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PROVIDER LETTER

TO: KENTUCKY CERTIFIED BEHAVIORAL HEALTH CLINICS (CCBHC) - PT 16 / PL #A-4

FROM: Leslie Hoffmann, Deputy Commissioner

DATE: July 3, 2023

RE: CCBHC and Primary Care Services

On June 15, 2023, DMS met with the 4 CCBHC clinics to discuss guidance received from CMS regarding the provision of primary care services within the CCBHC demonstration. CMS guidance to Kentucky is as follows:

CMS GUIDANCE
<p><i>The Protecting Access to Medicare Act of 2014 (PAMA), the authorizing statute for the CCBHC demonstration, requires the use of a prospective payment system (PPS) for the provision of CCBHC services. The guidance CMS issued indicated that the clinic-specific PPS rates are to be calculated using by dividing the total annual allowable CCBHC costs by the total annual number of CCBHC daily (PPS-1) or monthly (PPS-2) visits. As such, only the costs for the 9 demonstration services can be included in the calculation of the CCBHC PPS rates. To the extent that primary care services offered by the CMHCs in Kentucky do not fall under one of the following 9 required demonstration services, they cannot be included in the CCBHC PPS rates.</i></p> <p><i>Required Demonstration Services</i></p> <ol style="list-style-type: none"> 1. <i>Crisis Services</i> 2. <i>Treatment Planning</i> 3. <i>Screening, Assessment, Diagnosis & Risk Assessment</i> 4. <i>Outpatient Mental Health & Substance Use Services</i> 5. <i>Targeted Case Management</i> 6. <i>Outpatient Primary Care Screening and Monitoring</i> 7. <i>Community-Based Mental Health Care for Veterans</i> 8. <i>Peer, Family Support & Counselor Services</i> 9. <i>Psychiatric Rehabilitation Services</i>

As discussed in the 06/15/2023 meeting, to meet CMS guidance and direction, remediation of this issue will consist of the following:

- i. Commencing 09/01/2023, Provider Type 16 (CCBHC) will no longer bill for any primary care service not included on the CCBHC approved billing code list. Primary care services not included

on the CCBHC approved billing code list may be billed through Provider Type 30 from 09/01/2023 forward. Until 09/01/2023, primary care services may continue to be billed through PT 16.

- ii. After 09/01/2023, specific, primary care screening and monitoring codes identified for use within the CCBHC demonstration may continue to be billed under PT16 throughout the demonstration.

The rebasing of the PPS rate for CCBHC demonstration year 2, will exclude primary care services and will be retroactive back to 01/01/2023. Updated PPS rate information will be provided to each CCBHC in the near future.

DMS understands the frustration and concern that comes with any system/process change, and we appreciate your understanding and attention to this issue. It is our goal to minimize the impact of this change to your clinic processes as much as possible.

Please reach out to DMS with any questions and/or concerns.

Sincerely,



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Department for Medicaid Services
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cc: Dana McKenna, CCBHC Project Manager
Ann Hollen, Senior Behavioral Health Policy Advisor
Stephanie Craycraft, Deputy Commissioner, DBHDID
Vestena Robbins, Senior Policy Advisor, DBHDID

LH/dm/kl