ODM and OhioMHAS Updates to Aid in Behavioral Health Services Access

Behavioral health rule changes implemented with Executive Order 2020-23D

In accordance with Governor DeWine's Executive Order 2020-23D, the Ohio Department of Medicaid (ODM) and the Ohio Department of Mental Health and Addiction Services (OhioMHAS) are implementing emergency changes to Ohio Administrative Code (OAC) that will:

- Temporarily relax prior authorization requirements for Medicaid fee-for-service behavioral health services.
- Incorporate previously expanded telehealth provisions specific to Medicaid behavioral health services rules into Chapters 5160-8 and 5160-27 of the OAC.
- Modify requirements related to annual fidelity reviews for Assertive Community Treatment (ACT) and Intensive Home-based Treatment (IHBT) to accommodate remote review activity.

The full text of these Ohio Administrative Code changes can be found at the embedded links below.

Fee-for-Service Prior Authorization

For the services in Table 1-5 of the BH Provider Manual (found at https://bh.medicaid.ohio.gov/manuals), administrative authorizations will be offered in lieu of typical prior authorizations that require submission and review of clinical documentation. The following behavioral health rules have been amended on an emergency basis to allow for the temporary administrative authorization option **through June 30**:

- 5160-27-02: Coverage and limitations of behavioral health services.
- 5160-27-04: Mental health assertive community treatment service.
- 5160-27-05: Mental health intensive home-based treatment service.
- 5160-27-09: Substance use disorder treatment services.

Providers shall request an administrative authorization using the MITS portal. An administrative authorization gives the provider an authorization number for claim submission but does not require submission of clinical documentation or a medical necessity review. Medical documentation can be submitted, but it will not be reviewed by ODM or its prior authorization vendors.

Providers should enter administrative authorization requests in the same manner and include the same information they provide for prior authorization, except that in lieu of attaching clinical documentation, the provider must attach a Word document stating only "COVID-19." Additionally, enter a comment in the provider notes field indicating "COVID-19." No clinical practitioner signatures are necessary for an administrative authorization request.

The administrative authorization number must be submitted on claims for services that required prior authorization before the COVID-19 pandemic; otherwise, claims may be denied. The administrative authorization number should be entered in the same field on the claim that the prior authorization number would be submitted.

All services authorized during the COVID-19 emergency remain subject to Medicaid requirements for medical necessity and medical record documentation.

Effective July 1, 2020, prior authorization requests will be reviewed for medical necessity, so clinical documentation will be required for any request submitted on or after July 1, 2020.

Telehealth-related Emergency Rule Changes

In March 2020, ODM adopted OAC rule 5160-1-21 on an emergency basis to expand and enhance telehealth options for Ohioans and their providers, including for behavioral health services. Through Executive Order 2020-23D, ODM is incorporating telehealth provisions previously implemented in OAC rule 5160-1-21 to specific Medicaid behavioral health services rules in Chapters 5160-8 and 5160-27 of the OAC as follows:

- 5160-8-05: Removes face-to-face contact requirements for the professional responsible for services rendered by supervised trainees.
- 5160-27-02: Allows coverage for asynchronous telehealth activities.
- 5160-27-04: Removes face-to-face requirements and billing restrictions for ACT services rendered via telephone or video conference.
- 5160-27-05: Removes prohibition on billing for IHBT services rendered via telephone or video conference.
- 5160-27-08: Removes face-to-face requirements for Therapeutic Behavioral Service (TBS) and Psychosocial Rehabilitation (PSR).
- 5160-27-12: Removes face-to-face requirements and eliminates requirement for practitioner rendering crisis services to have previously met and rendered services to recipient.

Annual Fidelity Reviews for ACT and IHBT

ODM has modified requirements related to annual fidelity to accommodate remote reviews in the following rules:

- 5160-27-04: Removes on-site fidelity reviews and minimum fidelity score requirements.
- 5160-27-05: Removes fidelity score requirements.

OhioMHAS Emergency Rule Updates

OhioMHAS updated two of its rules as part of Executive Order 2020-23D:

- 5122-29-10 Crisis Intervention Service: Removes the requirement that crisis intervention must be face-to-face.
- 5122-29-29 Assertive Community Treatment (ACT):
  - Should a client unexpectedly discontinue ACT services, the attempted two contacts per month by an ACT team does not need to be face-to-face.
  - Minimum fidelity scores for initial and subsequent certifications have been removed.

Additional Telehealth Procedure Codes

SUD withdrawal management services can be rendered via telehealth

The following procedure codes have been updated in MITS to allow services to be rendered via telehealth effective March 9, 2020. Claims submitted to MITS *after* May 12, 2020, should include the GT modifier to reflect telehealth delivery:

- H0010 – Clinically managed withdrawal management, ASAM LOC 3.2-WM.
- H0011 – Medically monitored inpatient withdrawal management, ASAM LOC 3.7-WM.
- H0012 – Withdrawal management per diem, ASAM LOC 2-WM.
- H0014 – Withdrawal management hourly, ASAM LOC 2-WM.

MITS and the managed care plan claims payment systems have been updated to reflect these substance use disorder withdrawal management services being rendered via telehealth. Claims should include the GT modifier to reflect delivery via telehealth.

COVID Resources

The ODM website has a [COVID-19 webpage](#) with health-related information.

OhioMHAS COVID resources are on the [OhioMHAS website](#).