



STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

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GOVERNOR

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DIRECTOR

April 20, 2020

To: Executive Directors, Pre-paid Inpatient Health Plans (PIHPs) and
Community Mental Health Services Providers (CMHSPs)

From: Jeffery L. Wieferich, MA, LLP *JW*
Bureau of Community Based Services
Behavioral Health and Developmental Disabilities Administration

RE: MDHHS Guidance Regarding CMS Policy Re: Dually Eligible Beneficiaries
Receiving Medicare Opioid Treatment Services Effective 1/1/20

BACKGROUND:

As of January 1, 2020, the Centers for Medicare and Medicaid (CMS) required all Opioid Treatment Program (OTP) Providers that serve dual eligible beneficiaries (Medicare and Medicaid) to adopt a bundled payment for services with Medicare as the primary payer.

The estimated number of beneficiaries that could be impacted by this policy is approximately 2,200 with the PIHPs reporting that approximately 90% of those enrolled are in Medicare Advantage Plans.

G2067-G2080 and G2086-G2088 have been created to represent these services. These codes include a weekly bundle of services with some including the drug and others not including the drug.

All OTP Providers must be enrolled with original Medicare and/or a Medicare Advantage Plan in order to submit these codes.

The Michigan Department of Health and Human Services (MDHHS) Fee for Services (FFS) Policy: MDHHS Policy has added G2067-G2080 as PAC 085, which allows the claim to enter CHAMPS and to follow Medicare payment guidelines. Medicaid will cover co-payment and deductible as appropriate. For G2086-G2088 MDHHS is allowing these codes for Physicians and Nurse Practitioners in office-based settings.

An Encounter Data Integrity Team (EDIT) subgroup was created representing PIHPs, CMHSPs and MDHHS to obtain information to address these concerns and inform this guidance. The subgroup developed the recommendations below, which were reviewed and approved by EDIT.

MI Health Link is requiring the use of the new codes as of January 1, 2020.

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RECOMMENDATIONS:

As of May 1, 2020, PIHPs (and their empaneled OTP Providers) will no longer be allowed to submit claims using the existing service codes for dual enrolled (Medicare/Medicaid) beneficiaries.

As of May 1, 2020, all Providers serving dual enrolled beneficiaries must be Medicare enrolled and empaneled with applicable Medicare Advantage Plans. If they are not able to become enrolled with Medicare plans, they must create a payment arrangement with the plan (per CMS memo January 2020).

BHDDA will add G2067, G2074, G2076, G2077, G2078, G2079, and G2080 to the existing code chart to allow for usage of these codes for all beneficiaries. (Note: G2074 does not include the drug).

Additionally, because buprenorphine and naltrexone may be administered at the OTP and paid for with Medicaid, G2068, G2073 will be added as well. Current drug claims will continue as usual. All existing codes relating to OTP (H0020) treatment will remain.

PIHPs will perform payment reconciliation for services submitted January 1-April 30 for those beneficiaries who are dual enrolled. Provider's must submit claims to Medicare for those services and begin billing Medicare as primary for any subsequent services that are covered by Medicare.

The May 1, 2020 deadline applies to Medicare/Medicaid dual eligibles. MDHHS would like to gradually transition services for beneficiaries with primary Medicaid or block grant funding to the G codes, ideally as of the start of fiscal year 2021.

SUPPLEMENTAL MATERIALS:

CMS Informational Bulletin December 17, 2019 and January 2, 2020.

MLS Matters document

FAQ document

CMS Guidance:

<https://www.cms.gov/files/document/otp-crossover-tip-sheet>

<https://www.cms.gov/files/document/otp-billing-and-payment-fact-sheet.pdf>

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Opioid-Treatment-Program/billing-payment>

FOR QUESTIONS:

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