



# Frequently Asked Questions



The chart, unless otherwise specified, does not address Medicaid reimbursement, which falls outside of the purview of the Department of Health (DOH). Any questions or issues related to Medicaid reimbursement should be directed to the Department of Human Services (DHS).

Type of Facility	Can the facility provide primary health care services <sup>1</sup> ?	Can the facility provide substance use disorder services?						Can the facility provide mental health services?					
		Prescribe Medications for MAT <sup>2</sup>	Store/Dispense Medications for MAT <sup>3</sup>	Provide SUD Treatment	Provide care through Mid-level SUD professional	Provide care through Psychiatrist	Provide care through Psychologist	Prescribe Psychotropic Medications	Store/Dispense Psychotropic Medications <sup>4</sup>	Provide Mental Health Treatment	Provide care through Mid-level mental health professional	Provide care through Psychiatrist	Provide care through Psychologist
Federally Qualified Health Center	✓	✓ <sup>5</sup>	✓ <sup>6</sup>	✓ <sup>7</sup>	✓ <sup>8</sup>	✓ <sup>9</sup>	✓ <sup>10</sup>	✓	✓	✓ <sup>11</sup>	✓ <sup>12</sup>	✓ <sup>13</sup>	✓ <sup>14</sup>
Ambulatory Care Facility (ACF) <sup>15</sup>	✓ <sup>16</sup>	✓ <sup>17</sup>	✓ <sup>18</sup>	✓ <sup>19</sup>	✓ <sup>20</sup>	✓ <sup>21</sup>	✓ <sup>22</sup>	✓	✓	✓ <sup>23</sup>	✓ <sup>24</sup>	✓ <sup>25</sup>	✓ <sup>26</sup>
Certified Community Behavioral Health Clinic <sup>27</sup>	✓ <sup>28</sup>	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Mental Health Program (MHP) <sup>29</sup>	* <sup>30</sup>	* <sup>31</sup>	* <sup>32</sup>	✓ <sup>33</sup>	✓	✓	✓	✓ <sup>34</sup>	✓ <sup>35</sup>	✓ <sup>36</sup>	✓	✓	✓
Substance Use Disorder (SUD) Facility <sup>37</sup>	* <sup>38</sup>	✓ <sup>39</sup>	✓ <sup>40</sup>	✓	✓ <sup>41</sup>	✓	✓	✓	✓	✓ <sup>42</sup>	✓	✓	✓

For co-occurring conditions

For co-occurring conditions

For co-occurring conditions

This chart does not address individual physician practices because DOH doesn't license this service. DHS is working to enhance reimbursement for Medication Assisted Treatment care provision with the Office Based Addiction Treatment (OBAT) program.

## Footnotes

- Preventative, diagnostic, treatment, management, and reassessment services to individuals with acute or chronic illness.
- If not otherwise restricted, the facility must meet state and federal guidelines related to prescribing controlled substances, including those for Medication Assisted Treatment (MAT). Per the New Jersey Controlled Dangerous Substances Act, healthcare professionals must obtain a registration issued by the Division of Consumer Affairs in the Department of Law and Public Safety, professional licensing boards, and the State Board of Pharmacy. If the facility is not an opioid treatment program, a physician at the facility must also obtain a Drug Addiction Treatment Act of 2000 (DATA) waiver to prescribe or dispense medications for Medication Assisted Treatment. Licensed Opioid Treatment Programs must be SAMHSA-certified.
- If not otherwise restricted, the facility and relevant healthcare professionals must meet state and federal requirements related to the storing and dispensing of controlled substances, including those for Medication Assisted Treatment (MAT). Relevant regulating bodies include the Drug Enforcement Agency, the NJ Division of Consumer Affairs in the Department of Law and Public Safety, professional licensing boards, and the State Board of Pharmacy. If the facility is not an opioid treatment program, a physician at the facility must obtain a Drug Addiction Treatment Act of 2000 (DATA) waiver to prescribe or dispense medications for Medication Assisted Treatment. Licensed Opioid Treatment Programs must be SAMHSA-certified.
- If not otherwise restricted, the facility must meet state and federal requirements to store and dispense psychotropic medications.
- FQHCs may be licensed to provide drug abuse treatment pursuant to N.J.A.C. 8:43A-2.2, including Medication Assisted Treatment, or pursuant to a waiver of regulations (See Certificate of Waiver issued November 5, 2018). The facility must submit notice to DOH of intent to participate in the Office Based Addictions Treatment (OBAT) program. The facility must adhere to N.J.A.C. 8:43A-9.4 and 9.5 relating to the administration and storage of drugs.
- Id.*
- FQHCs may be licensed to provide drug abuse treatment pursuant to N.J.A.C. 8:43A-2.2, including Medication Assisted Treatment, or pursuant to a waiver of regulations (See Certificate of Waiver issued November 5, 2018). Preventative SUD treatment may also be delivered within the scope of the treatment professional's license but, unless licensed or approved to provide drug abuse treatment, patients must be referred for drug abuse counseling.
- Per N.J.A.C. 10:66-4.1, FQHC services include those provided by core service providers such as psychiatrists, psychologists, and licensed clinical social workers. The FQHC may bill NJ FamilyCare only for core services provided by core service providers. Other providers, such as alcohol and drug counselors, professional counselors, and marriage and family therapists, may provide non-core services but they must be added into a core provider encounter and may not be independently billed. (See Outpatient Facility Behavioral Health Integration Billing Frequently Asked Questions (FAQs) revised January 10, 2018 available at [https://www.state.nj.us/humanservices/dmahs/info/Behavioral\\_Health\\_Outpatient\\_Facility\\_Billing\\_FAQs\\_&\\_FQHC\\_Behavioral\\_Health\\_Allowable\\_Billing\\_Codes.pdf](https://www.state.nj.us/humanservices/dmahs/info/Behavioral_Health_Outpatient_Facility_Billing_FAQs_&_FQHC_Behavioral_Health_Allowable_Billing_Codes.pdf).)
- Per N.J.A.C. 10:66-4.1, FQHC services include those provided by core service providers such as psychiatrists, psychologists, and licensed clinical social workers. The FQHC may bill NJ FamilyCare only for core services provided by core service providers. (See Outpatient Facility Behavioral Health Integration Billing Frequently Asked Questions (FAQs) revised January 10, 2018 available at [https://www.state.nj.us/humanservices/dmahs/info/Behavioral\\_Health\\_Outpatient\\_Facility\\_Billing\\_FAQs\\_&\\_FQHC\\_Behavioral\\_Health\\_Allowable\\_Billing\\_Codes.pdf](https://www.state.nj.us/humanservices/dmahs/info/Behavioral_Health_Outpatient_Facility_Billing_FAQs_&_FQHC_Behavioral_Health_Allowable_Billing_Codes.pdf).)
- Id.*
- Mental health treatment may be provided within the scope of professional license however, per N.J.A.C. 8:43A-10.1, ACFs without a Mental Health Program license must refer patients for psychological counseling. An FQHC that does

- not have behavioral health services in its scope of work will need to file a change of scope application before it is permitted to use the BH codes identified in the FQHC Behavioral Health Allowable Medicaid Billing Codes. (See Outpatient Facility Behavioral Health Integration Billing Frequently Asked Questions (FAQs) revised January 10, 2018 available at [https://www.state.nj.us/humanservices/dmahs/info/Behavioral\\_Health\\_Outpatient\\_Facility\\_Billing\\_FAQs\\_&\\_FQHC\\_Behavioral\\_Health\\_Allowable\\_Billing\\_Codes.pdf](https://www.state.nj.us/humanservices/dmahs/info/Behavioral_Health_Outpatient_Facility_Billing_FAQs_&_FQHC_Behavioral_Health_Allowable_Billing_Codes.pdf).)
- Per N.J.A.C. 10:66-4.1, FQHC services include those provided by core service providers such as licensed clinical social workers. The FQHC may bill NJ FamilyCare only for core services provided by core service providers. Other providers, such as alcohol and drug counselors, professional counselors, and marriage and family therapists, may provide non-core services but they must be added into a core provider encounter and may not be independently billed. (See Outpatient Facility Behavioral Health Integration Billing Frequently Asked Questions (FAQs) revised January 10, 2018 available at [https://www.state.nj.us/humanservices/dmahs/info/Behavioral\\_Health\\_Outpatient\\_Facility\\_Billing\\_FAQs\\_&\\_FQHC\\_Behavioral\\_Health\\_Allowable\\_Billing\\_Codes.pdf](https://www.state.nj.us/humanservices/dmahs/info/Behavioral_Health_Outpatient_Facility_Billing_FAQs_&_FQHC_Behavioral_Health_Allowable_Billing_Codes.pdf).)
- FQHCs can hire and bill for services provided by a psychiatrist if behavioral health services are included in the scope of services. An FQHC that does not have behavioral health services in its scope of work will need to file a change of scope application before it is permitted to use the BH codes identified in the FQHC Behavioral Health Allowable Medicaid Billing Codes (See Outpatient Facility Behavioral Health Integration Billing Frequently Asked Questions (FAQs) revised January 10, 2018 available at [https://www.state.nj.us/humanservices/dmahs/info/Behavioral\\_Health\\_Outpatient\\_Facility\\_Billing\\_FAQs\\_&\\_FQHC\\_Behavioral\\_Health\\_Allowable\\_Billing\\_Codes.pdf](https://www.state.nj.us/humanservices/dmahs/info/Behavioral_Health_Outpatient_Facility_Billing_FAQs_&_FQHC_Behavioral_Health_Allowable_Billing_Codes.pdf).)
- See Outpatient Facility Behavioral Health Integration Billing Frequently Asked Questions (FAQs) revised January 10, 2018 available at [https://www.state.nj.us/humanservices/dmahs/info/Behavioral\\_Health\\_Outpatient\\_Facility\\_Billing\\_FAQs\\_&\\_FQHC\\_Behavioral\\_Health\\_Allowable\\_Billing\\_Codes.pdf](https://www.state.nj.us/humanservices/dmahs/info/Behavioral_Health_Outpatient_Facility_Billing_FAQs_&_FQHC_Behavioral_Health_Allowable_Billing_Codes.pdf).
- N.J.A.C. 8:43A.
- N.J.A.C. 8:43A.
- ACFs may be licensed to provide drug abuse treatment pursuant to N.J.A.C. 8:43A-2.2, including Medication Assisted Treatment, or pursuant to a waiver of regulations (See Certificate of Waiver issued November 5, 2018). Preventative SUD treatment may also be delivered within the scope of the treatment professional's license but, unless licensed or approved to provide drug abuse treatment, patients must be referred for drug abuse counseling.
- Id.*
- Id.*
- Id.*
- Id.*
- Id.*
- Mental health treatment may be provided within the scope of professional license however, per N.J.A.C. 8:43A-10.1, ACFs without a Mental Health Program license must refer patients who need psychological counseling to appropriate providers.
- ACFs may provide social work services but, without a separate Mental Health Program license, must refer patients for psychological counseling to appropriate providers (See N.J.A.C. 8:43A-10.1).
- Healthcare professionals may provide services within the scope of their professional license. However, without a separate Mental Health Program license, ACFs must refer patients for psychological counseling to appropriate providers (See N.J.A.C. 8:43A-10.1).
- Id.*

- Certified Community Behavioral Health Clinics (CCBHCs) provide core mental health, substance use, and primary care services and may hold licenses as Ambulatory Care Facilities (N.J.A.C. 8:43A), Substance Use Disorder Facilities (N.J.A.C. 10:161B), and Mental Health Programs (N.J.A.C. 10:190).
- CCBHCs provide outpatient primary care screening and monitoring and may be licensed to additionally provide primary care services pursuant to N.J.A.C. 8:43A.
- N.J.A.C. 10:37; 10:190.
- A separate license pursuant to N.J.A.C. 8:43A is needed to provide primary care services. The facility may apply to DOH for an Ambulatory Care Facility license and may seek a waiver from DOH to share clinical space for both service types (See Waiver to Permit Sharing of Clinical Space issued October 19, 2015).
- Per N.J.A.C. 10:37E, Mental Health Programs may provide medication monitoring of psychotropic medications only. MHPs, particularly those that don't provide medication monitoring, do not meet ASAM standards for providing Medication Assisted Treatment without a separate SUD license or other departmental approval. The facility may apply for a separate license per N.J.A.C. 10:161B to provide additional SUD services such as MAT or may apply for a waiver of MHP licensing regulations pursuant to N.J.A.C. 10:190-1.9 et seq. For information on obtaining a waiver please contact the Certificate of Need & Licensing Behavioral Health office at 609-292-6587.
- Id.*
- Per N.J.A.C. 10:37E-1.2, MHPs may provide SUD treatment to clients with co-occurring mental illness and substance use disorder. The facility may apply for a separate license to provide additional SUD services.
- Per N.J.A.C. 10:37E-2.3, outpatient service facilities provide medication monitoring which is defined in 10:37E-1.2 to include the evaluation, prescribing or administering, and monitoring of a client's use of psychotropic medications. See also N.J.A.C. 10:37-6.54 regarding psychotropic medications.
- Per N.J.A.C. 10:37E-2.3, outpatient service facilities provide medication monitoring which is defined in 10:37E-1.2 to include the evaluation, prescribing or administering, and monitoring of a client's use of psychotropic medications. See also N.J.A.C. 10:37-6.54 regarding psychotropic medications. MHPs that provide medication monitoring must meet state and federal requirements related to the storing and dispensing of medication.
- N.J.A.C. 10:190.
- N.J.A.C. 10:161A; 10:161B.
- A separate license is needed to provide primary care services per N.J.A.C. 161B-1.1 and 161B-2.1. The facility may apply to DOH for a license pursuant to N.J.A.C. 8:43A and may seek a waiver from DOH to share clinical space for both service types (See Waiver to Permit Sharing of Clinical Space issued October 19, 2015).
- Licensed Opioid Treatment Programs need to be SAMHSA-certified in addition to meeting relevant state and federal requirements for prescribing controlled substances.
- Licensed Opioid Treatment Programs need to be SAMHSA-certified in addition to meeting relevant state and federal requirements for storing and dispensing controlled substances. Other Substance Use Disorder facilities licensed or approved to provide Medication Assisted Treatment and store these medications must also be in compliance with SAMHSA and DEA.
- Per N.J.A.C. 10:161B, substance use disorder facilities provide SUD treatment services according to ASAM levels of care.
- Mental health treatment may be provided within the scope of professional practice to clients with co-occurring mental illness and substance use disorder. Per N.J.A.C. 10:161B-9.2 and 10:161B-10.4, the facility may directly provide mental health services to clients with co-occurring mental health disorder and substance use disorder.