



## **Routine and Non-Routine Medical Services in Inpatient and Residential SUD Programs**

Please email questions to: [PICM@OASAS.ny.gov](mailto:PICM@OASAS.ny.gov)

### **Part 816 Chemical Dependence Medically Supervised Inpatient Withdrawal Programs (MSIW):**

**Question:** What routine medical services should be provided by OASAS certified Part 816 Chemical Dependence Medically Supervised Inpatient Withdrawal Programs (MSIW)?

**Answer:** The Chemical Dependence Crisis Service Title 14 NYCRR Part 816 regulations require certified MSIW programs to include a full complement of medical staff as necessary to meet the general severity of the condition of the population served. Non-emergent and/or routine medical services as defined below must be provided to patients enrolled in the MSIW as part of maintaining the general health and welfare of the patient population.

#### **Routine medical services include:**

- Routine physical examinations(e.g., baseline examinations, medical history reviews, electrocardiograms (EKGs)).
- Routine GYN examinations.
- Routine laboratory tests of blood and other body fluids done at the time of admission (e.g., complete blood count (CBC), electrolytes, renal and liver profiles, tuberculosis detection, syphilis tests, pregnancy tests, urine analysis).
- Hepatitis Profiles.
- Drug testing.
- In-house pharmaceutical services (e.g., over the counter items such as ibuprofen, aspirin, antacids, cold medicines).
- Withdrawal monitoring and management.

**Examples of medical services outside of the scope of the MSIW rate/ fee and therefore separately billable to Medicaid outside of, and in addition to, the MSIW rate/fee include:**

- Prescription medicines including, but not limited to, high cost prescription medications e.g.: Clonidine pills and patches; Methadone; Buprenorphine; sedatives such as Librium, Valium, Klonopin.
- Nicotine replacement therapy (NRT) Pharmaceuticals.
- Dialysis (and related clinical and laboratory services).
- STD detection and treatment (with the exception of the initial syphilis test, which is considered to be part of routine medical services).
- Emergency medical care that does not result in an appropriate discharge from the MSIW program.
- Specialty medical care - such as podiatry or eye refraction for glasses; and,
- Lab tests associated with emergent or specialty care.

**Note:** Any medical examination or service provided by the MSIW shall be provided only by an individual appropriately licensed to perform such examination or service.

**Rate / Reimbursement:**

OASAS can only respond to per diem rate inquiries for those OASAS certified community -based programs that are not hospital based.

Rates for OASAS certified hospital - based programs are set by the New York State Department of Health and costs are captured differently. Inquiries on hospital -based rate construction must be directed to the New York State Department of Health

**Part 818 Chemical Dependence Inpatient Rehabilitation (IPR) programs:**

**Question:** What routine medical services should be provided by OASAS certified Part 818 Chemical Dependence Inpatient Rehabilitation (IPR) programs?

**Answer:** The Inpatient Rehabilitation Title 14 NYCRR Part 818 regulations require certified IPR programs to include a full complement of medical staff as necessary to meet the general severity of the condition of the population served. Non-emergent and/or routine medical services as defined below must be provided to patients enrolled in the IPR as part of maintaining the general health and welfare of the patient population.

**Routine medical services include:**

- Routine physical examinations (e.g., baseline examinations, medical history reviews, electrocardiograms (EKGs) if the examination is assessing the patient's ability to participate in physical activities).
- Routine GYN examinations.

- Routine laboratory tests of blood and other body fluids done at the time of admission (e.g., complete blood count (CBC), electrolytes, renal and liver profiles, tuberculosis detection, syphilis tests, pregnancy tests, urine analysis);
- Hepatitis Profiles.
- Drug testing.
- In-house pharmaceutical services (e.g., over the counter items such as ibuprofen, aspirin, antacids, cold medicines). Prescription drugs associated with routine and/or non-emergent care (such as antibiotics and inhalers) may be prescribed by the IPR.
- Medication monitoring and management; and,
- Other ancillary medical services routinely provided to the IPR.

**Note:** Any medical examination or service provided by the IPR shall be provided only by an individual appropriately licensed to perform such examination or service.

**Examples of medical services outside of the scope of the IPR rate/ fee and therefore separately billable to Medicaid outside of, and in addition to, the IPR rate/fee include:**

- Prescription medicines.
- STD detection and treatment (with the exception of the initial syphilis test, which is considered to be part of routine medical services).
- Nicotine Replacement Therapy Pharmaceuticals.
- Dialysis (and related clinical and laboratory services).
- Dental services.
- Emergency medical care that does not result in an appropriate discharge from the IPR program.
- Specialty medical care - such as podiatry or eye refraction for glasses; and,
- Lab tests associated with emergent or specialty care.

**Note:** Any medical examination or service provided by the IPR shall be provided only by an individual appropriately licensed to perform such examination or service.

**Rate / Reimbursement :**

OASAS can only respond to per diem rate inquiries for those OASAS certified community -based programs that are not hospital based.

Rates for OASAS certified hospital - based programs are set by the New York State Department of Health and costs are captured differently. Inquiries on hospital -based rate construction must be directed to the New York State Department of Health

## **Part 820 Residential Services - Stabilization and Rehabilitation Element(s):**

**Question:** What routine medical/mental health services should be provided by OASAS Part 820 Residential Service Programs designated to provide the Stabilization and/or Rehabilitation Element(s) of care?

**Answer:** Title 14 NYCRR OASAS Part 820 Residential Service Programs designated to provide the Stabilization and / or Rehabilitation element(s) are expected to provide the following medical services. These services may not be billed separately from the Part 820 treatment service per diem by either the Part 820 program or another service provider.

- All - group; individual; and routine care.
- Mental Health assessment and routine care, including treatment for co-occurring addiction/MH disorders.
- Evaluation to determine benefit / need for medication assisted treatment.
- Routine psychiatric services and management, including medication management and monitoring.
- Routine Physical examinations including Health history evaluation / assessment / review (e.g., baseline examinations, medical history reviews); and,
- Medical treatment of mild to moderate withdrawal symptoms, urges and cravings including the medical treatment of physical and mental health conditions to stabilize these conditions.

**Examples of medical and clinical treatment services not included in the Part 820 Per Diem and *may be billed separately by the Part 820 program* to the service recipient's Medicaid Managed care plan or other insurance coverage entity.**

See also sample case examples:

- Buprenorphine Induction
- Acute Physical / Mental Health when provided beyond the description above.

**Sample / Example Case One:** Individual presents with Substance use as primary and LOCADTR qualifying condition for admission with a serious co-occurring eating disorder with significant medical complications that require specific initial / ongoing medical workups/ review to determine severity of initial and ongoing medical complications. This may also apply to mental health services with a trained clinician and potentially nursing or dietary services.

**Sample / Example Case Two:** Individual is treated for serious wound by PCP with special nursing and medical follow-up to be provided by residential staff to prevent return visits to PCP.

**Examples of medical and clinical treatment services outside the scope of the Part 820 Stabilization / Rehabilitation element are identified below.**

***These may be billed separately by either the Part 820 program OR another service provider*** to the service recipient's Medicaid Managed care or other insurance coverage entity. Service delivery and claiming are subject to the certification / claiming laws; rules; regulations and contractual agreements associated with the specific service and delivering provider or program.

- Specialty care when clinically indicated (radiology; oncology; etc.)
- Buprenorphine Induction
- Prescriptions including, but not limited to those associated with medication for supported recovery for opioid and/ or alcohol dependence.
- Laboratory / toxicology services when delivered off site by a licensed / certified laboratory.
- All acute / emergency specialty / medical care when clinically required.
- Dental services

#### **Part 817 Residential Rehabilitation Services for Youth Programs:**

**Question:** What routine medical services are included in the Medicaid fee for Residential Rehabilitation Services for Youth (RRSY)?

**Answer:** The RRSY Medicaid fee includes reimbursement for the routine and non-emergent medical management of a beneficiary while residing in a RRSY facility. The operating fee also includes reimbursement for psychiatric or psychological services that may be required by RRSY patients. Because the RRSY operating fee is inclusive of reimbursement for routine and non-emergent medical, psychiatric, and psychological services, these services may not be separately billed to Medicaid while the beneficiary is residing in the RRSY facility. Non-emergent and/or routine medical services must be made available to adolescents enrolled in the RRSY program as part of maintaining the general health and welfare of the patient population.

#### **Routine medical services include:**

- Routine physical examinations (e.g., baseline examinations, medical history reviews, electrocardiograms (EKGs) if the examination is assessing the patient's ability to participate in physical activities).
- Routine laboratory tests of blood and other body fluids done at the time of admission (e.g., complete blood count (CBC), electrolytes, renal and liver profiles, tuberculosis detection, syphilis tests, pregnancy tests, urine analysis).
- Drug testing.
- In-house pharmaceutical services (e.g., over the counter items such as ibuprofen, aspirin, antacids, cold medicines). Prescription drugs associated with routine and/or non-emergent care (such as antibiotics and inhalers) may be

prescribed by the RRSY provider and then billed to Medicaid by the dispensing pharmacy, but the clinical staff time (office visit) at the RRSY provider is not billable to Medicaid.

- Medication monitoring and management; and,
- Other ancillary medical services routinely provided to the RRSY patient population.
- **Vaccines:**

Patients must be pre-screened for required vaccines prior to admission. If vaccines are necessary for admission, they should be obtained by the patient from a DOH clinic, the County Department of Health, or some other source prior to admission. The RRSY program should not be billing MA for routine childhood vaccines.

**Examples of medical services outside of the scope of the RRSY fee and therefore separately billable to Medicaid outside of, and in addition to, the RRSY fee include:**

- Prescription medicines.
- STD detection and treatment (with the exception of the initial syphilis test, which is considered to be part of routine medical services).
- Nicotine replacement therapy (NRT) Pharmaceuticals.
- Dialysis (and related clinical and laboratory services).
- Dental services.
- Hepatitis profiles.
- OB / GYN services.
- Emergency medical care that does not result in an appropriate discharge from the RRSY program.
- Specialty medical care - such as podiatry or eye refraction for glasses; and,
- Lab tests associated with emergent or specialty care.

**Note:** Any medical examination or service provided by the RRSY shall be provided only by an individual appropriately licensed to perform such examination or service.