

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



EDMUND G. BROWN JR. GOVERNOR

# DATE: May 16, 2016

MHSUDS INFORMATION NOTICE NO.: 16-021

- TO: COUNTY BEHAVIORAL HEALTH DIRECTORS COUNTY DRUG & ALCOHOL ADMINISTRATORS COUNTY BEHAVIORAL HEALTH DIRECTORS ASSOCIATION OF CALIFORNIA CALIFORNIA COUNCIL OF COMMUNITY BEHAVIORAL HEALTH AGENCIES COALITION OF ALCOHOL AND DRUG ASSOCIATIONS CALIFORNIA ASSOCIATION OF ALCOHOL & DRUG PROGRAM EXECUTIVES, INC.
- SUBJECT: DRUG MEDI-CAL (DMC) REIMBURSEMENT RATES FOR FISCAL YEAR (FY) 2016-17

## **PURPOSE**

This Information Notice transmits the FY 2016-17 reimbursement rates for DMC services, effective July 1, 2016 through June 30, 2017.

## DISCUSSION

These rates, effective July 1, 2016, were developed in accordance with Welfare and Institutions Code Sections 14021.51, 14021.6 and 14021.9. For FY 2016-17, the cumulative growth in the Implicit Price Deflator used to develop the rates was 13.0 percent, as reported by the Department of Finance. These rates reflect the Department of Health Care Services' (DHCS) analysis of costs for DMC services.

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.

For billing DMC services for service dates on or after July 1, 2016, please refer to the following tables when populating the procedure and modifiers on the 837P electronic claim file of DMC claims submitted for adjudication.

Service		Billing Codes			
	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	-	-	

# Non-Perinatal Service Groups, Types and Billing Codes

### 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 MHSUDS INFORMATION NOTICE NO.: 16-021 May 16, 2016 Page 3

# **HISTORY**

Section 51516.1, Title 22, California Code of Regulations

### **QUESTIONS/MAINTENANCE**

Questions regarding the DMC rates may be directed to Elsa Murphy, at (916) 445-6930 or <u>Elsa.Murphy@dhcs.ca.gov</u>.

# <u>EXHIBIT</u>

Exhibit: Drug Medi-Cal Rates for Fiscal Year 2016-17

Sincerely,

Original signed by

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