

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202212 FEBRUARY 15, 2022

Changes made to MRO services in response to HEA 1468

In accordance with House Enrolled Act (HEA) 1468, the Office of Medicaid Policy and Planning (OMPP) submitted a state plan amendment pertaining to Medicaid Rehabilitation Option (MRO) services to the Centers for Medicare & Medicaid Services (CMS). The CMS approved these changes on Dec. 27, 2021, and the changes are effective as of Jan. 1, 2022.

HEA 1468 made the following changes to the MRO services:

- MRO services "provided by a behavioral health professional working in a community mental health center for any Medicaid eligible recipient who is undertaking initial assessment, intake, or counseling in a community mental health center" are eligible for reimbursement before the development of a plan of treatment under the MRO program. Additionally, "A community mental health center shall commence a plan of treatment within two (2) weeks for a Medicaid recipient who receives services under this section" (*Indiana Code IC 12-15-1.3-20*).

Note: Per this language, an MRO-eligible member is able to receive services under the MRO program prior to the development of a plan of treatment; however, an intake assessment is still required to verify member eligibility for MRO services.

- MRO services are to be an "eligible service concurrent with reimbursement under the residential treatment program, level of care 3.1 for the clinically managed low-intensity residential services facilities" so long as the "Medicaid rehabilitation option services are not currently reimbursed as an eligible service under the American Society of Addiction Medicine (ASAM) 3.1 level care Section 1115 Medicaid demonstration waiver bundled rate" (*IC 12-15-1.3-22*).

In accordance with the changes above, the OMPP has made the following policy changes to the MRO:

- Services included within an individualized integrated care plan are to commence within two weeks of an individual's intake assessment.
- Skills training and development services (procedure code H2014) are eligible for reimbursement when an individual is residing in a 3.1 ASAM substance use disorder (SUD) residential treatment facility and the individual is eligible to receive MRO services. Therefore, procedure codes H2014 and H2034 are eligible to be billed on the same date of service for the same member.

Note: Only providers enrolled as community mental health centers (CMHCs) are eligible to bill for H2014 under the MRO program, and only providers enrolled as 3.1 ASAM SUD residential facilities within the Indiana Health Coverage Programs (IHCP) are eligible to bill for H2034. Only the appropriate provider can bill for these services.

Additionally, to maintain compliance with Senate Enrolled Act (SEA) 82 as published in *IHCP Bulletins BT202137* and *BT201943*, the following have been added as eligible providers able to certify a behavioral health diagnosis and to approve an individualized integrated care plan for MRO services:

- Advanced practice registered nurse (APRN)
- Licensed clinical social worker (LCSW)
- Licensed marriage and family therapist (LMFT)
- Licensed mental health counselor (LMHC)
- Licensed clinical addiction counselor (LCAC)



No other MRO service criteria are impacted by these changes.

IHCP reimbursement for MRO services is only available for members who meet specific diagnosis and level of need (LON) criteria under the approved Division of Mental Health and Addiction (DMHA) assessment tool. Members who have a qualifying MRO diagnosis are assigned a service package based on their individual LON. For more details, see the [Medicaid Rehabilitation Option \(MRO\)](#) page at in.gov/medicaid/providers.

As a reminder, prior authorization (PA) is required for all inpatient/residential SUD stays. PA requests for fee-for-service (FFS) members should be directed to Gainwell Technologies. PA requests for managed care members should be directed to the managed care entity (MCE) with which the member is enrolled.

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