



CABINET FOR HEALTH
AND FAMILY SERVICES

**Behavioral Health Technical Advisory Committee
Multi-State Rate Study –
May 1, 2024**

TAC Questions/Next Steps Update: July 11, 2024

INCLUDED IN THIS PRESENTATION

HIGH LEVEL OVERVIEW OF MULTI-STATE RATE STUDY

DIFFICULTIES

METHODS

COMPARISON TABLES ACROSS ALL STATES

IDENTIFIED SERVICES FOR FURTHER STUDY

NON-MATCHED SERVICES TABLES FOR EACH COMPARISON STATE

INDIVIDUAL STATE TABLES OF MATCHED SERVICES

DIFFICULTIES IN A STATE-TO-STATE RATE COMPARISON

THE FOLLOWING FACTORS PLAY A ROLE IN THE DEVELOPMENT OF SERVICES AND THE RATES FOR THOSE SERVICES IN EACH STATE. THESE FACTORS MAKE IT DIFFICULT TO COMPARE RATES FROM ONE STATE TO THE NEXT.

- EACH STATE HAS THE FLEXIBILITY TO DECIDE WHICH SERVICES TO INCLUDE IN THEIR STATE PLAN
- EACH STATE HAS THE ABILITY TO DEFINE THE SERVICES COVERED
 - PRACTITIONER LEVEL, UNITS OF SERVICE, SERVICE LIMITATIONS, PRIOR AUTHORIZATIONS, ETC.
- STATE POPULATION TO MEDICAID ENROLLEE RATIO
- STATE EXPANSION STATUS
- THE BEHAVIORAL HEALTH NEEDS OF BENEFICIARIES DIFFER IN EACH STATE — THIS WAS NOT INCLUDED IN THE ASSESSMENT OR USED IN THE COMPARISON, IT IS JUST A FACTOR THAT PLAYS A ROLE IN HOW EACH STATE DETERMINES THE SERVICES THEY WILL PROVIDE THEIR MEMBERS.
- COST OF LIVING IN EACH STATE — (ERROR, SHOULD HAVE BEEN REMOVED)

METHODS:

SHOPPING LIST APPROACH – SPECIFIC ITEM OF A SPECIFIC DEFINITION IN EACH INSTANCE OF COMPARISON

- SERVICES LISTED ON THE KENTUCKY 2024 BH FEE SCHEDULE WERE RANKED USING ENCOUNTER DATA FROM SFY2023
 - SERVICES RANKING 1 – 30 ARE INCLUDED IN THIS STUDY
- CMS REGION 4 STATES (ALABAMA, FLORIDA, GEORGIA, MISSISSIPPI, NORTH CAROLINA, SOUTH CAROLINA)
 - EXCLUDING TENNESSEE (MCO ONLY)
 - ADDING OHIO, INDIANA, VIRGINIA AND WEST VIRGINIA (SHOULD HAVE INCLUDED MISSOURI AND ILLINOIS)
- RESEARCH CONDUCTED TO FIND FEE SCHEDULES, REGULATIONS, BILLING MANUALS, PROVIDER NOTICES, ETC. – THE MOST RECENT RELEVANT FEE SCHEDULE FOUND FOR EACH STATE WAS USED.
- OTHER CONSIDERATIONS WHEN EXAMINING RATES:
 - STATE POPULATIONS (2020 CENSUS DATA)
 - STATE MEDICAID ENROLLMENT (1/2024 CMS DATA)
 - STATE EXPANSION STATUS (KAISER FAMILY FOUNDATION)

METHODS CONT.

- SERVICES MATCHED BY:
 - SERVICE DEFINITION
 - RESEARCH WAS CONDUCTED TO DETERMINE A MATCH TO THE KY DEFINITION OF THE SERVICE AS CLOSELY AS POSSIBLE
 - UNIT OF SERVICE
 - ANY UNITS/RATES CHANGED TO MATCH KY NOTED
 - PRACTITIONER LEVEL
 - LICENSED PRACTITIONER LEVEL WAS MATCHED UNLESS NOT FOUND, THEN ALTERNATE PRACTITIONER LEVEL WAS USED FOR COMPARISON, IF POSSIBLE. THE RATE FOR ONLY ONE LEVEL OF PRACTITIONER WAS COMPARED FOR EACH SERVICE.
- SERVICES NOT MATCHED:
 - DEFINITION NOT A MATCH
 - UNITS, PRACTITIONER LEVEL, SETTING (RESIDENTIAL, OUTPATIENT, ETC.), BUNDLED/PACKAGED REQUIREMENTS, POPULATION SERVED
 - NOT A MATCH, COULD NOT CONVERT TO KY
 - SERVICE NOT FOUND ON FEE SCHEDULE, OR
 - BILLING MANUALS, PROVIDER NOTICES

COMPARISON OVERVIEW

- KENTUCKY INCREASED RATES FOR 20 OF THE 30 SERVICES INCLUDED IN THIS ANALYSIS IN 2024 – RATES WERE INCREASED FROM 2023
- 9 OF THE 30 SERVICES ARE SUPPORTIVE SERVICES (NON-CLINICAL)
 - ALL 9 OF THE SUPPORTIVE SERVICES HAD RATE INCREASES IN 2024
- KY DMS ALLOWS MORE FLEXIBILITY IN THE PROVISION OF: - RATES FROM STATES WITH MORE RESTRICTIVE DEFINITION OF THE PROVISION OF THE FOLLOWING SERVICES WERE LISTED AS NON-MATCHED. ADDITIONAL RESEARCH WOULD NEED TO BE UNDERTAKEN TO REPORT ON SPECIFIC DIFFERENCES.
 - PARTIAL HOSPITALIZATION
 - INTENSIVE OUTPATIENT PROGRAM
 - THERAPEUTIC BEHAVIORAL HEALTH SERVICES
- KY DMS LISTED A LARGER NUMBER OF BEHAVIORAL HEALTH SERVICES ON THEIR BH FEE SCHEDULE THAN FOUND IN THE COMPARISON STATES
- KY DMS REIMBURSED FOR SERVICES SEPARATELY THAT OTHER STATES INCLUDED IN PACKAGED/BUNDLED SERVICES
 - EXAMPLE: NO OTHER STATE IN THE COMPARISON REIMBURSED FOR PSYCHOEDUCATION (H2027) AS A SEPARATE SERVICE

STATE	EXPANSION STATUS (KAISER FAMILY FOUNDATION)	POPULATION (2020 CENSUS BUREAU)	MEDICAID ENROLLEES (CMS 1/1/24 PRELIMINARY)	POPULATION TO ENROLLEE RATIO	RATES COMPARISON
KENTUCKY	Y- 1/1/2014	4,505,836	1,493,648	33%	N/A
ALABAMA	NO	5,024,079	1,064,281	21%	MAJORITY OF RATES COMPARABLE
FLORIDA	NO	21,538,187	4,081,001	19%	MAJORITY OF RATES COMPARABLE
GEORGIA	NO	10,711,908	2,081,407	19%	MAJORITY OF RATES HIGHER
INDIANA	Y-2/1/2015	6,785,528	1,828,349	27%	MAJORITY OF RATES HIGHER
MISSISSIPPI	NO	2,961,279	690,851	23%	MAJORITY OF RATES HIGHER
NORTH CAROLINA	Y- 12/1/2023	10,439,388	2,573,742	25%	MAJORITY OF RATES HIGHER
OHIO	Y- 1/1/2014	11,799,448	3,036,482	26%	MAJORITY OF RATES HIGHER
SOUTH CAROLINA	NO	5,118,425	1,173,572	23%	MAJORITY OF RATES HIGHER
VIRGINIA	Y-1/1/2019	8,631,393	1,958,397	23%	MAJORITY OF RATES HIGHER
WEST VIRGINIA	Y-1/1/2014	1,793,716	528,483	29%	MAJORITY OF RATES COMPARABLE

SUMMARIZED COMPARISON ACROSS STATES

303 TOTAL SERVICES WERE COMPARED ACROSS THE 10 COMPARISON STATES.¹

	ALABAMA	FLORIDA	GEORGIA	INDIANA	MISSISSIPPI	NORTH CAROLINA	OHIO	SOUTH CAROLINA	VIRGINIA	WEST VIRGINIA	ALL STATES TOTAL
TOTAL MATCHES MADE TO KY SERVICES	20 ¹ /67%	18/60%	17/57%	18/60%	22/73%	19/63%	17/57%	16/53%	22/73%	13/43%	182/60%
MATCH CLASSIFICATION:											
COMPARABLE TO KY	10/50%	9/50%	4/24%	2/11%	1/5%	1/5%	1/6%	4/25%	6/27%	11/85%	49/27%
LOWER THAN KY	7/35%	6/33%	4/24%	1/6%	7/32%	6/32%	2/12%	5/31%	1/5%	1/8%	40/22%
HIGHER THAN KY	3/15%	3/17%	9/53%	15/83%	14/64%	12/63%	14/82%	7/44%	15/68%	1/8%	93/51%

¹ALABAMA REIMBURSES FOR THREE SERVICES, PEER SUPPORT SERVICES (H0038), PEER SUPPORT SERVICES- GROUP (H0038-HQ) AND PARTIAL HOSPITALIZATION (H0035) DEPENDING UPON POPULATION SERVED. ALL RATES FOUND FOR THESE THREE SERVICES IN ALABAMA WERE INCLUDED IN THE COMPARISON (TOTAL 33), WHICH RAISED THE TOTAL OF SERVICES COMPARED ACROSS ALL STATES TO 303.

RATE COMPARISON LEGEND

THE FOLLOWING MARGIN WAS USED FOR COMPARISON PURPOSES.

KY RATE VALUE CRITERIA	RATE MARGIN
Less than \$100	+/- 10% RATE
\$100-\$199	+/- 7.5% RATE
\$200 or more	+/- 5% RATE

WHEN THE COMPARISON STATE RATE IS:

- RATE IS CONSIDERED **COMPARABLE** (■) INSIDE OF RATE MARGIN
- LOWER THAN KY, RATE IS CONSIDERED **LOWER** (▼) WHEN OUTSIDE OF RATE MARGIN
- HIGHER THAN KY, RATE IS CONSIDERED **HIGHER** (▲) WHEN OUTSIDE OF RATE MARGIN
- NOT MATCHED¹ (●)
- **X** ALTERNATE PROVIDER LEVEL USED IN COMPARISON

¹SEE INDIVIDUAL STATE SUMMARIES OF NON-MATCHED SERVICES

***COMPLETE BH MULTI-STATE RATE STUDY ADDENDUM SENT SEPARATELY (INCLUDES RATE TABLES FOR EACH COMPARISON STATE)**

KY Rank	Service Definition	C/S	Code	Provider	KY	AL	FL	GA	IN	MS	NC	OH	SC	VA	WV
1	Peer Support Services	S	H0038	Non-Bachelors	\$9.35	■ SUD	●	▲	▲	■	▲	▲	▲	▲	▲
						▲ SMI									
2	Peer Support Services - Group	S	H0038	Non-Bachelors	\$3.87	▲ SUD	●	▲	●	●	▼	▼	▼	▲	●
						▼ SMI									
3	COMPREHENSIVE COMMUNITY SUPPORT SERVICES	S	H2015	Lic Masters w Supervisor	\$18.69	●	●	■	●	X	●	▲	●	●	●
				Psychiatrist; MD/DO	\$23.38	X	X	X	X	▼	X	X	X	X	X
4	ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL	S (RBT)	97153	Non-Bachelors	\$11.77	●	■	▼	▲	▲	▲	●	●	▲	●
5	PSYCHOEDUCATIONAL SERVICE	S	H2027	Lic Masters w Supervisor	\$46.19	●	●	●	●	●	●	●	●	●	●
6	PSYCHOTHERAPY	C	90837	Lic Masters w Supervisor	\$87.58	■	X	■	X	X	▲	▲	▲	X	X
				Psychiatrist; MD/DO	\$109.47	X	■	X	▲	▲	X	X	X	▲	■
7	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT	C	99213	Psychiatrist; MD/DO	\$64.31	■	▼	▲	▲	▲	▲	▲	▼	■	■
8	THERAPEUTIC BEHAVIORAL HEALTH SERVICES	C	H2019	Lic Masters w Supervisor	\$13.58	■	▲	●	●	▲	●	▲	●	●	●
9	PSYCHOTHERAPY	C	90832	Lic Masters w Supervisor	\$45.16	X	X	X	X	X	▲	▲	■	X	X
				Psychiatrist; MD/DO	\$56.45	▼	■	▲	▲	▲	X	X	X	▲	■

WHEN THE COMPARISON STATE RATE IS:

- COMPARABLE (■)
- LOWER (▼)
- HIGHER (▲)
- NOT MATCHED (●)

KY Rank	Service Definition	C/S	Code	Provider	KY	AL	FL	GA	IN	MS	NC	OH	SC	VA	WV	
10	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT	C	99214	Psychiatrist; MD/DO	\$90.98	■	▼	▲	▲	▲	▲	▲	■	■	■	
11	ALCOHOL AND/OR DRUG SERVICES, INTENSIVE OUTPATIENT PROGRAM	C	H0015	Team	\$135.72	●	●	●	■	▼	●	▲	▼	●	●	
12	ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION	C	97155	Lic Masters w Supervisor	\$21.25	●	▼	X	X	X	X	●	●	▲	●	
				REQUIRED Assoc (w/ Supervision)	\$18.60	X	X	X	▲	X	X	X	X	X	X	
				Lic Clin Psychologist	\$22.58	X	X	X	X	X	▲	X	X	X	X	X
				Psychiatrist; MD/DO	\$26.57	X	X	▼	X	▼	X	X	X	X	X	X
13	GROUP PSYCHOTHERAPY	C	90853	Lic Masters w Supervisor	\$15.84	▲	X	X	▲	X	▲	▲	▲	X	X	
				Psychiatrist; MD/DO	\$19.80	X	■	▼	X	▲	X	X	X	▲	■	
14	PSYCHOTHERAPY	C	90834	Lic Masters w Supervisor	\$59.60	■	X	X	▲	X	▲	▲	▲	X	X	
				Psychiatrist; MD/DO	\$74.51	X	■	▲	X	▲	X	X	X	▲	■	
15	THERAPEUTIC BEHAVIORAL HEALTH SERVICES	C	H2020	Team	\$244.29	●	●	●	●	●	●	●	●	●	●	

WHEN THE COMPARISON STATE RATE IS:

- COMPARABLE (■)
- LOWER (▼)
- HIGHER (▲)
- NOT MATCHED (●)

KY Rank	Service Definition	C/S	Code	Provider	KY	AL	FL	GA	IN	MS	NC	OH	SC	VA	WV
16	PARTIAL HOSPITALIZATION	C	H0035	Team	\$203.03	■ SMI/SUD	●	●	▲	▼	▼	▲	●	▲	●
17	GROUP ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL	S (RBT)	97154	Non-Bachelors	\$11.77	▼	▼	▲	▼	▼	▼	●	●	▲	■
18	COLLATERAL THERAPY	C	90887	Psychiatrist; MD/DO	\$66.32	▼	■	●	●	●	●	●	■	●	■
19	MENTAL HEALTH SERVICE PLAN DEVELOPMENT BY NON-PHYSICIAN	C	H0032	Lic Masters w Supervisor	\$74.79	●	X	▼	●	▼	●	●	▼	●	X
				Lic Clin Psychologist	\$79.48	X	▲	X	X	X	X	X	X	X	X
20	PSYCHIATRIC DIAGNOSTIC EVALUATION	C	90791	Lic Masters w Supervisor	\$103.63	▼	●	X	▲	●	▲	▲	●	●	●
				Lic Clin Psychologist	\$110.10	X	X	■	X	X	X	X	X	X	X
20	PSYCHIATRIC DIAGNOSTIC EVALUATION	C	90791	Psychiatrist; MD/DO	\$129.53	●	■	●	●	▲	●	●	▼	▲	■
21	BRIEF EMOTIONAL/BEHAVIORAL ASSESSMENT	C	96127	Lic Masters w Supervisor	\$2.52	X	●	X	▲	X	X	●	X	X	X
				Psychiatrist; MD/DO	\$3.15	■	X	▲	X	▲	▲	X	▲	▲	■
22	BEHAVIORAL HEALTH DAY TREATMENT	C	H2012	Lic Masters w Supervisor	\$74.79	●	●	●	●	X	●	▼	●	■	●
				Psychiatrist; MD/DO	\$93.50	X	X	X	X	▼	X	X	X	X	X

WHEN THE COMPARISON STATE RATE IS:

- COMPARABLE (■)
- LOWER (▼)
- HIGHER (▲)
- NOT MATCHED (●)

KY Rank	Service Definition	C/S	Code	Provider	KY	AL	FL	GA	IN	MS	NC	OH	SC	VA	WV
23	TARGETED CASE MANAGEMENT - SUD	S	T2023		\$362.64	●	●	●	●	●	■	●	●	▼	●
24	TARGETED CASE MANAGEMENT - SED	S	T2023		\$362.64	●	●	●	●	●	●	●	●	■	●
25	PSYCHOTHERAPY	C	90833	Psychiatrist; MD/DO	\$51.49	▼	■	▲	▲	▲	▼	▲	▲	▲	■
26	ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES	C	T1007	Lic Masters w Supervisor	\$74.81	●	●	●	●	●	●	●	●	●	●
				Psychiatrist; MD/DO	\$93.51	X	■	X	X	X	X	X	X	X	X
27	MENTAL HEALTH ASSESSMENT BY NON-PHYSICIAN	C	H0031	Lic Masters w Supervisor	\$74.79	●	▲	■	▲	X	●	X	●	X	●
				Lic Clin Psychologist	\$79.48	X	X	X	X	▲	X	■	▲	■	X
28	PSYCHIATRIC SERVICES COMPLICATED BY COMMUNICATION FACTOR	C	90785	Lic Masters w Supervisor	\$8.66	▼	X	●	▲	X	▲	▲	X	X	●
				Psychiatrist; MD/DO	\$10.83	X	▼	X	X	▲	X	X	■	▲	X
29	TARGETED CASE MANAGEMENT - SMI	S	T2023		\$362.64	●	●	●	●	●	▼	●	●	■	●
30	BEHAVIOR IDENTIFICATION ASSESSMENT	C	97151	Lic Masters w Supervisor	\$21.25	X	X	●	X	X	X	●	●	▲	●
				Psychiatrist; MD/DO	\$26.57	■	▼	X	■	▲	▼	X	X	X	X

WHEN THE COMPARISON STATE RATE IS:

- COMPARABLE (■)
- LOWER (▼)
- HIGHER (▲)
- NOT MATCHED (●)

RECOMMENDATIONS

THE SERVICES BELOW HAVE THE LARGEST NUMBER OF “HIGHER” RATES WHEN COMPARED TO KENTUCKY. THESE SERVICES ARE SUGGESTED FOR FURTHER STUDY.

- OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT (99213)
- PEER SUPPORT SERVICES (H0038) (INDIVIDUAL)
- OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT (99214)
- PSYCHOTHERAPY (90833)
- GROUP PSYCHOTHERAPY (90853)
- BRIEF EMOTIONAL/BEHAVIORAL ASSESSMENT (96127)

NOTE: COMPLETE RATE ANALYSIS IS NEEDED PRIOR TO ANY RATE CHANGE CONSIDERATIONS

ALABAMA

NON-MATCHING SERVICES

NOT FOUND ON FEE SCHEDULES	SERVICE DEFINITION NOT A MATCH	NOT REIMBURSED AS A SEPARATE SERVICE
COMPREHENSIVE COMM. SUPP. SERVICES (H2015)	ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL (97153)	PSYCHOEDUCATIONAL SERVICE (H2027)
ALCOHOL AND/OR DRUG SERVICES, INTENSIVE OUTPATIENT PROGRAM (H0015)	ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION (97155)	
THERAPEUTIC BEHAVIORAL HEALTH SERVICES (H2020)	TARGETED CASE MANAGEMENT – SUD (T2023)	
MENTAL HEALTH SERVICE PLAN DEVELOPMENT BY NON-PHYSICIAN (H0032)	TARGETED CASE MANAGEMENT – SED (T2023)	
BEHAVIORAL HEALTH DAY TREATMENT (H2012)	TARGETED CASE MANAGEMENT – SMI (T2023)	
ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES (T1007)		
MENTAL HEALTH ASSESSMENT BY NON-PHYSICIAN (H0031)		

GEORGIA NON-MATCHING SERVICES

NOT FOUND ON FEE SCHEDULES	PACKAGED SERVICE THAT REQUIRED INDIVIDUAL SERVICES INCL. MIN/MAX UNITS	SERVICE DEFINITION NOT A MATCH	SERVICE DISCONTINUED	NOT REIMBURSED AS A SEPARATE SERVICE
COLLATERAL THERAPY (90887)	ALCOHOL AND/OR DRUG SERVICES, INTENSIVE OUTPATIENT PROGRAM (H0015)	TARGETED CASE MANAGEMENT – SUD (T2023)	BEHAVIORAL HEALTH DAY TREATMENT (H2012)	PSYCHOEDUCATIONAL SERVICE (H2027)
ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES (T1007)	THERAPEUTIC BEHAVIORAL HEALTH SERVICES (H2020)	TARGETED CASE MANAGEMENT – SED (T2023)		
BEHAVIOR IDENTIFICATION ASSESSMENT (97151)	PARTIAL HOSPITALIZATION (H0035)	TARGETED CASE MANAGEMENT – SMI (T2023)		
THERAPEUTIC BEHAVIORAL HEALTH SERVICES (H2019)				

NOTE: 90785; PSYCHIATRIC SERVICES COMPLICATED BY COMMUNICATION FACTOR IS NOT A DIRECT SERVICE IN GEORGIA. FUNCTIONS AS A MODIFIER TO PSYCHIATRIC TREATMENT, DIAGNOSTIC ASSESS., INDIVIDUAL THERAPY AND GROUP COUNSELING. **NO ADDITIONAL REIMBURSEMENT RATE WHEN USED.**

INDIANA

NON-MATCHING SERVICES

NOT FOUND ON FEE SCHEDULES	SERVICE DEFINITION NOT A MATCH	NOT REIMBURSED AS A SEPARATE SERVICE
PEER SUPPORT SERVICES – GROUP (H0038-HQ)	TARGETED CASE MANAGEMENT – SUD (T2023)	PSYCHOEDUCATIONAL SERVICE (H2027)
COMPREHENSIVE COMMUNITY SUPPORT SERVICES (H2015)	TARGETED CASE MANAGEMENT – SED (T2023)	
THERAPEUTIC BEHAVIORAL HEALTH SERVICES (H2019)	TARGETED CASE MANAGEMENT – SMI (T2023)	
COLLATERAL THERAPY (90887)		
MENTAL HEALTH SERVICE PLAN DEVELOPMENT BY NON-PHYSICIAN (H0032)		
BEHAVIORAL HEALTH DAY TREATMENT (H2012)		
ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES (T1007)		

OHIO

NON-MATCHING SERVICES

NOT FOUND ON FEE SCHEDULES	SERVICE DEFINITION NOT A MATCH	NOT REIMBURSED AS A SEPARATE SERVICE
ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL (97153)	TARGETED CASE MANAGEMENT – SUD (T2023)	PSYCHOEDUCATIONAL SERVICE (H2027)
ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION (97155)	TARGETED CASE MANAGEMENT – SED (T2023)	
GROUP ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL (97154)	TARGETED CASE MANAGEMENT – SMI (T2023)	
COLLATERAL THERAPY (90887)	THERAPEUTIC BEHAVIORAL HEALTH SERVICES (H2020)	
MENTAL HEALTH SERVICE PLAN DEVELOPMENT BY NON-PHYSICIAN (H0032)		
BRIEF EMOTIONAL/BEHAVIORAL ASSESSMENT (96127)		
ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES (T1007)		
BEHAVIOR IDENTIFICATION ASSESSMENT (97151)		

SOUTH CAROLINA NON-MATCHING SERVICES

NOT FOUND ON FEE SCHEDULES	SERVICE DEFINITION NOT A MATCH	NOT REIMBURSED AS A SEPARATE SERVICE
COMPREHENSIVE COMMUNITY SUPPORT SERVICES (H2015)	PARTIAL HOSPITALIZATION (H0035)	PSYCHOEDUCATIONAL SERVICE (H2027)
ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL (97153)	BEHAVIORAL HEALTH DAY TREATMENT (H2012)	
ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION (97155)	TARGETED CASE MANAGEMENT – SUD (T2023)	
THERAPEUTIC BEHAVIORAL HEALTH SERVICES (H2020)	TARGETED CASE MANAGEMENT – SED (T2023)	
GROUP ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL (97154)	TARGETED CASE MANAGEMENT – SMI (T2023)	
ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES (T1007)		
BEHAVIOR IDENTIFICATION ASSESSMENT (97151)		
THERAPEUTIC BEHAVIORAL HEALTH SERVICES (H2019)		

VIRGINIA NON-MATCHING SERVICES

NOT FOUND ON FEE SCHEDULES	SERVICE DEFINITION NOT A MATCH	NOT REIMBURSED AS A SEPARATE SERVICE
THERAPEUTIC BEHAVIORAL HEALTH SERVICES (H2019)	COMPREHENSIVE COMMUNITY SUPPORT SERVICES (H2015)	PSYCHOEDUCATIONAL SERVICE (H2027)
ALCOHOL AND/OR DRUG SERVICES, INTENSIVE OUTPATIENT PROGRAM (H0015)	ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES (T1007)	COLLATERAL THERAPY (90887)
	MENTAL HEALTH SERVICE PLAN DEVELOPMENT BY NON-PHYSICIAN (H0032)	

WEST VIRGINIA NON-MATCHING SERVICES

NOT FOUND ON FEE SCHEDULES	SERVICE DEFINITION NOT A MATCH	NOT REIMBURSED AS A SEPARATE OR COVERED SERVICE	NOT FFS ¹ MCO ONLY/ASO ONLY
PEER SUPPORT SERVICES – GROUP (H0038-HQ)	COMPREHENSIVE COMMUNITY SUPPORT SERVICES (H2015)	PSYCHOEDUCATIONAL SERVICE (H2027)	ADAPTIVE BEHAVIOR TREATMENT BY PROTOCOL (97155) (MCO)
	THERAPEUTIC BEHAVIORAL HEALTH SERVICES (H2019) (IMPLEMENTATION AND DEVELOPMENT SEPARATE RATES)		ADAPTIVE BEHAVIOR TREATMENT WITH PROTOCOL MODIFICATION (97153) (MCO)
	BEHAVIORAL HEALTH DAY TREATMENT (H2012)		BEHAVIOR IDENTIFICATION ASSESSMENT (97151) (MCO)
	TARGETED CASE MANAGEMENT – SUD (T2023)		ALCOHOL AND/OR DRUG SERVICES, INTENSIVE OUTPATIENT PROGRAM (H2015) (ASO)
	TARGETED CASE MANAGEMENT – SED (T2023)		PARTIAL HOSPITALIZATION (H0035) (ASO)
	TARGETED CASE MANAGEMENT – SMI (T2023)		ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES (T1007) (ASO)
			MENTAL HEALTH ASSESSMENT BY NON-PHYSICIAN (H0031) (ASO)

¹SERVICES NOT REIMBURSED ON FEE FOR SERVICE SCHEDULE; MANAGED CARE ORGANIZATION (MCO) OR ADMINISTRATIVE SERVICE ORGANIZATION (ASO).

QUESTIONS

Provider Level Clarifications

Column 1 Modifiers: Psychiatrist= AF; MD/DO= AM Provider type (PT=64)

Column 2 Modifiers: **APRN= SA (PT=78)** Lic Clin Psychologist= **AH (PT=89)** Physician Assistant= U1 (PT=95)

Yes, PHD level for Lic Clin Psychologist. Psych APRN is the same as APRN but with Psychiatric specialty.

Column 3 Modifiers: Lic Masters w Supervisor: LPP = U8 (PT=84) CPsy w/Auto Func= U8 (PT=84) LCSW= AJ (PT=82) LPCC = HO (PT=81) LMFT = HO (PT=83) LPAT = HO (PT=62) LBA = HO (PT=63) LCADC= HO (PT=67)

May provide clinical supervisions based on the individual board policies and regulations

Column 4 Modifiers: REQUIRED Assoc (w/ Supervision)= U4 LPA, Cpsy CSW, LPCA MFTA, LPATA LABA, LCADCA

Example: a CSW licensed clinician requires billing supervision to provide and seek reimbursement from Medicaid.

Column 5 Modifier: REQUIRED CADC= U6

Column 6 Modifiers: REQUIRED Other Non-Bachelors: PSS= U7; CSA=UC RBT= UC

Less education than a Bachelor's degree

Column 1 Rate Modifiers: AF; AM	Column 2 Rate Modifiers: SA; AH, U1	Column 3 Modifiers: U8; AJ; HO	Column 4 Modifiers: U4	Column 5 Modifier: U6	Column 6 Modifiers: U7; UC
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Children's/ABA Alliance Questions

- Rates specific to children's or diagnosis specific services were not included in comparison
- Any states paying an additional amount for children's services due to legislation or other specific focus reasons were not included in comparison
- Note: Please provide copies of specific fee schedules used to develop the Children's alliance spreadsheet highlighting services of interest. Highlight the specific service/rate you are listing on spreadsheet. Follow-up will be done once specific comparison materials have been shared with DMs.

Next Step Discussion: (Highlighted notes from meeting)

Impact Questions from the TAC:

- What needs to happen to KY rates so that all Medicaid beneficiaries in need of behavioral health services receive quality, timely, appropriate care?
- Are rates a barrier to achieving this access?
- Do rates support a diverse, competent workforce across all 120 counties?
- Do rates result in individuals with specific needs being served (e.g., severe mental illness, co-occurring developmental/intellectual disabilities with behavioral health needs, eating disorders, etc.?)
- Define Phase 2 study – TAC will provide guidance for the next phase of study, DMS/ODA study team will provide Project Design to TAC for further refinement before commencing study.
 - 6 proposed services or additional – TAC will send proposed list of additional services to look at in next phase along with the primary provider level for each service to focus on.
- Add MO and IL to next phase of study – add to next phase of study
- Add population specific research – look at age/diagnosis specific populations in next phase

THANK YOU

**QUESTIONS CAN BE EMAILED TO:
VSMITH@KY.GOV**



**CABINET FOR HEALTH
AND FAMILY SERVICES**