

**ALL FREESTANDING OASAS CERTIFIED PART 822-4 AND PART 822-5 OPIOID PROGRAM**

1. Utilization of APG rate codes and reimbursement methodology scheduled to begin with service dates Sunday, January 1, 2012 for Outpatient Clinic and Rehabilitation Programs and Monday, January 2, 2012 for Opioid Programs.
2. The process for the central reprocessing of interim period and subsequent application of APG payment.

**ITEM ONE: Use of APG Rate Codes for Billing and Application of APG Reimbursement to Chemical Dependence Services and Medical Visit Services delivered in Freestanding OASAS certified programs**

With the expectation that the Federal Medicaid State Plan Amendment will be approved in the relatively near future, effective January 1, 2012 for Clinics and Outpatient Rehabilitation and January 2, 2012 for Opioid Programs, New York State is implementing APG rate code usage and reimbursement in all freestanding outpatient behavioral health program settings.

This applies to Freestanding OASAS certified: Outpatient Clinic; Outpatient Rehabilitation; and Opioid (OTP) Programs. Attachment A illustrates by program type and setting: 1) the exact implementation dates; the applicable APG phase payment schedule; and, 2) the retroactive dates and APG phase payments associated with claim reconciliations for dates of service that were previously billed in the interim billing period.

The pre-APG rate codes will be zeroed out effective January 1, 2012 for Clinics and Outpatient Rehabilitation Programs and January 2, 2012 for Opioid Programs. For dates of service after these dates, programs must use the correct four digit APG rate code for their peer group when submitting Medicaid claims and may not use the pre-APG threshold visit or OTP weekly visit rate codes.

Additionally, effective January 1, 2012 for Clinics and Outpatient Rehabilitation and January 2, 2012 for Opioid programs, all freestanding programs may begin to utilize the APG Medical Services rate codes to bill for physical health services provided in OASAS certified outpatient settings. Programs are limited to providing no more than 5% of total program visits (Medicaid and non-Medicaid) as physical health services. For complete detail on physical health services within OASAS certified outpatient programs, please see the OASAS Ambulatory Patient Groups Policy and Medicaid Billing Guidance Manual available on-line through the OASAS APG web pages.

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**ITEM TWO: Reprocessing Previously Submitted Interim Period Claims from Threshold Rate Codes; and, Reimbursement Amounts to APG Rate Codes and Reimbursement Amounts Adding APG Rate Codes onto Provider Medicaid Files:**

Shortly after April 1, 2012, the interim period claims already in the billing system for the dates of service, between the initial start date of APGs (see table below) and the January, 2012 start dates for use of the APG rate codes, will be reprocessed by the Department of Health (DOH).

Program	OASAS Certification	OASAS APG Implementation Date
Freestanding	822-4 Outpatient Clinic	July 1, 2011
Freestanding	822-4.10 Outpatient Rehabilitation	July 1, 2011
Freestanding	822-5 Opioid	July 4, 2011

This reprocessing will convert the reimbursement amount from the prior threshold amount to the APG reimbursement amount. The reimbursement amount will be derived from the claim's line level CPT / HCPCS coding detail.

NYS DOH will process these retroactive adjustments centrally. For claims that have already been submitted for dates of service before January 1, 2012 for Clinics and Outpatient Rehabilitation and January 2, 2012 for Opioid Programs providers are **not** required to go into these claims and switch them over to the APG rate codes. NOTE: Once the reprocessing has been completed by DOH, programs will be responsible for their own reprocessing of claims that were denied upon initial submission or during the DOH reprocessing. These resubmitted claims would use the APG rate codes in the claim header.

Programs are reminded to ensure that claims for dates of service between the 7/1/11-12/31/11 Clinic and Outpatient Rehabilitation and 7/4/11-1/1/12 Opioid are accurately coded at the line level to ensure the adjustment/re-adjudication renders a correct reimbursement amount for the delivered services. Even for claims that did successfully reprocess under the DOH reprocessing, program may still need to make line level coding adjustments in order to receive accurate payment.

**Revenue Adjustments in the event the APG Reimbursement is less than the Threshold Reimbursement**

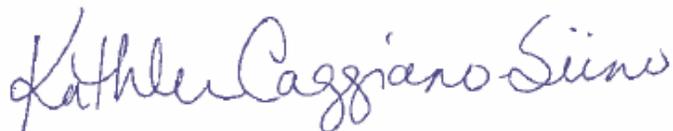
In the event that re-adjudication yields APG revenue that is less than was disbursed through threshold reimbursement, the adverse impact of the revenue "take backs" will be somewhat mitigated because the take backs will be spread over a period of approximately 20 reprocessing cycles rather than in a single cycle. The DOH will reprocess two cycles per week starting sometime in April 2012, and the reprocess will be ordered by date of service, with the oldest claims reprocessed first.

**APG Clinical and Billing Guidance / Questions:**

For comprehensive APG Clinical and Billing Guidance within the OASAS system, please go to: <http://www.oasas.ny.gov/admin/hcf/APG/Index.cfm#CLINICALANDBILLINGMANUAL>.

Questions regarding this transmittal may be emailed directly to: [APG@oasas.ny.gov](mailto:APG@oasas.ny.gov)

Sincerely,



Kathleen Caggiano-Siino  
Executive Deputy Commissioner  
NYS Office of Alcoholism and Substance Abuse Services (OASAS)

**ATTACHMENT A**  
**OASAS APG EFFECTIVE DATES FOR:**  
**USE OF APG RATE CODES AND REIMBURSEMENT**

**FREESTANDING APG RATE CODES; EFFECTIVE DATES; AND, PHASE PAYMENT SCHEDULE**

<b>OASAS Setting / Program</b>	<b>APG Rate Code Use Begin Date for APG Rate Code Billing</b>	<b>APG Rate Code</b>	<b>APG Phase % payments and associated dates</b>	<b>Retroactive APG Reimbursement</b>  Service dates that will be reprocessed by DOH from old threshold to APG and associated Phase Payment
Freestanding 822-4 Outpatient Clinic	1/1/12	1540 visit code	1/1/12-6/30/12 – Phase One  75% Threshold 25% APG	7/1/11-12/31/11  Phase One 75% Threshold 25% APG
Freestanding 822-4.10 Outpatient Rehab	1/1/12	1573 visit code	1/1/12-6/30/12 – Phase One  75% Threshold 25% APG	7/1/11-12/31/11  Phase One 75% Threshold 25% APG
Freestanding 822-5 Outpatient Opioid	1/2/12	1543 episode code	1/2/12-6/30/12 – Phase One  75% Threshold Weekly 25% APG	7/5/11-1/1/12  Phase One 75% Threshold 25% APG
<b>Medical Services</b>				
Freestanding 822-4 Outpatient Clinic	1/1/12	1468 visit code	1/1/12-Forward – Final 100% APG Payment	N/A
Freestanding 822-4.10 Outpatient Rehab	1/1/12	1570 visit code	1/1/12-Forward – Final 100% APG	N/A
Freestanding 822-5 Outpatient Opioid	1/2/12	1471 visit code	1/2/12-Forward – Final 100% APG	N/A