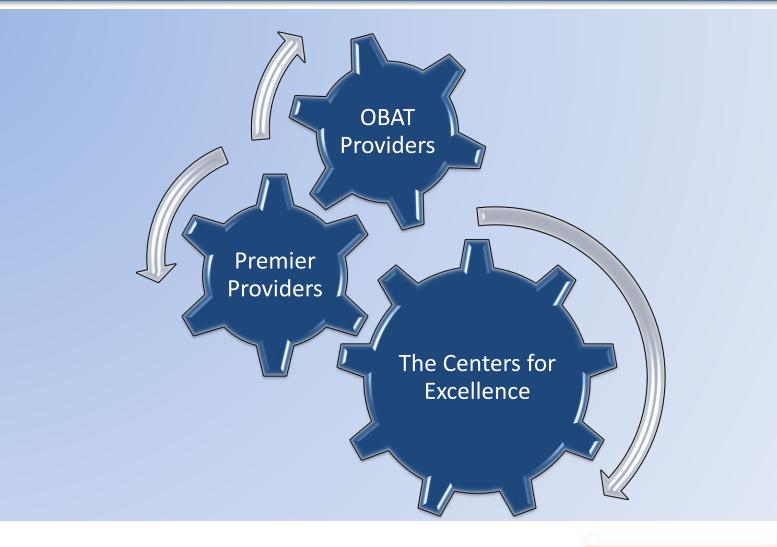
The MATrx Concept

Provider types:

- Centers of Excellence- University based providers contracted by the State to provide training, consultation and peer services in addition to primary care treatment for complex cases.
- Premier Providers- FQHCs, CCBHCs, OTPs have the ability to provide both physical and counseling services. Currently paid under a bundled rate for these services.
- Office Based Addiction Treatment- Primary Care Providers (PCPs)



The New Jersey MATrx





OBAT providers must:

- be DATA 2000 waivered* to prescribe Buprenorphine
- affiliate with other OBAT providers
- promote integrated care
- meet best practice guidelines

*Those who are not yet waivered can take advantage of DMHAS training opportunities and are encouraged to become DATA 2000 waivered providers

OBAT Providers:

- Number of Waivered Providers- 1540
 - 1370 MD
 - 153 APN
 - 17 PA
 - Provider capacity 100,310



Centers of Excellence

Institutions of medical learning: Rutgers University Medical School - Newark, Cooper Medical School and Rowan University School of Osteopathic Medicine

- Contracted with DHS to offer mentorships and consultation
- Offer training opportunities to PCPs to become OBAT providers
- Provide fellowships to increase the pool of SUD specialists available in New Jersey
- Provide consultation for medically complex cases
- Provide treatment for individuals with multiple failed treatment attempts or complex comorbidity
- Provide peer services



Premier Providers:

Providers who offer both the medical and counseling components of OBAT within a single practice. They include most Federally Qualified Health Centers (FQHCs), Opioid Treatment Providers (OTPs), Certified Community Behavioral Health Centers (CCBHCs) and substance use licensed independent clinics who offer integrated care in addition to MAT services.



Primary Care Providers:

Physicians, Advance Practice Nurses (APNs) or Physician Assistants (PAs) contracted with a managed care organization to provide primary care

- Must employ "Navigators" to assist patients to address psychosocial issues related to substance use
- Coordinate counseling services with community providers
- Refer complex patients to Centers of Excellence or Premier providers



The MATrx Concept Service Enhancements

Rates

- Enhanced rate for PCP intake and evaluation for OBAT services
- Enhanced rates for Evaluation and Management codes

Navigator/Peer Services

- Reimburse for Navigator (PCP) and Peer support services (COE) to address psychosocial issues related to SUD treatment
- Assist with recovery issues including housing, transportation, or employment



MATrx Navigator Services

Navigator Services:

- Once the provider meets the established standards and is properly waivered, they must offer "Navigator" services.
- Navigators must be registered nurses, licensed practical nurses, social workers or individuals with a bachelor's degree and at least two years of life experience with substance abuse.
- Navigators may meet with the patient independently or with the PCP present.
- Navigators are a separately reimbursable service that functions primarily to address the psychosocial needs of the SUD patient.
- The position may share other duties depending on the size of the SUD population being treated.



MATrx Navigator Services

Navigator Services:

- Work with the patient to establish a comprehensive, individualized treatment plan that addresses non-medical factors that have an impact on SUD treatment:
 - connecting patients with social service organizations
 - recovery supports
 - family education
 - referrals to alternate levels of care as required
- Establish relationships with community addiction counselors, as required, and to assist their patients in arranging for, and keeping, appointments.
- For complex cases or situations, navigators may coordinate referrals for consultative services at clinics or centers of excellence that may offer additional clinical experience.

*FQHCs, OTPs, and CCBHCs are paid bundled rates and are not eligible for navigator/peer reimbursement



MATrx Services

	Centers for Excellence	Premier Providers	PCPs
Integrated Care for Physical and Behavioral Health needs on site or through affiliation	Required	Required	Required
Capability for MAT induction, stabilization and maintenance	Required	Required	Required
Ability to see MAT referrals within 24 – 48 hours	Required	N/A	N/A
Ability to utilize Peer Support Services	Required	N/A	N/A
Ability to provide Case Management/Navigation services	Optional	N/A	Required
Ability to provide BH counseling on site, thru affiliation, or via Telemedicine	Required	Required	Required



Potential OBAT Billing: Initiation

Navigator Service E&M Code 90792 HF- physician intake for Unit of Service: Navigation: OBAT program: \$325 Initiation One-time fee billed on Range of services include: initial visit treatment system Includes history and physical, navigation, advocacy, (Visit type: Adult appropriateness for MAT, H0006 HF HG community connections, wellness visit or acute medication mgmt., toxicology support and education for visit for chemical screening, medication/health **Proposed Rate for** treatment compliance. dependence. Navigator intake and recovery planning. Must education and treatment A comprehensive include a plan of care. treatment planning evaluation of a new planning. billed with H0006 HF patient for HG: **\$152.00** appropriateness of Providers cannot bill for the MAT. enhanced E/M rate and 90792 HF *H0006 HF HG must be for the same visit and 90792 HF billed with E/M or may be billed once per patient 90792 HF per episode of care



Potential OBAT Billing: Stabilization

Navigator Service E&M Codes Stabilization Unit of Service: Weekly Navigation: 99211-99215 HF-(estimated 4-6 weeks) Visit type: follow up visit Range of services include: for symptom management, H0006 HF SU assisting patient with evaluation of cravings and setting up and keeping potential adjustment of Proposed Rate: \$76.00 counseling appointments; MAT (Buprenorphine, (limited to once per week, community connections, Naltrexone (injectable or maximum of 6 weeks) employment and/or plan. oral, Acamprosate and housing support and others drugs in evidence The treatment phase may necessary education for

be billed for the calendar

week following induction

May or may not be billed

and weekly thereafter

with E/M

code

based treatment protocols

for alcohol or opioids)

Must see Navigator face to face to bill. May or may not be billed with E/M

Treatment review, toxicology screening,

treatment compliance and recovery planning initiation.

medication mgmt., medication/health education and treatment



Potential OBAT Billing: Maintenance

Navigator Service		E & M Codes	
	Unit of Service:	Navigation:	99211-99215 HF-
Maintenance	Monthly (continues based on	Determined stable and actively	Billed for medication
	individual need)	working on their recovery	management,
Visit type:		treatment plan. Range of	medication/health education, toxicology
MAT medication	H0006HF	services include: continued	screening and treatment
evaluation and	Proposed rate: \$76.00	treatment system navigation,	planning.
ongoing treatment	(billed first calendar month	advocacy, community	
	following final H0006 HF SU	connection, support for	
	billing and each subsequent	education, and employment or	
	calendar month thereafter)	housing issues, as needed, and	
		implementing patient's recovery	
	May be billed for opioid and/or	plan.	
	alcohol MAT treatment.	Case management services may	
		include non-face to face time	
	Must be billed after face to	working on care planning, care	
	face visit with Navigator. May	coordination and data analysis	
	or may not be billed with E/M	but at least one face to face visit	
	code.	per month.	



MATrx Concept

OBAT is for any chemical addiction. The estimated treatment durations presented are based on the treatment for opioid addiction. Alcohol or other chemical addictions may require a two hour intake followed by 1-2 weekly payments as needed. Services should be provided based on individual need following ASAM guidelines.



Proposed Timeline

Phase 1: Sept. to Dec. 2018

- Determine OBAT Requirements
- Establish reimbursement for OBATs
- Identify OBAT providers
- Determine criteria for C's of E and Initiate MOA
- Identify C's of E
- Announcements for DMHAS trainings for Data 2000 prescribers

Phase 2: Jan. 1 thru March, 2019

OBAT billing goes active Jan 1, 2019

Centers of Excellence

Determine requirements for Premier Providers

Evaluation and reporting requirements

Phase 3: April 1 thru July 1, 2019

> • Billing goes active for premier providers

 Peer Support Services covered by Medicaid July 1, 2019

Alfordable health coverage. Quality care