

DEPARTMENT OF HEALTH CARE FINANCE

NOTICE OF EMERGENCY AND PROPOSED RULEMAKING

The Director of the Department of Health Care Finance, pursuant to the authority set forth in An Act to enable the District of Columbia to receive federal financial assistance under Title XIX of the Social Security Act for a medical assistance program, and for other purposes, approved December 27, 1967 (81 Stat. 744; D.C. Official Code § 1-307.02 (2012 Repl. & 2013 Supp.) and Section 6(6) of the Department of Health Care Finance Establishment Act of 2007, effective February 27, 2008 (D.C. Law 17-109; D.C. Official Code § 7-771.05(6) (2012 Repl.)), hereby gives notice of the adoption, on an emergency basis, of an amendment to Section 5213 of Chapter 52 (Medicaid Reimbursement for Mental Health Rehabilitative Services) of Title 29 (Public Welfare) of the District of Columbia Municipal Regulations (DCMR).

The purposes of this proposed amendment are to update the reimbursement rates to Department of Behavioral Health-certified mental health providers for Mental Health Rehabilitation Services (MHRS). A comprehensive rate analysis had not been conducted the rates since 2001, when the Department of Mental Health – the predecessor to the Department of Behavioral Health – was first created, although some intermittent rate adjustments had been made. Thus the Department of Behavioral Health, with the assistance of providers and stakeholders, conducted a comprehensive rate review and developed a rate-setting methodology to ensure that reimbursement rates reflected the cost-basis of the services. As a result of this review, the majority of reimbursement rates for most services increased; the overall reimbursement rate will see an increase of almost fifteen percent (15%). Additionally, as a result of the rate review, the differentiation between children and adult services for Medication Treatment and for Counseling was eliminated, as the review showed no basis for such rate differential. Finally, the name for one service, Medication Somatic, was changed to Medication Training and Support to reflect the correct terminology used by the Center for Medicaid and Medicare Services.

Per 1 DCMR § 311.4(e), emergency rulemakings are issued when necessary for the immediate preservation of the public peace, health, safety, welfare, or morals. Issuance of these rules on an emergency basis is necessary for the stability of the provider community and therefore the continued provision of necessary mental health services. Any delay in promulgating the new rates will lead to possible reduction in services, to the detriment of the population served by the public mental health system. Thus emergency action is necessary for the immediate preservation of the health, welfare, and safety of children, youth, and adults with mental illness in need of mental health services.

The emergency rulemaking was adopted on December 30, 2013 and became effective on that date. The emergency rules will remain in effect for one hundred twenty (120) days or until April 28, 2014, unless superseded by publication of another rulemaking notice in the *DC Register*, whichever comes first.

The Director also gives notice of intent to take final rulemaking action to adopt the proposed rules in not less than thirty (30) days after the date of publication of this notice in the *D.C. Register*.

Chapter 52, MEDICAID REIMBURSEMENT FOR MENTAL HEALTH REHABILITATIVE SERVICES, of Title 29, PUBLIC WELFARE, of the DCMR is amended as follows:

Section 5213, Reimbursement, Subsection 5213.1 is deleted in its entirety and is amended to read as follows:

5213.1 Medicaid reimbursement for MHRS shall be determined as follows:

SERVICE	CODE	BILLABLE UNIT OF SERVICE	RATE
Diagnostic/ Assessment	T1023HE	An assessment, at least 3 hours in duration	\$256.02
	H0002	An assessment, 40 – 50 minutes in duration to determine eligibility for admission to a mental health treatment program	\$85.34
Medication Training & Support	H0034	15 minutes	\$44.65 – Individual
	H0034HQ	15 minutes	\$13.52 – Group
Counseling	H0004	15 minutes	\$26.42 – Individual
	H0004HQ	15 minutes	\$8.00 – Group
	H0004HR	15 minutes	\$26.42 – Family with Consumer On-Site
	H0004HS	15 minutes	\$26.42 – Family without Consumer On-Site
	H0004HETN	15 minutes	\$27.45 – Individual Off-Site
Community Support	H0036	15 minutes	\$21.97 – Individual
	H0036HQ	15 minutes	\$6.65 – Group

SERVICE	CODE	BILLABLE UNIT OF SERVICE	RATE
	H0036UK	15 minutes	\$21.97 – Collateral
	H0036AM	15 minutes	\$21.97 – Physician Team Member
	H0038	15 minutes	\$21.97 – Self-Help Peer Support
	H0038HQ	15 minutes	\$6.65 –Self-Help Peer Support Group
	H0036HR	15 minutes	\$21.97 – Family with Consumer
	H0036HS	15 minutes	\$21.97 – Family without Consumer
	H0036U1	15 minutes	\$21.97– Community Residence Facility
	H2023	15 minutes	\$18.61– Supported Employment (Therapeutic)
Crisis/ Emergency	H2011	15 minutes	\$36.93
Day Services	H0025	One day, at least 3 hours in duration	\$123.05
Intensive Day Treatment	H2012	One day, at least 5 hours in duration	\$164.61
Community-Based Intervention (Level I – Multi-Systemic Therapy)	H2033	15 minutes	\$57.42
Community-Based Intervention (Level II and Level III)	H2022	15 minutes	\$35.74
Community-Based Intervention	H2033HU	15 minutes	\$57.42

SERVICE	CODE	BILLABLE UNIT OF SERVICE	RATE
(Level IV – Functional Family Therapy) Assertive Community Treatment	H0039 H0039HQ	15 minutes 15 minutes	\$38.04 – Individual \$11.51 – Group

Comments on this proposed rulemaking shall be submitted in writing to Linda Elam, PhD., MPH, Deputy Director, Department of Health Care Finance, 441 4th Street, NW, 9th Floor South, Washington, DC 20002, via email to DHCFPublicComments@dc.gov, online at www.dcregs.dc.gov, or by telephone to (202) 442-9115, within thirty (30) days after the date of publication of this notice in the *D.C. Register*. Additional copies of this proposed rule may be obtained from the above address.