

Policy Clarifications – Medicaid – All – PMA PMA-17419-304

Submitted: 1/2015 **Agency:** CAOs

Subject: MA and Drug & Alcohol Facility Codes

Question:

If an individual is receiving **inpatient** Drug and Alcohol treatment, will entering “Yes” for “Facility” on the Individual Non-Financial Questions screen ensure that a recipient needing Drug and Alcohol treatment will receive the correct services?

Response By: Division of Health Services

Date: 1/23/15

No. When an individual is receiving **inpatient** Drug and Alcohol (D&A) treatment services, the facility code of 01 (D&A Residential Placement) must also be entered on the Facility Placement screen to ensure appropriate category, health care benefit package (HCBP), and Manage Care Organization (MCO) physical and behavioral health begin dates.

Reminder: The application for D&A services should be coming from a D&A provider and should not be provided by the individual seeking treatment.

In order to ensure proper placement, the following procedure must be completed:

1. On the Individual Non-Financial Questions screen, the “Facility?” question must be answered “Yes”
2. On the Individual Facility Placement Information screen the following information must be selected for every individual on the case record receiving treatment:
 - a. The individual’s name
 - b. The facility type code 01
 - c. The county in which the facility is located
 - d. The date of admission, which is often the date of first treatment or admission
3. On the Eligibility Result Summary screen, click on “Run Eligibility”. Check the following:
 - a. The individual receiving treatment is eligible in a non-PCO category effective the date of admission
 - b. The individual receiving treatment is enrolled the “Healthy Plus” HCBP assigned

4. On the Budget Authorization screen for the individual's MA budget, check that the decision code for the "Healthy Plus" HCBP is "006 – Valid Facility Code" and the start date for the benefit package is the date of admission

Note: If the individual receiving treatment is under age 21, the facility code must still be entered, but the HCBP will be "Children's" and the decision code will be "001 – Individual is under age 21". In addition, if the individual receiving treatment is aged 65 or older, the facility code must still be entered and the HCBP will be "Healthy Plus", but the decision code will be "002 – Individual is at least 65".

5. On the Managed Care Plan Information screen, ensure that the Behavioral Health MCO is beginning the date of processing and the individual is being enrolled in a Physical Health MCO by the 1st or 15th of the following month.
6. Complete processing and submit the case.