



MEMORANDUM

TO: Mainstream Medicaid Managed Care Plans, Health and Recovery Plans (HARPs), HIV Special Needs Plans (HIV SNPs), and Medicaid Advantage Plus (MAP) Plans

From: New York State Office Addiction Services and Supports (OASAS)

DATE: May 28, 2024

SUBJECT: Opioid Treatment Program (OTP) and Outpatient Clinic Integration, Introduction of OTP Bundles to Ambulatory Patient Groups (APG) and Other APG Payment Changes

Dear Health Plan Administrators,

OASAS is moving towards integrating care within the OASAS outpatient clinic regulatory structure. This will improve services for people seeking care and improve access to the three FDA approved Opioid Use Disorder (OUD) medications. This change and three other related initiatives are outlined below.

Table with 5 columns: Initiative, Effective Date, Contracting Changes, Claiming Changes. It lists four initiatives: 1. Comprehensive Outpatient Program (COP) designation, 2. Adding OTP bundle to APGs, 3. Group Psychotherapy Procedure Weight Increase, 4. Increase to Intensive Outpatient and Day Rehabilitation APG Weights.

1. Comprehensive Outpatient Treatment

Initiative Description:

- Effective August 1, 2024, Comprehensive Outpatient Treatment Programs (COP) that have co-located Part 822 Outpatient Services and Part 822 Opioid Treatment Programs (OTP) services will be merged under one operating certificate to make all services available to enrolled patients. **NOTE: This change will initially affect only selected providers and will expand over the next several months to include all providers. Providers that become COP providers will be given a new COP rate code that will identify them as such. The rates for the new COP rate code will be the same as the existing rates, but the programs will have significantly more flexibility as to where and what services they provide.**
- This will allow individuals enrolled in one program to access services (including the three FDA approved medications for OUD, groups, counseling, and ancillary services) available in the other program without being dually enrolled. The purpose for this change is to remove duplication of services that two separate clinics provide, minimize the need for clients to navigate two separate programs, provide reimbursement parity, and allow the program to share staff and consolidate services (e.g., group counseling).

2. Adding OTP Bundle rate to APG:

Initiative Description:

- Effective July 1, 2024, OTP bundle services will be bought under the APG methodology. In order to receive the bundle payment under APGs, OTP programs should bill CPT codes G2067, G2068, G2078 or G2079 when they provide the bundle qualifying services. They may also bill substance use disorder (SUD) services that fall outside of the OTP bundle on the same APG claim. Claiming will continue to be weekly. Providers will still have the option of using the bundle rate codes (rather than billing the bundles in APGs) for a short period of time, after which the bundle rate codes (7969 – 7976) will be zeroed out for all providers. That transition period is being provided to allow providers to adjust their billing systems to accommodate billing the bundle codes in APGs.
- This change will also allow providers who offer services in the community, including mobile medication units, to bill the bundles under APG rate code 1088 and receive the enhanced reimbursement associated with rate code 1088.

3. APG Weight Changes for Psychotherapy (Group and Family Group)

Initiative Description:

- Effective July 1, 2024, the Psychotherapy (Group and Family Group) APG weight will be adjusted in accordance with the OASAS and Office of Mental Health (OMH) jointly [issued guidance](#) that was sent via email on April 18, 2024 to Mainstream Medicaid Managed Care Plans, Health and Recovery Plans, HIV Special Needs Plans, and Medicaid Advantage Plus Plans.

501 7th Avenue | New York, New York 10018-5903 | oasas.ny.gov | 646-728-4760

1450 Western Avenue | Albany, New York 12203-3526 | oasas.ny.gov | 518-473-3460

- Please note that use of Group Psychotherapy procedure codes 90853 and 90849 requires that the professional staff who delivers the service can provide psychotherapy within their scope of practice in NYS. OASAS has made a determination that this includes Masters-Level health care clinicians (i.e., Credentialed Alcoholism and Substance Abuse Counselor (CASAC) with a master's degree in a health-related field), as well as Licensed Clinical Social Worker (LCSW), Licensed Mental Health Counselor (LMHC), Psychologists, Nurse Practitioner (NP), and Physicians, licensed in New York State through the state education department.
- Detailed information can be found in the linked memo : OMH and OASAS [APG Weight Adjustments for Psychotherapy \(Group and Family Group\) and Peer Support Group Services](#)

4. APG Weights Changes for Intensive Outpatient Services and Outpatient Day Rehab

Initiative Description:

- Effective July 1, 2024, the APG weights for Intensive Outpatient Services and Outpatient Day Rehab will be increased as follows:

APG	APG Description	Old Weight	7/1/2024 Weight
327	INTENSIVE OUTPATIENT PSYCHIATRIC TREATMENT	0.6093	0.7659
328	DAY REHABILITATION, HALF DAY	0.4937	0.6206
329	DAY REHABILITATION, FULL DAY	0.6583	0.8275

- This change will provide reimbursement parity with typical clinic services.

Please submit any questions to PICM@oasas.ny.gov