



Welcome to UnitedHealthcare Behavioral Health Provider Orientation

Medicaid, CHP, EPP, Wellness4Me

November 2022



Today's Agenda

- Overview
- Covered Benefits
- Care Management
- Member Identification and Eligibility
- Quality Improvement
- Utilization Management
- Provider Relations
- Credentialing
- Billing & Claims
- Pharmacy Resources
- Cultural Competence
- UHC Online Portals
- Training and Educational Resources
- Appendix

Overview

UnitedHealthcare and Optum Behavioral Health

Our mission

Helping people live healthier lives and helping make the health system work better for everyone

Meeting all your health needs, all in one place. We're evolving health care so everyone can have the opportunity to live their healthiest life. It's why we put your unique needs at the heart of everything we do, making it easy and affordable to manage health and well-being.

We are delivering the right care how and when it's needed, providing support to make smarter and healthier choices, and making prescription services easier, while helping you save money along the way. It's everything health care should be. Together, for better health.



Stock Image

ADVANCING OUR MISSION

By the Numbers



1.5M

In-network doctors and health care professionals



6,700

In-network hospitals



~1,600

employees



People First



Total Cost of Care



Best Networks



Provider Partnerships

Working with you to create a healthier world for all



Stock Image

Consumers

129+ million

empowered individuals including military, Veterans, Medicare and Medicaid beneficiaries



Providers

≈ 9 out of 10 U.S. hospitals



Government agencies

Partnering with federal, state and municipal agencies across 40 states and D.C.



Life sciences

107 organizations



Health plans

4 out of 5 organizations



Employers

≈ 9 out of 10 Fortune 100

Our values are our path

Integrity

Honor commitments.
Never compromise ethics.

Compassion

Walk in the shoes of the people we
serve and those with whom we work.

Relationships

Build trust through
collaboration.

Innovation

Invent the future and learn
from the past.

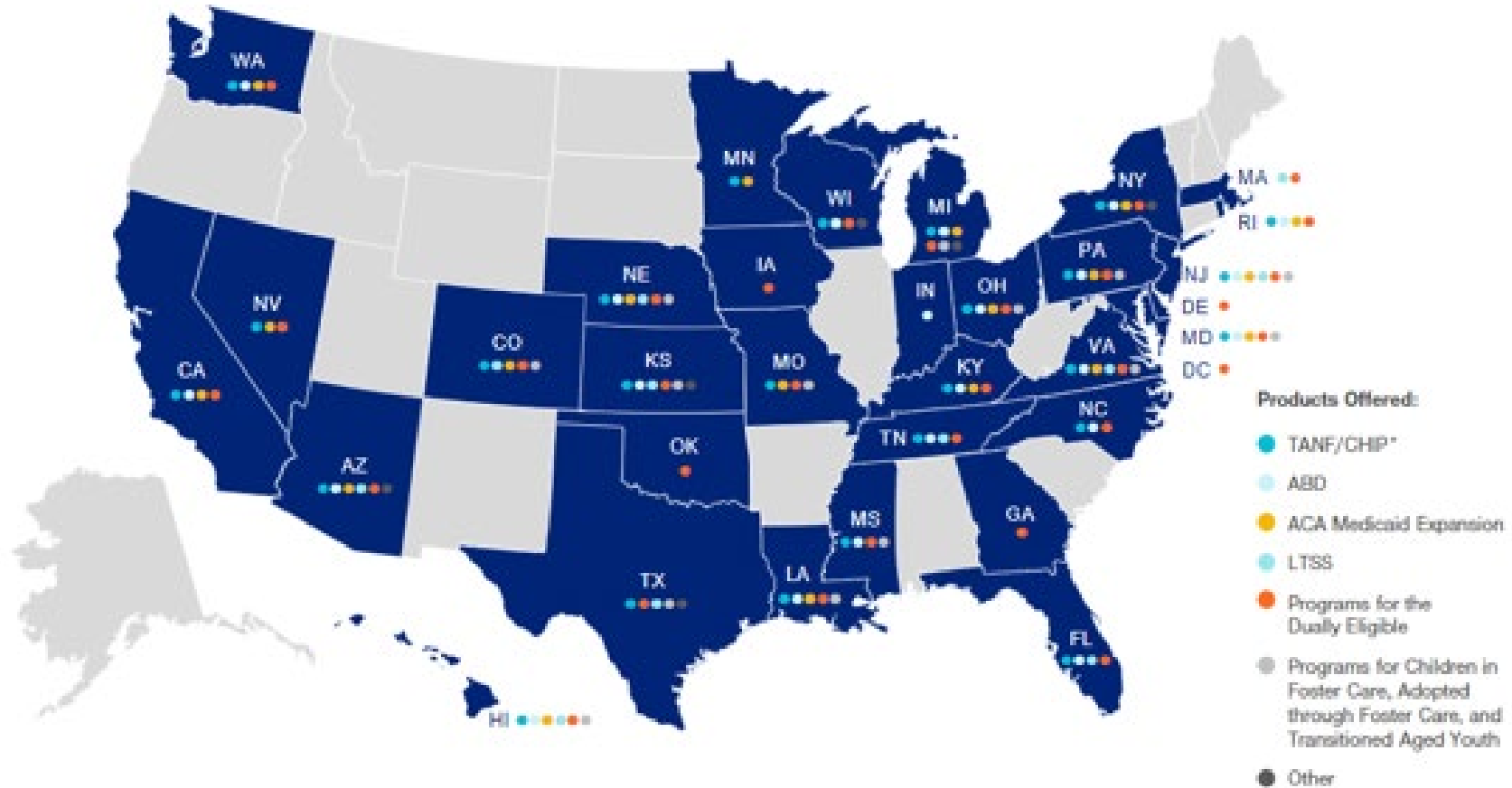
Performance

Demonstrate excellence in
everything we do.

Making care simpler and more effective for everyone

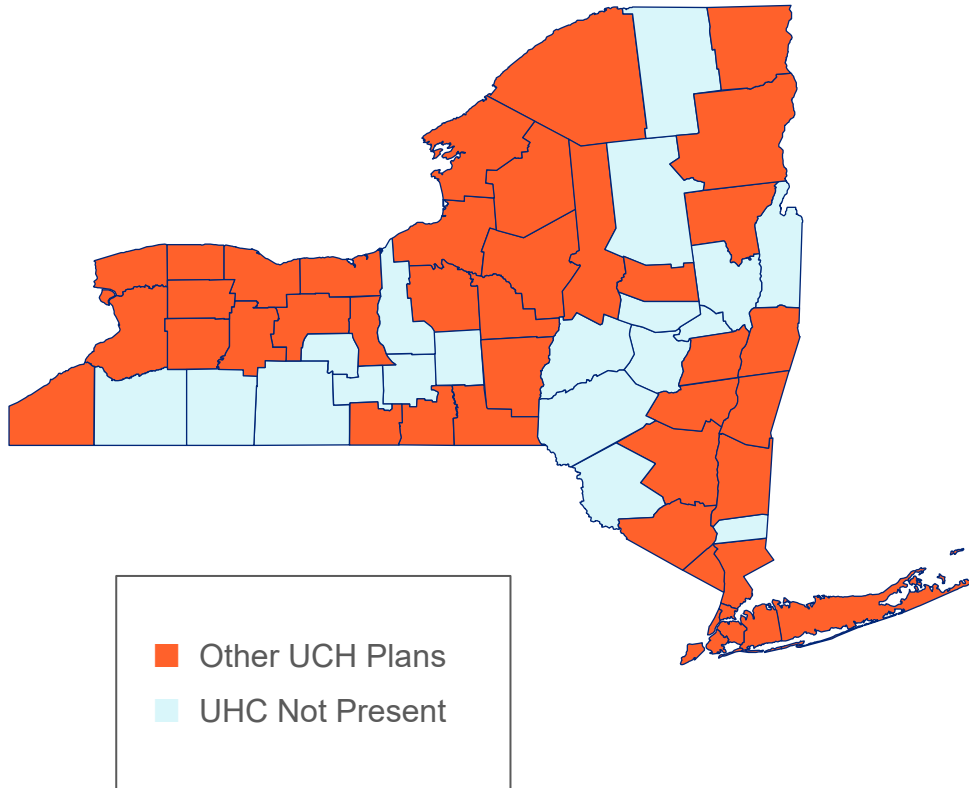


Community and State Footprint



Current as of Q1 2022

UnitedHealthcare Community Plan of New York



- Health plans managed by UnitedHealthcare are available in 46 counties across all regions of New York State.
- UnitedHealthcare offers benefit coverage for Medicaid Community Plan, Wellnes4Me HARP, Essential Plan (EPP), Managed Long Term Services and Supports (LTSS) Medicaid Advantage Plus (MAP), and Children’s Health Insurance Program (CHP)
- UHC manages benefits for over 640,000 members throughout New York State
- Almost 200,000 members live in Upstate New York

Our Goals and Clinical Vision



Covered Benefits

Behavioral Health Services Covered Under Mainstream Medicaid and HARP

- Assertive Community Treatment (ACT)
- Youth and Transition Age Youth Assertive Community Treatment
- Comprehensive Psychiatric emergency Program (CPEP)
- Continuing Day Treatment (CDT) (18+ Years old)
- Outpatient Clinic and Opioid Treatment Program Services
- Outpatient Addiction Rehabilitation Services
- Residential Addiction Services
- Partial Hospitalization (Psychiatric)
- Personalized Recovery Oriented Services (PROS) (18 + Years)
- Mental Health Outpatient and Rehabilitative Services (Clinic)
- Inpatient Hospital Detoxification
- Medically Supervised Inpatient Detoxification
- Medically Supervised Outpatient Withdrawal
- Rehabilitation Services for SUD Treatment
- Inpatient Psychiatric Hospitalization
- Rehabilitation Services for Residence in Congregate Living
- Crisis Intervention, Residence and Stabilization
- Health Home Care Management

Adult HARP HCBS Services

- **Brief Assessment, Plan of Care Development, Ongoing Plan of Care Development** – based on an independent assessment of functioning and driven by the individual as much as possible helps identify risks and goals and establishes the array of services to be provided
- **Residential Supports (Habilitation)** – provided on a 1:1 basis, they are designed to assist individuals with a behavioral health diagnosis in acquiring, retaining and improving independent living
- **Prevocational** – time-limited services that prepare an individual for paid or unpaid employment
- **Transitional Employment** – designed to strengthen the individuals work record and work skills toward the goal of achieving assisted or unassisted competitive employment
- **Intensive Supported Employment** – service that assists recovering individuals with MH/SUD to obtain and keep competitive employment
- **Ongoing Supported Employment** – provided after an individual successfully obtains and becomes oriented to competitive and integrated employment
- **Educational Support** – provided to assist individuals with mental health or substance use disorders who want to start or return to school or formal training with a goal of achieving skills necessary to obtain employment
- **Provider Travel Supplement**

Community Oriented Recovery & Empowerment Services

There are four CORE Services:

- **Psychosocial Rehabilitation (PSR)**- designed to assist an individual in improving their functional abilities to the greatest degree possible. Includes rehabilitation counseling, skill building, psychoeducation
- **Community Psychiatric Support and Treatment (CPST)**
– Designed to be a mobile treatment service to individuals who have difficulty engaging in site-based programs
- **Empowerment Services** – Peer Support (Peer Support) – non-clinical
- **Empowerment Services** – Peer Support (Peer Support) – non-clinical, peer-delivered services with focus on rehabilitation, recovery, and resilience; designed to promote skills for coping with and managing behavioral health symptoms while utilizing natural supports and community resources.
- **Family Support and Training (FST)** – offers instruction, emotional support, and skill building necessary to facilitate engagement and active participation of the family in the individual's recovery process.

Refer to the OMH/OASAS Operations Manual for more information about CORE services:

omh.ny.gov/omhweb/bho/core/core-services-operations-manual.pdf

Care Management

UnitedHealthcare Case Management Services

- When referred, enrollees are eligible for UnitedHealthcare (UHC) case management.
- UHC will assign Members with a behavioral health diagnosis to a licensed behavioral health case manager for engagement with case management.
- UHC case management services are voluntary. If accepted, the member will be assisted with coordination of their behavioral health and physical health services and ensured they are linked with the appropriate services that meet their needs.
- UHC licensed behavioral health case managers and medical case managers will collaborate with the member and family as appropriate to develop a person-centered plan of care.
- UHC licensed behavioral health case managers provide telephonic support and will meet with member/family in the community as appropriate to provide advocacy and support.

Health Home Care Management

UnitedHealthCare Community Plan contracts with Health Homes across NYS to provide care coordination and comprehensive care management.

Purpose:

- Define the goals for the member
- Develop a service plan
- Gather the necessary resources
- Provide appropriate support
- Evaluate progress
- Refer members to community-based services

Members can be referred to Health Homes by:

- Providers, PCPs & Specialists
- Emergency room or inpatient discharge planners
- Single Point Of Access program
- Other community providers

Initiation of a referral:

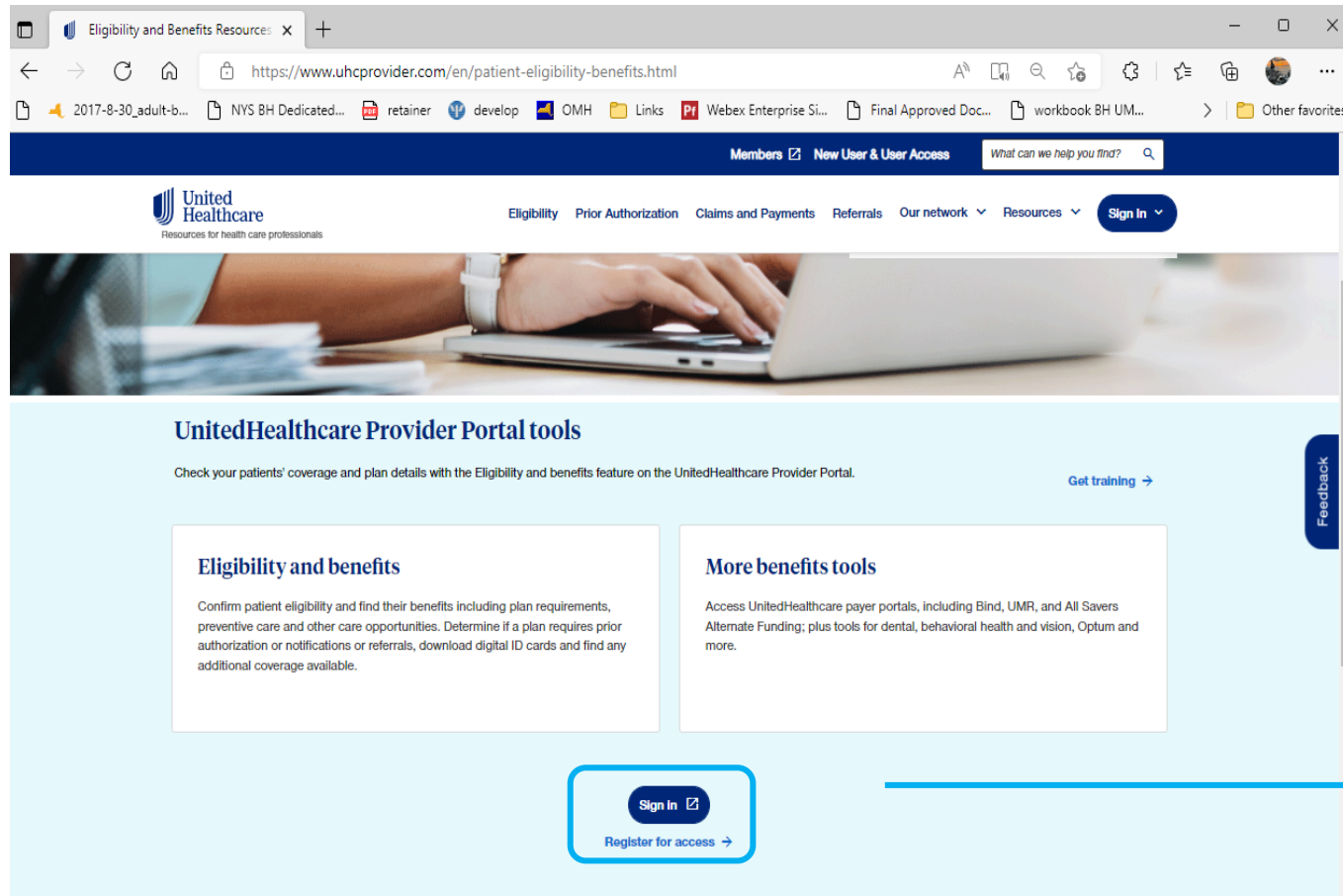
- Reach out directly to the in the area where the member lives
- Each Health Home has a referral line or web portal for easy referral

For a list of the Health Homes refer to link below:

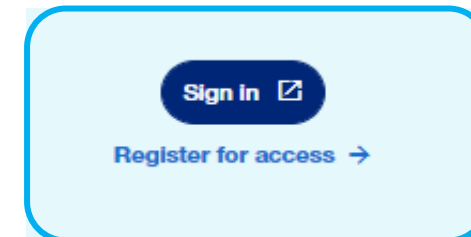
health.ny.gov/health_care/medicaid/program/medicaid_health_homes/hh_map/index.htm

Member Identification & Eligibility

UHC Provider Portal Eligibility & Benefits: [uhcprovider.com/eligibility](https://www.uhcprovider.com/en/patient-eligibility-benefits.html)




- Confirm eligibility
- Benefit coverage
- Plan requirements
- Determine if Prior Authorization or notification is required
- Download Digital ID cards



HARP (Wellness4Me) Membership Card

For Providers: UHCprovider.com 1-866-362-3368

 **UnitedHealthcare**® | Community Plan

Health Plan (80840) 911-87726-04

Member ID: 000000238 Group Number: NYWEL4ME


Member:
[Redacted]

CIN#: [Redacted]

PCP Name: [Redacted]

PCP Phone: [Redacted]

Payer ID: 87726

 **OPTUMRX**™

Rx Bin: 610494
Rx Grp: ACUNY
Rx PCN: 9999

0501 UnitedHealthcare Community Plan - Wellness4Me
Administered by UnitedHealthcare of New York, Inc.

In an emergency go to nearest emergency room or call 911. Printed 08/08/18

This card does not guarantee coverage. For coordination of care call your PCP. To verify benefits or to find a provider, visit the website www.nyuhc.com/communityplan or call.

For Members:	800-493-4647	TTY 711
NurseLine:	877-597-7801	TTY 711
Mental Health:	888-291-2506	TTY 711

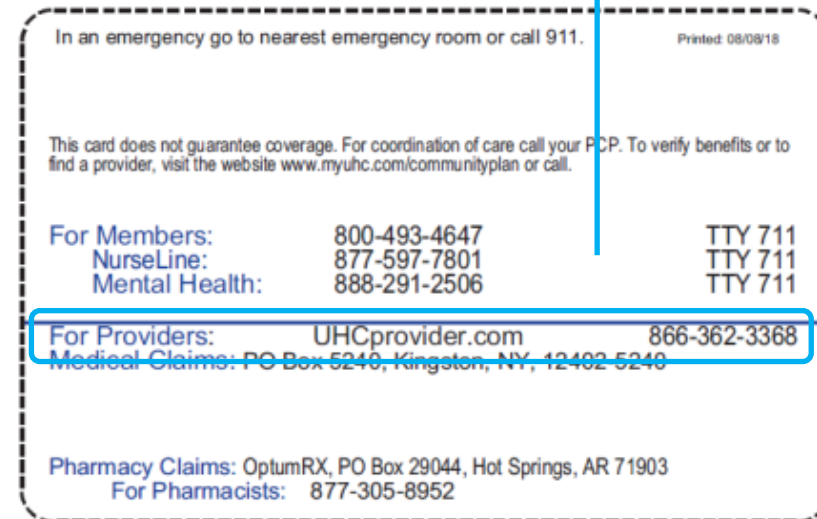
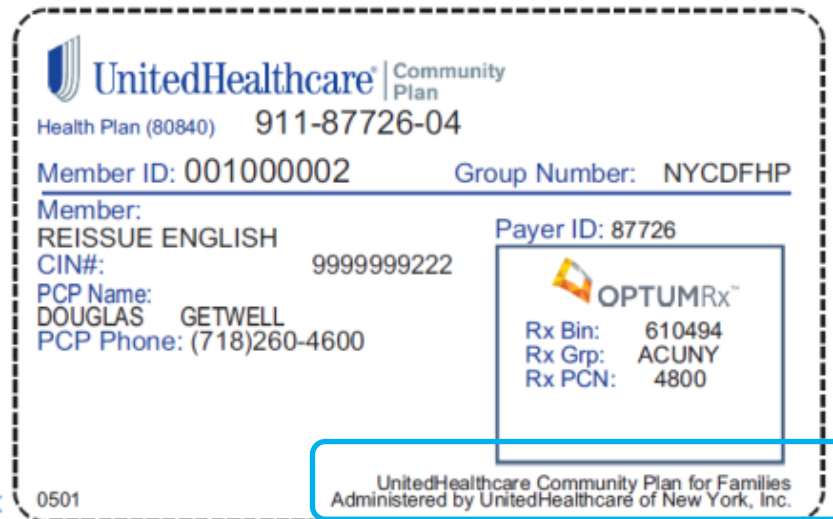
For Providers: UHCprovider.com 866-362-3368
Medical Claims: PO Box 5240, Kingston, NY, 12402-5240

Pharmacy Claims: OptumRX, PO Box 29044, Hot Springs, AR 71903
For Pharmacists: 877-305-8952

UnitedHealthcare Community Plan – **Wellness4Me**
Administered by UnitedHealthcare of New York, Inc

Mainstream Medicaid Under 21 Membership Cards



For Providers: UHCprovider.com 1-866-362-3368



UnitedHealthcare **Community Plan for Families**
Administered by UnitedHealthcare of New York, Inc.

Child Health Plus Membership Cards

For Providers: UHCprovider.com 1-866-362-3368


 **UnitedHealthcare** | Community Plan
Health Plan (80840) 911-87726-04
Member ID: 001000005 Group Number: NYCHP
Member: NEW A ENGLISH Payer ID: 87726
PCP Name: DOUGLAS GETWELL
PCP Phone: (718)787-1017

Rx Bin: 610494
Rx Grp: ACUNY
Rx PCN: 4800
0501
UnitedHealthcare Community Plan for Kids
Administered by UnitedHealthcare of New York, Inc.

In an emergency go to nearest emergency room or call 911. Printed: 08/06/18
This card does not guarantee coverage. For coordination of care call your PCP. To verify benefits or to find a provider, visit the website www.myuhc.com/communityplan or call.
For Members: 800-493-4647 TTY 711
For Providers: UHCprovider.com 866-362-3368
Medical Claims: PO Box 5240, Kingston, NY, 12402-5240
Pharmacy Claims: OptumRX, PO Box 29044, Hot Springs, AR 71903
For Pharmacists: 877-305-8952

UnitedHealthcare **Community Plan for Kids**
Administered by UnitedHealthcare of New York, Inc.

Essential Plan 1 Membership Cards

For Providers: UHCprovider.com 1-866-362-3368

 **UnitedHealthcare** | Community Plan
Health Plan (80840) 911-87726-04

Member ID: 001000034 **Group Number:** NYEPP1

Member: REISSUE ENGLISH **Payer ID:** 87726

PCP Name: DOUGLAS GETWELL
PCP Phone: (718)260-4600

OptumRx logo
Rx Bin: 610494
Rx Grp: ACUNY
Rx PCN: 4800

Copay: OFFICE/SPEC/ER/UrgCare/Rdlgy
\$15/\$25/\$75/\$25/\$25

0501 UnitedHealthcare Community Plan Essential Plan 1
Administered by UnitedHealthcare of New York, Inc.

In an emergency go to nearest emergency room or call 911. Printed: 08/06/18

This card does not guarantee coverage. For coordination of care call your PCP. To verify benefits or to find a provider, visit the website www.myuhc.com/communityplan or call.

For Members: 866-265-1893 TTY 711

For Providers: UHCprovider.com 866-362-3368
Medical Claims: PO Box 5240, Kingston, NY, 12402-5240

Pharmacy Claims: OptumRX, PO Box 29044, Hot Springs, AR 71903
For Pharmacists: 877-305-8952

UnitedHealthcare Community Plan **Essential Plan 1**
Administered by UnitedHealthcare of New York, Inc.

Quality Improvement

Sentinel Events/Critical Incidents

- Definition:** A serious occurrence involving a member that potentially represents a quality-of-care issue on the part of the practitioner/facility, such as death or a serious disability, that occurs during a member's treatment
- List:** A list of sentinel events/critical incidents that must be reported can be found on providerexpress.com
- Who Can Report:** Provider
- Timeframe(s):** As soon as possible, no later than one (1) business day following the event
- Investigation:** Contracted providers are required to cooperate with all aspects of our investigation process
- How to report:** Standardized reporting form located at providerexpress.com
- Fax:** Attn: QM Department 884-342-7704
- Email:** NYBH_QIDept@uhc.com

Quality of Care & Quality of Service

Timeframes

- Urgent complaints: resolved within 48 hours after receipt of all necessary information and no more than 7 days from the receipt of report
- Non-Urgent complaints: resolved within 45 days after the receipt of all necessary information and no more than 60 days from receipt of report

Who Can Report

Member, a designee (with written consent), or plan representative

Investigation

Contracted providers are required to cooperate with **all** aspects of the investigation process.

UHC Provider Performance Reviews

When are provider performance reviews conducted?

- At time of credentialing and re-credentialing
- As part of ongoing monitoring efforts
- As part of a Quality of Care (QOC) or other complaint investigation

What is evaluated during a performance review?

- Physical environment
- Policies and procedures
- Member records
- Personnel files

Audit tools can be found at: providerexpress.com > Our Network > State-Specific Provider Information > [New York page](#)

Utilization Management

How to Obtain Authorization or Make Notification

Electronic Request: Submitted through the Prior Authorization and Advance Notifications (**PAAN**) system. Supporting documentation should include Notification Documents, (i.e., NYS SUD Notification Documents, treatment plan, and LOCADTR). The PAAN system can be found at: uhcprovider.com/paan

Telephonic: Service request that requires prior authorization, notification, or concurrent review can be obtained by calling:

Toll-free line: 1-866-362-3368 (as listed on the back of the member card)

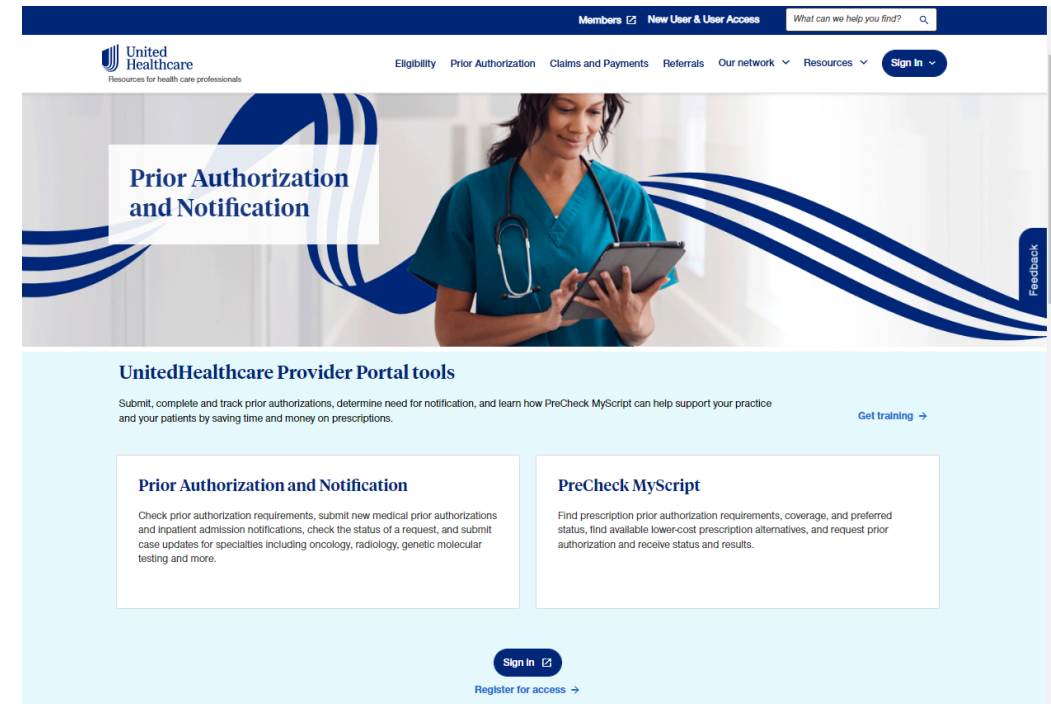
System Prompt	Response
Why are you calling?	Prior Authorization
What Type?	Behavioral health
What is the Member ID	Say or enter the Member/Subscriber ID using the phone dial pad
What is the Date of Birth (MM-DD-YYYY)	Say or enter the Members DOB using the phone dial pad
What Type of Behavioral Health Authorization (System will list IP, RC, PHP, IOP, ABA, Ambulatory Detox, etc.)	Say the service the authorization is needed for
What's the NPI #	Say or enter the provider NPI # using the phone dial pad

UHC Provider Portal: Prior Authorization and Notification (PAAN)

uhcprovider.com/en/prior-auth-advance-notification.html

- Check Prior Authorization Requirements
- Submit New Medical Prior authorizations
- Submit inpatient admission notification
- New User Registration can be found by selecting “New User & User Access”
- Existing users must log in with username and password
- Quick Reference Guide and other helpful resources, videos and training can be found at:

PAAN Behavioral Health Reference Guide
providerexpress.com



UHC Provider Portal: Prior Authorization and Notification (PAAN)

Access the Prior Authorization and Notification Tool

TrackIt: Action Required, Quick Links & Resources

Customize Your View

Click the Prior Authorizations & Notifications tab and click **Go to the Prior Authorizations/Notifications tool** to access the tool.

The screenshot displays the UHC Provider Portal interface. At the top, there is a search bar and navigation tabs for Training & Support, Practice Management, TrackIt, and Taylor. Below this is a header with Payer (87726 - UnitedHealthcare) and Provider (Jamie Doctor) dropdowns. A main navigation bar includes Eligibility, Claims & Payments, Referrals, Prior Authorizations, Clinical & Pharmacy, Documents & Reporting, and Additional Tools. A secondary navigation bar shows TrackIt: Action Required (with a note to take action on tickets), Claims, Completed, and Prior Authorizations (with 3 Require Action). The main content area features a 'Welcome, Taylor!' message and a 'Customize Tabs' button. A sidebar on the left contains navigation options: Eligibility, Claims & Payments, Prior Authorizations & Notifications (highlighted with a yellow border), Referrals, Documents & Reporting, and UnitedHealthcare Updates. The central content area is titled 'Prior Authorizations & Notifications' and shows the 'Currently Selected Provider: Jamie Doctor' with an 'Edit' link. It includes instructions on how to use the tool and a 'Go to the Prior Authorizations/Notifications tool' button (highlighted with a yellow border). On the right, there are sections for 'PAAN Resources' (Tool resources, Interactive training guide, Peer to peer requests) and 'Quick Links & Tools' (Practice Assist, Secure Messenger Clinical Data Submission, Individual Health Record, Care Conductor and Notification of Pregnancy).

Self Paced Users Guide to PAAN

chameleoncloud.io/review/2407-5cc37147d2041/prod

Prior Authorization & Notification

Service	Prior Authorization	Initial Notification	Concurrent Review
Mental Health Outpatient Treatment and Rehabilitation Services	No	No	No
Mental Health Clinic Services: Psychiatric Assessment; Medication Treatment	No	No	No
Psychological or Neuropsychological Testing	Yes	N/A	N/A
Mental Health Partial Hospitalization	Yes	N/A	Yes
Mental Health Continuing Day Treatment (CDT)	Yes	N/A	Yes
Mental Health Intensive Outpatient	Yes	N/A	Yes
Personalized Recovery Oriented Services (PROS) Pre-Admission Status	No	No	No
PROS Admission: Individualized Recovery Planning	No	No	No
PROS: Active Rehabilitation	No	No	No
Assertive Community Treatment (ACT)	Yes	No	Yes
Youth and Transition Age Youth Assertive Community Treatment (ACT)	Yes	No	Yes
OASAS outpatient rehabilitation programs	No	No	Yes
OASAS outpatient and opioid treatment program (OTP) services	No	No	Yes
Outpatient and Residential Addiction services	No	No	Yes
OASAS Residential Supports and Services	No	Within 48-hours of admission	Yes

Prior Authorization & Notification

HCBS and CORE Services (Adults Only)	Prior Authorization	Initial Notification	Concurrent Review
HCBS			
Education Support Services	No	Within 14-days of 1 st visit	Yes
Employment Support Services <ul style="list-style-type: none"> • Prevocational • Transitional Employment • Intensive Supported Employment • On-going Supported Employment 	No	Within 14-days of 1 st visit	Yes
Empowerment Services (Peer Services)	No	Within 14-days of 1 st visit	Yes
Non-Medical Transportation	Yes	Within 14-days of 1 st visit	Yes
CORE Services			
Community Psychiatric Supports and Treatment	No	Within 14-days of 1 st visit	Yes
Empowerment Services (Peer Supports)	No	Within 14-days of 1 st visit	Yes
Family Support and Training	No	Within 14-days of 1 st visit	Yes
Psychosocial Rehabilitation	No	Within 14-days of 1 st visit	Yes

Prior Authorization & Notification

HCBS Services (Children Only)	Prior Authorization	Initial Notification	Concurrent Review
Community Habilitation	No	Within 14 days of service onset	Yes
Day Habilitation	No	Within 14 days of service onset	Yes
Prevocational Services	No	Within 14 days of service onset	Yes
Supported Employment	No	Within 14 days of service onset	Yes
Environmental Modifications	Yes	N/A	Yes
Vehicle Modifications	Yes	N/A	Yes
Adaptive and Assistive Technology	Yes	N/A	Yes
Palliative Care <ul style="list-style-type: none"> • Bereavement Services • Counseling and Support Services • Pain and Symptom Management • Expressive Therapy • Massage Therapy 	No	Within 14 days of service onset	Yes
Planned Respite	No	Within 14 days of service onset	Yes
Crisis Respite	No	Within 14 days of service onset	Yes

Prior Authorization & Notification

Service	Prior Authorization	Initial Notification	Concurrent Review
Inpatient Mental Health Hospitalization (Adult)	Yes	Within 2 Business Days of Admission	Yes
Inpatient Mental Health Hospitalization (Child)	No	Within 2 Business Days of Admission	After the 15 th day of Admission
Inpatient Detoxification	No	Within 2 Business Days of Admission	After the 29 th day of admission
Inpatient Rehabilitation	No	Within 2 Business Days of Admission	After the 29 th day of admission
Crisis Intervention	No	No	No
Crisis Residence	No	Within 2 Business Days of Admission	After the 29 th day of admission
Crisis Stabilization	No	No	N/A
Services for Children Only			
Other Licensed Practitioner (OLP)	No	Request within 2 days of service onset	No
Community Psychiatric Supports and Treatment (CPST)	No	Request within 2 days of service onset	No
Psychosocial Rehabilitation (PSR)	No	Request within 2 days of service onset	No
Family Peer Supports and Services (FPSS)	No	Request within 2 days of service onset	No
Youth Peer Support (YSP)	No	Request within 2 days of service onset	No

Guidance on Clinical Criteria Decisions: Treatment of Mental Health Conditions

Optum currently uses the:

- Level of Care Utilization System (LOCUS),
- Child and Adolescent Service Intensity Instrument (CASII) and
- Early Childhood Service Intensity Instrument (ECSII)

Clinical Guidelines for Criteria Decisions can be found at:

providerexpress.com/content/ope-provexpr/us/en/clinical-resources/guidelines-policies/Adoption-of-LOCUS-CASII-ECSII.html

For guidance on clinical criteria decisions for the treatment of behavioral health conditions across most Commercial and Medicaid membership.

- **Optum Clinical Criteria for Behavioral Health Conditions Frequently Asked Questions**
providerexpress.com/content/dam/ope-provexpr/us/pdfs/clinResourcesMain/guidelines/optumLOCG/locg/LCE-FAQs.pdf
- **Additional Clinical Resources available at:** providerexpress.com/content/ope-provexpr/us/en/clinical-resources.html

Utilization Management Appeal

Options for Submitting Appeals:

Phone: Toll free appeals line: **1-866-504-3267**, say “*Claims Appeal Status*” when prompted. This will correctly route your call to appeal an UM decision

Phone number can be used to check status of an appeal and verbally submit an appeal

- **Note:** Any Appeal filed verbally must also be followed up with a written, signed appeal
- Enrollees/Providers have 60-calendar days from the date of denial to request an appeal
- Only one internal appeal allowed
- Clinical appeal turnaround time is 72-hours

Mail: UM appeals for [ALL Behavioral Health Services](#) should be sent to:

UnitedHealthcare Community Plan
Attn: UM Appeals Coordinator
P.O. Box 31364
Salt Lake City, UT 84131

Provider Relations

Network Management

Network Management is responsible for developing and maintaining the Optum network of providers

providerexpress.com/content/ope-provexpr/us/en/contact-us.html

For questions regarding participation in our network, credentialing, or your provider record

- Join our Network
- Facility Record Maintenance
- Provider Record Maintenance
- Network management Contact Information:

providerexpress.com/content/ope-provexpr/us/en/contact-us/nmContacts/ny.html

New York Network Management - Commercial and Medicare
13 Cornell Road, 2nd Floor
Latham NY 12110

Email: NYNetworkManagement@optum.com
Main Number: (877)614-0484
Fax Number: (866)483-6254

New York Network Management - Mainstream Medicaid and HARP
13 Cornell Road, 2nd Floor
Latham NY 12110

Email: NYHarp_ProvServices@optum.com
Main Number: (877)614-0484
NYC Fax Number: (877)958-7745

New York Autism/ABA Network Management
(877)614-0484

MCTAC Plan Matrix

Contact your Network Manager - a list of Network Managers for your region is available at: matrix.ctacny.org/

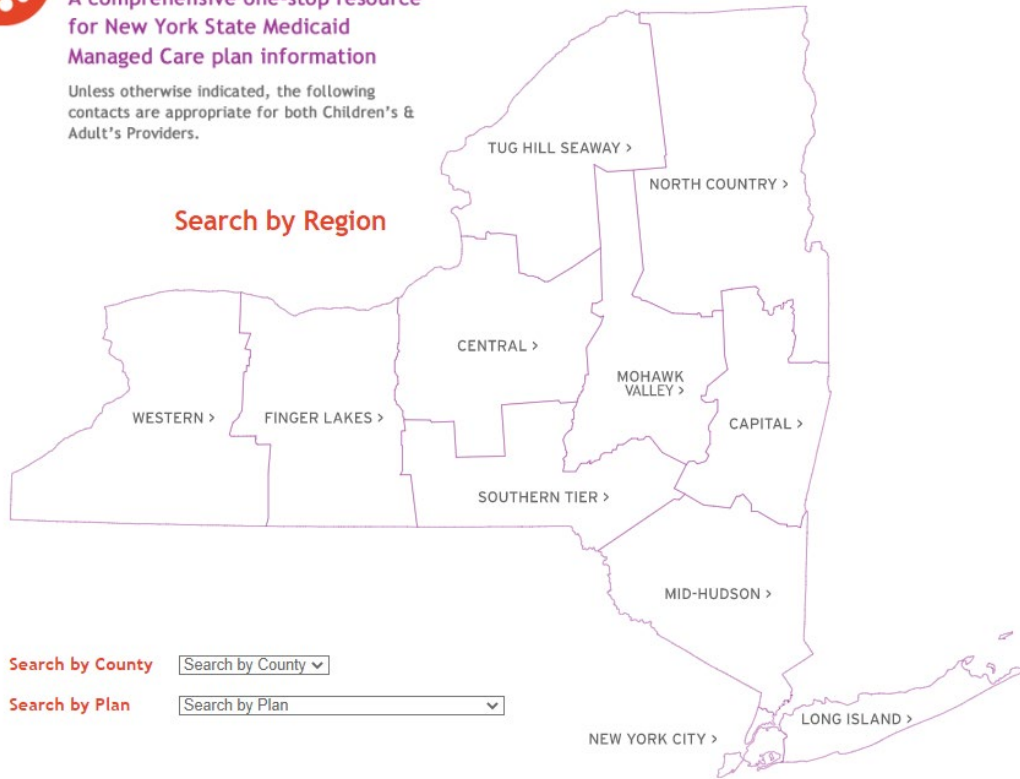


MCO Plan Matrix

A comprehensive one-stop resource for New York State Medicaid Managed Care plan information

Unless otherwise indicated, the following contacts are appropriate for both Children's & Adult's Providers.

Search by Region



Search by County

Search by Plan

UnitedHealthcare Community Plan

[back to listing](#)

- GENERAL
- CHILDREN
- CONTRACTING
- UTILIZATION MANAGEMENT (UM)
- CREDENTIALING
- BILLING
- PHARMACEUTICALS
- ALL



Address:
One Pennsylvania Plaza #8
New York, NY 10119
Phone: (866) 633-2446

GENERAL INFORMATION

Additional Names:

UnitedHealthcare of New York, Inc
UnitedHealthcare Community Plan - Wellness4Me

Subcontracting to BHO:

Optum / UBH

HARP:

✓ - UnitedHealthcare Community Plan-Wellness4Me

Counties Available:

New York (CHP,Medicaid)	Herkimer (CHP,Medicaid)
Kings (Medicaid,CHP)	Madison (CHP,Medicaid)
Bronx (Medicaid,CHP)	Oneida (CHP,Medicaid)
Queens (Medicaid,CHP)	Onondaga (CHP,Medicaid)
Richmond (Medicaid,CHP)	Oswego (CHP,Medicaid)
Nassau (Medicaid,CHP)	Tioga (CHP,Medicaid)
Suffolk (CHP,Medicaid)	Chautauqua (CHP,Medicaid)
Dutchess (CHP,Medicaid)	Erie (Medicaid,CHP)
Orange (CHP,Medicaid)	Niagara (Medicaid,CHP)

Billing & Claims

Clean Claim

A claim with no defect or impropriety (including any lack of any required substantiating documentation) is considered a clean claim. All claim submissions must include, but are not limited to:

- Member's name, identification number and date of birth
- Provider's Federal Tax I.D. number (TIN)
- National Provider Identifier (NPI)
- Taxonomy Code
- A complete diagnosis (ICD-10-CM)
- Date of Service
- Duration / Units
- A claims must be on n the correct claim form
 - Agency
 - Facility (i.e., Hospital, Residential)
- Correct code(s) corresponding to service provided:
 - Value Codes
 - Rate Codes
 - Revenue Codes
 - CPT/HCPCS Codes
 - Modifiers
 - Etc.

Providers are responsible for billing in accordance with nationally recognized CMS Correct Coding Initiative (CCI) standards. Additional information is available at

cms.gov/medicare-medicaid-coordination/national-correct-coding-initiative-ncci

Additional Billing Guidance and Resources are available in the [Appendix](#)

Claim Submission

Electronic Claim Submission (837i): payer ID 87726

Paper Claim Submission (UB-04):

If you are unable to file electronically, follow these tips to ensure smooth processing of your paper claim:

- Use an original UB-04 Claim Form (no photocopies)
- Type information to ensure legibility
- Complete all required fields (including ICD indicator and NPI number)
- Mail Paper Claims to:

Optum Behavioral Health
P.O. Box 30760
Salt Lake City, UT 84130-0760

Unlicensed Practitioner ID as attending:

- OASAS Unlicensed Practitioner ID: 02249145
- OMH Unlicensed Practitioner ID: 02249154
- OCFS Unlicensed Practitioner ID: 05448682
- **For Electronic/EDI Claims:**
 - When submitting claims utilizing an unlicensed practitioner ID as Attending, providers will submit the NM1 Attending Provider Loop 2310A as follows:
 - NM108 and NM109 will be blank/not sent
 - REF Attending Provider Secondary Information will be added
 - REF01 G2
 - REF02 the OASAS, OMH, or OCFS (CFTSS and HCBS) unlicensed practitioner ID (example: REF*G2*02249145~)

Electronic Data Interchange (EDI)

Submit batches of claims electronically, right out your practice management system software

- Ideal for high volume Providers
- Can be configured for multiple payers
- Clearinghouse may charge small fee

Optum can recommend a vendor that is right for you:

- Contact via phone 1-800-765-6705 or via email: inform@optum.com
- Provide: Name, tax ID, claims volume, single or multi-payer interest

Refer to the EDI pages on Provider Express for more information

- providerexpress.com/content/ope-provexpr/us/en/about-us/electronic-data-interchange.html
- providerexpress.com/content/ope-provexpr/us/en/admin-resources/claim-tips/electronic-claim-submission-and-electronic-data-interchange.html

Electronic Payments and Statements (EPS) through Optum Pay

- Easy set-up, free to use
- Payments deposited into your bank
- Simplified claims reconciliation
- 24/7 access to your information
- Secure payment and remittance advice

Registering for Optum Pay is easy

- Go to myservices.optumhealthpaymentservices.com
- Contact Optum Financial Services for assistance: 1-877-620-6194
- Find additional information on providerexpress.com > Quick Links > [Optum Pay](#)

Unlicensed Provider NPI Claims Submission

PAGE OF		CREATION DATE		TOTALS	
50 PAYER NAME	51 HEALTH PLAN ID	52 REL. INFO	53 ARO. BEN.	54 PRIOR PAYMENTS	55 EST. AMOUNT DUE
56 NPI	57 OTHER PRIV ID	58 INSURED'S NAME	61 GROUP NAME	62 INSURANCE GROUP NO.	65 EMPLOYER NAME
63 TREATMENT AUTHORIZATION CODES	67	68	69 ADMIT DX	70 PATIENT REASON DX	73
74	75	76	77	78	79
76 ATTENDING	NPI	QUAL	LAST	FIRST	
77 OPERATING	NPI	QUAL	LAST	FIRST	
78 OTHER	NPI	QUAL	LAST	FIRST	
79 OTHER	NPI	QUAL	LAST	FIRST	

76. Attending Provider

- Attending Provider NPI and Qual
- Attending Provider - Last Name/First Name

REQUIRED

If the individual licensed practitioner is Medicaid enrollable* they must enroll and use their individual NPI number on claims. If the individual practitioner is unlicensed or not a licensed enrollable Medicaid practitioner* the OMH (02249154), OASAS (02249145), or OCFS (05448682) unlicensed practitioner ID may be used.

For Electronic/EDI Claims: When submitting claims utilizing an unlicensed practitioner ID as Attending, providers will submit the NM1 Attending Provider Loop 2310A as follows:

- NM108 and NM109 will be blank/not sent
- REF Attending Provider Secondary Information will be added
- REF01 G2
- REF02 the OASAS, OMH or OCFS unlicensed practitioner ID
- (example: REF*G2*02249145-)

* There are certain licensed/credentialed practitioners that cannot become a Medicaid provider: Licensed Master Social Worker (LMSW), Licensed Marriage and Family Therapist, Licensed MH Counselor, Licensed Creative Arts Therapist, Applied Behavioral Analyst, Credentialed Alcohol and Substance Abuse Counselor (CASAC), and Peer.



75	76 ATTENDING	NPI	QUAL	LAST	FIRST
	77 OPERATING	NPI	QUAL	LAST	FIRST
	78 OTHER	NPI	QUAL	LAST	FIRST
	79 OTHER	NPI	QUAL	LAST	FIRST

THE CERTIFICATIONS ON THE REVERSE APPLY TO THIS BILL AND ARE MADE A PART HEREOF.

MCTAC Billing Tool: Top section of UB-04 claim form

Billing Overview:

An interactive UB-04 form that walks through the components required to submit a clean claim

MCTAC Billing Tool:

billing.ctacny.org/

1	2	3a PAT. CNTL. #	4 TYPE OF BILL
b. MED. REC. #	5 FED. TAX NO.	6 STATEMENT COVERS PERIOD FROM	7
8 PATIENT NAME a	9 PATIENT ADDRESS a	TIN	From and Through dates
b	b	c	d
10 BIRTHDATE	11 SEX	12 DATE	13 HR 14 TYPE 15 SRC 16 DHR 17 STAT 18 19 20 21
22	23	24	25
26	27	28	29 AC STA
31 CODE	32 OCCURRENCE DATE	33 OCCURRENCE DATE	34 OCCURRENCE DATE
35	36	37	37
38	39 CODE	40 CODE	41 CODE
a	b	c	d
42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE
46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES	49
PAGE	OF	CREATION DATE	TOTALS
50 PAYER NAME	51 HEALTH PLAN ID	52 REL. INFO	53 ASSO. BEN.
54 PRIOR PAYMENTS	55 EST. AMOUNT DUE	57	Total Charges

MCTAC Billing Tool: Bottom section of UB-04 claim form

PAGE ____ OF ____		CREATION DATE				TOTALS			
50 PAYER NAME			51 HEALTH PLAN ID		52 REL. INFO	53 ASG. BEN.	54 PRIOR PAYMENTS	55 EST. AMOUNT DUE	56 NPI
									57 OTHER PRV ID
									Agency/Program NPI
58 INSURED'S NAME			59 P.REL.	60 INSURED'S UNIQUE ID		61 GROUP NAME		62 INSURANCE GROUP NO.	
Insured Name				Insured ID number					
63 TREATMENT AUTHORIZATION CODES				64 DOCUMENT CONTROL NUMBER			65 EMPLOYER NAME		
Diagnosis and Code Qualifier (ICD-10 qualifier =0)							Unlicensed practitioner ID OMH-02249154 OASAS-02249145 OCFS -05448682		
66 DX	B	C	D	E	F	G	H		
	J	K	L	M	N	O	P	Q	
69 ADMIT DX	70 PATIENT REASON DX	a	b	c	71 PPS CODE	72 ECI	a	b	c
74 PRINCIPAL PROCEDURE CODE	DATE	a. OTHER PROCEDURE CODE	DATE	b. OTHER PROCEDURE CODE	DATE	75	76 ATTENDING NPI	73	
							LAST	Attending NPI, last name and first name	
c. OTHER PROCEDURE CODE	DATE	d. OTHER PROCEDURE CODE	DATE	e. OTHER PROCEDURE CODE	DATE		77 OPERATING NPI		
							LAST		
80 REMARKS			81CC a				78 OTHER NPI	79 OTHER NPI	
			b	Taxonomy Code			LAST	Referring Provider	
			c				79 OTHER NPI		
			d				LAST		

JB-04 CMS-1450

APPROVED OMB NO. 0938-0997

NUBC National Uniform Billing Committee

THE CERTIFICATIONS ON THE REVERSE APPLY TO THIS BILL AND ARE MADE A PART HEREOF.

Quick Reminders



Stock Photo

Always verify member eligibility prior to rendering services

Obtain prior authorization for those services that require it

Use value code 24 and applicable rate code in the correct field

One rate code per claim

Include CPT Code(s), Modifier(s) and Service Units as applicable

Do not use a hyphen in your Tax Identification Number (TIN)

NPI numbers are required

A complete diagnostic code is required (ICD-10)

Review Provider Remittance Advice regularly to identify issues early

For paper claims make sure the value code is followed by "00"

Billing Appeals

- Process by which member, or provider on behalf of member, requests a review of adverse determination(s) on the health care services or any amounts that the member must pay toward a covered service
- Appeal of claim payment (amount, partial) or denial within 60-days of receipt of Provider Remittance Advice (PRA)

Appeals should be submitted to: United Healthcare Community Plan Appeals
P.O. Box 31364
Salt Lake City, Utah 84131-0364

Billing Resources

Coding Combination Crosswalk: ctacny.org/sites/default/files/codingtaxonomy%20May%202020.xlsx

Billing Tools: billing.ctacny.org/

Refer to the [Appendix](#) for additional billing resources

Cultural Competency

Mandatory Annual Cultural Competency Training Requirements

Participating OMH/OASAS licensed/designated providers are expected to complete state required annual cultural competency training for all staff who have regular and substantial contact with members. Approved Cultural Competence Trainings Include:

NYS OMH

Center for Practice Innovation Platform:

- Network Provider Training Part 1: Cultural Competence
- Network Provider Training Part 2.1: Using the Cultural Formulation Interview

NYS OASAS

Center for Practice Innovation Platform:

- Network Provider Training Part 1: Cultural Competence
- Network Provider Training Part 2.1: Using the Cultural Formulation Interview

OASAS Training Catalog: Cultural Competency

webapps.oasas.ny.gov/training/index.cfm

For additional NYS Guidance: omh.ny.gov/omhweb/bho/docs/cultural_competency_curriculum.pdf

Provider Express Cultural Sensitivity Trainings

LGBTQ+ Mental Health Training

Developed in partnership with OutCare Health, this course is designed to help deepen your understanding of how to care for members of the LGBTQ+ community.

Once you have completed the training, you can update your provider profile by logging into providerexpress.com to add 'LGBTQ Supportive' and 'LGBTQ Identified Clinician' under areas of expertise.

Adding these areas of expertise to your profile will easily allow members to find you via the provider directory when searching for a provider with these areas of expertise.

You can also join OutCare Health's OutList post training. OutCare Health's OutList is a free, publicly accessible, national directory of LGBTQ+ culturally competent providers. Signing up is quick and easy. Join the OutList today at: outcarehealth.org/join.

Additional trainings available with OptumHealth Education:

- Unconscious Bias Training
- Caring for the LGBTQ+ Community: An Introduction
- Across the Sexual Orientation and Gender Identity Spectrum: A Call to Action
- Disparities in Social Determinants of Health (SDOH): What can we do?

NYS Office of Diversity and Inclusion Resources

The New York State Office of Mental Health's Office of Diversity and Inclusion integrates cultural competence through the following functions:

- Lead trainings on the importance of infusing cultural and linguistic competence throughout agency policies and clinical practices.
- Ensure cultural competence is implemented within program policies.
- Provide technical assistance to OMH facilities as well as agencies licensed by OMH.
- Facilitate quarterly meetings between OMH and the Multicultural Advisory Committee.
- Overseeing OMH's efforts to recruit and create a diverse workforce and to maintain an inclusive work environment.
- Ensuring individuals who have limited English proficiency receive language access services.

omh.ny.gov/omhweb/cultural_competence/resources.html

Resource Topics include:

- Organizational Change
- Anti-Racist Resources
- Serving Black New Yorkers
- Serving Native American Population
- Serving Asian Americans
- Serving Hispanic and Latinx New Yorkers
- Serving the LGBTQ Community
- Serving Older Adults
- Serving Rural New Yorkers
- Serving Veterans
- Serving New York's New Americans
- Serving Jewish Americans

Evidence-Based and Culturally Relevant Resources

Cultural Formulation Interview

The APA is offering the Cultural Formulation Interview (including the Informant Version) and the Supplementary Modules to the Core Cultural Formulation Interview for further research and clinical evaluation. Additional information can be found in DSM-5 in the Section III chapter “Cultural Formulation”

- **American Psychiatric Association Cultural Formulation Interview (CFI)**
psychiatry.org/File%20Library/Psychiatrists/Practice/DSM/APA_DSM5_Cultural-Formulation-Interview.pdf

Adapting Evidence-based Practices for Under-resourced Populations (September 2022):

This guide focuses on research supporting adaptations of evidence-based practices (EBPs) for under-resourced populations. Adaptations involve tailoring care, programs, and services to the cultural, social, gender, and demographic contexts of the people served to yield positive outcomes.

store.samhsa.gov/product/evidence-based-practices-under-resourced-populations/pep22-06-02-004?referer=from_search_result

Special Populations

Transition Age Youth (TAY)

- Transition Age Youth (TAY) are young people between the age of 16-25.
- Many major life changes happen during this time frame including:
 - Starting a First Job
 - Starting College
 - Moving away from home
 - Exploring New Relationships
 - Discovering Identity

Several Resources for Transition Age Youth and for Providers include:

- **Assertive Community Treatment for Transition Age Youth (ACT-TAY)** omh.ny.gov/omhweb/guidance/youth-act-program-guidance.pdf
- **Transition Age Youth Provider Support** ny.gov/omhweb/consumer_affairs/transition_youth/resources/provider.html
- **NYS OMH Transition Age Youth Resource Webpage:** omh.ny.gov/omhweb/consumer_affairs/transition_youth/resources/
- **Clinic Technical Assistance Center Transition Age Youth Trainings** ctacny.org/trainings/

First Episode of Psychosis (FEP): Resources

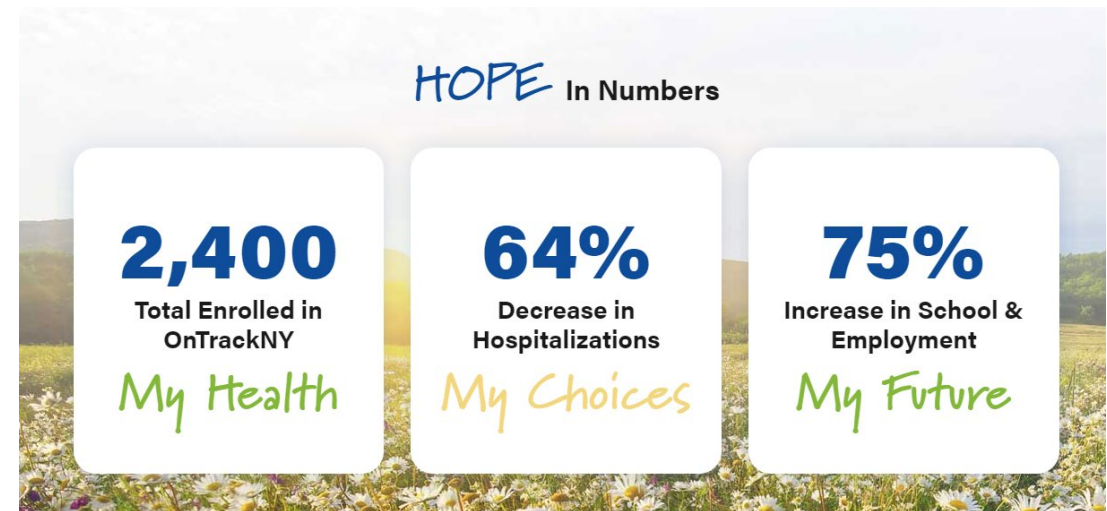
OnTrackNY:

- Offers specialized clinical service for adolescents and young adults between the ages of 16 and 30 who have been experiencing psychotic symptoms for more than a week but less than 2 years
- To learn more or make a referral visit the OnTrackNY website and click on Providers tab: ontrackny.org/

View First Episode Psychosis Recovery Stories at:

practiceinnovations.org/resources/first-episode-psychosis-recovery-stories

First Episode Psychosis and FEP Evidence Based Treatment Training: ctacny.org/trainings/



Pharmacy Resources

NYRx Medicaid Pharmacy Program Website

Includes Pharmacy Program information such as:

- Drug Utilization Review Board Program
- Emergency Services Only Pharmacy Coverage
- Formulary File/List of Reimbursable Drugs
- Foster Care
- Mandatory Generic Program
- Medication Assisted Treatment Formulary
- Pharmacists as Immunizers

health.ny.gov/health_care/medicaid/program/pharmacy.htm

Precheck MyScript

- Precise cost information based on patients benefit plan
- Gives care providers patient specific pharmacy information
- Provides details about patient's insurance coverage
- Automates prior authorizations
- Helps lower costs
- Results in more timely prescriptions
- Reduces administrative hassle

[PreCheck MyScript | uhcprovider.com/en/resource-library/link-provider-self-service/precheck-myscript.html.com](https://uhcprovider.com/en/resource-library/link-provider-self-service/precheck-myscript.html.com)

UHC Online Provider Portals

UHC On-Line Resources

uhcprovider.com

- Check member eligibility
- Check claim status and payments
- Claims Reconsideration
- Electronic Data Interchange (EDI) information
- Tools and Resources

uhcommunityplan.com

- A website for Health Care Professionals, Community Organizations and Members
- For providers, the links will direct you to important information in your state
- Directs you to our secure provider site UnitedHealthcare Online®

providerexpress.com New York State Page

- New York Medicaid Provider resources children under 21
- 29I Health Care Facilities/VFCA Resources
- Demographic Updates
- Clinical Guidelines and Policies
- PAAN Behavioral Health Guide
- Trainings & Resources
- Sentinel Events Reporting Form

liveandworkwell.com

- Search for Providers in the Network
- Confidential Work/Life Resource Center
- Offers Interactive Assessments
- Medication Database
- Self – Help Resources

Get Training: Digital Solutions


Digital Solutions

Learn how you can save time, get better documentation and reduce paper by using our online self-service tools.



Featured: Improved Access and New User Registration

Easily complete your registration and start using UnitedHealthcare's self-service tools. This guide will walk you through the process step-by-step.

[Review now](#) 



Find what you need fast

When reviewing an interactive self-paced guide, simply click MENU to see all content included. Then, select the topic you need for quick reference. Use the forward arrow to advance to the next page in order or use the HOME icon to switch topics at any time.

- 3rd Party Access Guide for Primary Access Administrators
- Claim Follow Up Self-Paced User Guide
- Claims Research project
- Claim Submission
- CommunityCare Provider Portal
- Document Library and Interactive Guide
- EDI Connectivity
- Eligibility and Benefits Self-Paced User Guide
- Improved Access and new User Registration
- Interactive Guide for Prior Authorization and Notification

Behavioral Health Toolkit for Medical Providers

Includes:

- Clinical Guidelines
- Quality Assurance
- Referral Options
- Training Resources
- Behavioral health Resources for:
 - Adult
 - Children and Adolescent
 - Older Adult

The screenshot shows the Optum Provider Express website. At the top, there is a navigation bar with the Optum logo and 'Provider Express' text. To the right, there are links for 'Log In', 'First-time User', 'Global', and 'Site Map', along with a search bar. Below the navigation bar, there is a breadcrumb trail: 'Optum - Provider Express Home > Clinical Resources > Behavioral Health Toolkit > Behavioral Health Toolkit for Medical Providers'. The main heading is 'Behavioral Health Toolkit for Medical Providers'. Below this, there is a photograph of a smiling female doctor with a stethoscope around her neck, sitting at a desk. To the right of the photo, there is a welcome message: 'Welcome to the Optum Behavioral Health Toolkit for Primary Care Physicians (PCP) and other providers. Resources to assist you in your practice and help your patients are organized by age cohort on the left side. Specific behavioral health conditions can be found under each age cohort. Click on the condition to display the associated content. Please come back regularly as new information is routinely posted.' Below the welcome message, there is a section titled 'General Resources' with a list of items: 'Member Website', 'Additional Resources', 'Clinical Guidelines', and 'Quality Assurance'. Each item has a downward arrow next to it, indicating it is a dropdown menu. On the left side of the page, there is a sidebar with a list of categories: 'Behavioral Health Toolkit Resources', 'Adult', 'Child and Adolescent', and 'Older Adults'.

providerexpress.com/content/ope-provexpr/us/en/clinical-resources/PCP-Tool-Kit/Behavioral-Health-Toolkit--Medical-Providers.html

UHC Behavioral Health Resources

UHC created a reference guide of resources to help primary care providers screen patients for depression, ADHD, and alcohol substance misuse. These resources are available in the UHC Resource Library.

uhcprovider.com/en/resource-library/behavioral-health-resources

Clinical and Quality Measures Toolkit for Behavioral health Providers includes:

- Information to support treatment
- A library of articles to support prevention and recovery
- Information about comorbid conditions
- Weblinks to nationally recognized practice guidelines
- Printable self-appraisals for patients
- List of support resources for practitioners, patients and families

providerexpress.com/content/ope-provexpr/us/en/clinical-resources/clinical-tools-and-quality-initiatives1.html



- Quality Measures (HEDIS®)
- Attention Deficit/Hyperactivity Disorder
- Follow-up after Hospitalization or Emergency Department Visit
- Depression
- Schizophrenia/Antipsychotic Medications
- Substance Use Disorders
- Other Important Resources
- Treatment Guideposts

Member Resource for Behavioral Health: liveandworkwell.com

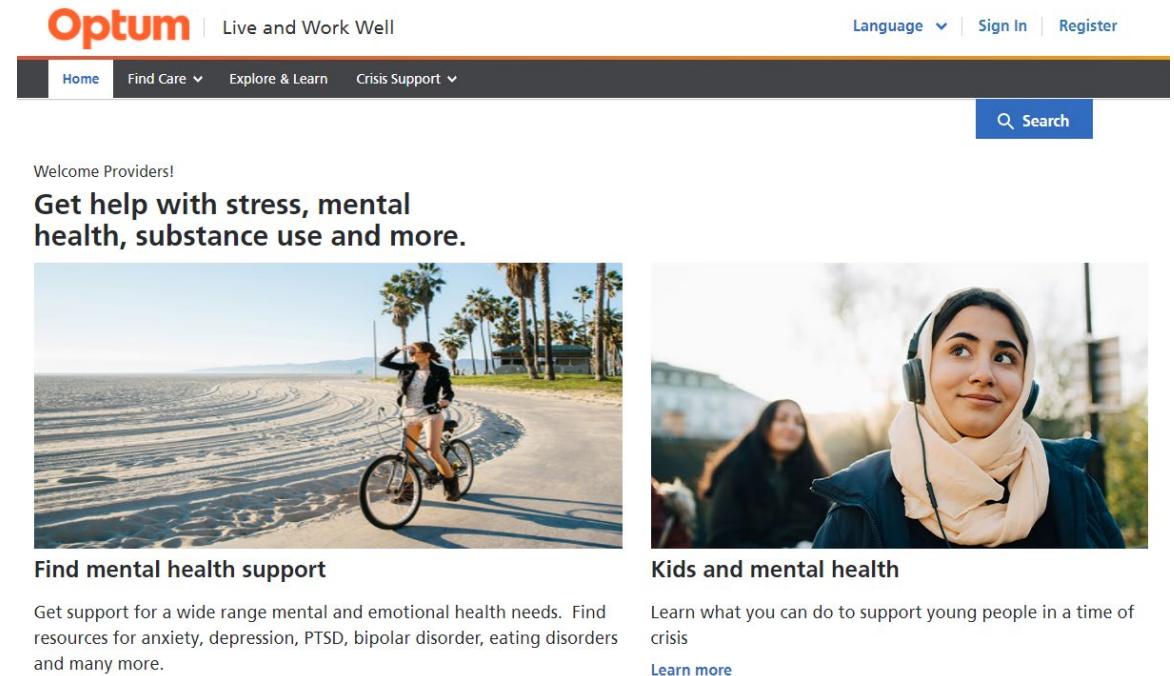
Explore and Learn:

- Offers a wide variety of videos, articles and resources to help you and your clients be informed and act
- Explore therapy and substance use support options
- Learn more about getting help with anxiety, understanding depression and building better relationships

Find information by category:

- Mental Health
- Substance Use & Addiction
- Well-Being
- Caregiving
- Parenting
- Relationships

Clinicians can access this site using guest code **“clinician”**



The screenshot shows the Optum Live and Work Well website. The header includes the Optum logo, the text 'Live and Work Well', and links for 'Language', 'Sign In', and 'Register'. A navigation bar contains 'Home', 'Find Care', 'Explore & Learn', and 'Crisis Support'. A search bar is located on the right. The main content area features a 'Welcome Providers!' message and a headline: 'Get help with stress, mental health, substance use and more.' Below this are two featured articles. The first article, 'Find mental health support', includes a photo of a person on a bicycle and text about resources for anxiety, depression, PTSD, bipolar disorder, and eating disorders. The second article, 'Kids and mental health', includes a photo of a woman wearing a headscarf and headphones, and text about supporting young people in a time of crisis, with a 'Learn more' link.

Member Resource: myuhc.com



ENGLISH ▾

Welcome back
Let's get you signed in again

Easy access to plan information anytime anywhere.
Get the most out of your coverage.

[Sign In >](#) | [Register >](#)



[Find a Provider >](#)

Find a doctor, medical specialist, mental health care provider, hospital or lab.



[Find a Dentist >](#)

Find a local dentist or dental care in your area.



[Find a Vision Provider >](#)

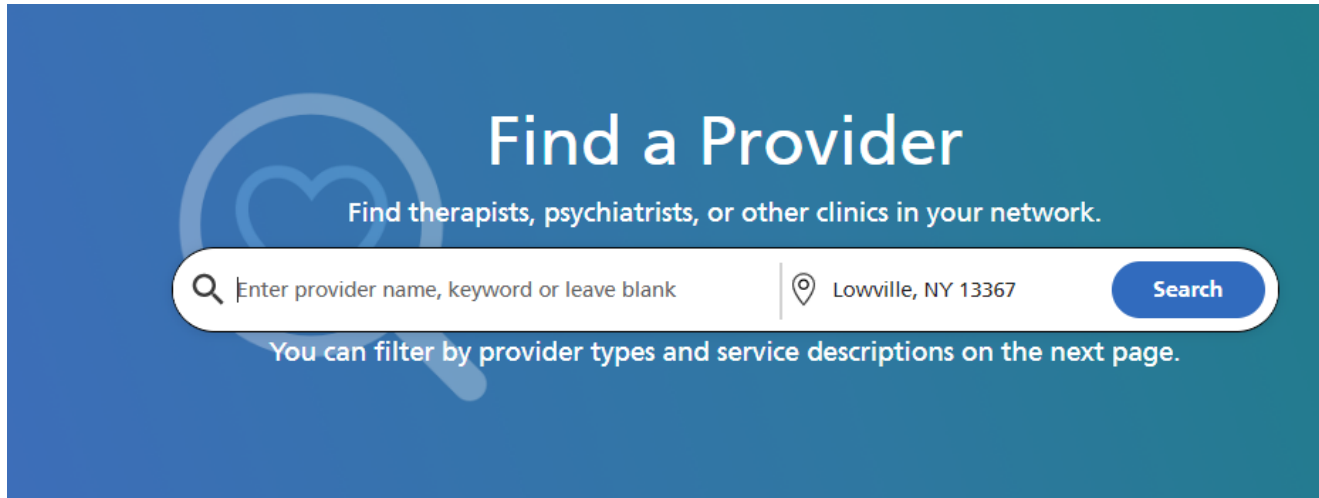
Find a vision provider within a large national network that offers convenience and choice.



[Find a Pharmacy >](#)

Find a local pharmacy that's convenient for you.

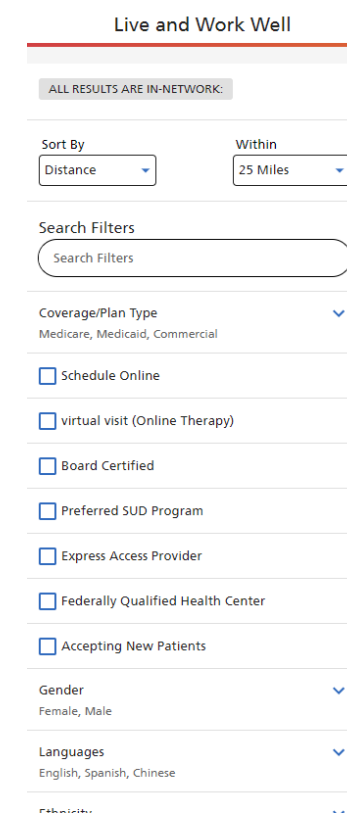
Search for Providers in Your Network Specializing in Mental Health and Substance Use



Find a Provider
Find therapists, psychiatrists, or other clinics in your network.

🔍 Enter provider name, keyword or leave blank | 📍 Lowville, NY 13367 **Search**

You can filter by provider types and service descriptions on the next page.



Live and Work Well

ALL RESULTS ARE IN-NETWORK:

Sort By: Distance | Within: 25 Miles

Search Filters: Search Filters

Coverage/Plan Type: Medicare, Medicaid, Commercial

- Schedule Online
- virtual visit (Online Therapy)
- Board Certified
- Preferred SUD Program
- Express Access Provider
- Federally Qualified Health Center
- Accepting New Patients

Gender: Female, Male

Languages: English, Spanish, Chinese

Ethnicity: ..




provider.liveandworkwell.com/content/laww/providersearch/en/home.html?siteId=1431&lang=1

Training and Educational Resources

Project TEACH (Training and Education for the Advancement of Children's Health)

Support for Primary Care Providers: projectteachny.org/

- Call for consultations today.
- Speak directly to a child and adolescent psychiatrist.
- Enhance the care you provide to kids with mild to moderate mental health concerns
- Set up face to face consultations to meet directly with experts.

 <h3>CONSULTATIONS</h3> <p>Speak to a child and adolescent psychiatrist or a reproductive psychiatrist for consultation about your patients.</p> <p>LEARN MORE</p>	 <h3>REFERRALS</h3> <p>Link your patients to the resources they need in their communities.</p> <p>LEARN MORE</p>	 <h3>EDUCATION</h3> <p>Find training and education on topics relevant to child/adolescent and maternal mental health in your practice.</p> <p>LEARN MORE</p>
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The Center for Practice Innovations (CPI)

practiceinnovations.org/

The Center for Practice Innovations (CPI) supports the New York State Office of Mental Health’s mission to promote the widespread availability of evidence-based practices to improve mental health services, ensure accountability, and promote recovery-oriented outcomes for consumers and families.

The CPI serves as a key resource to OMH by spreading those practices identified by OMH as most critical to accomplish OMH’s system-transformation initiatives.

Training Topics Include:

- Family-Driven and Youth Guided Practice
- Recovery and Resilience for Children and Youth
- Understanding Family Engagement and Best Practices
- Coordination/collaboration Across Child Serving Systems
- Trauma Informed Care in the Child/Adolescent Behavioral Healthcare System



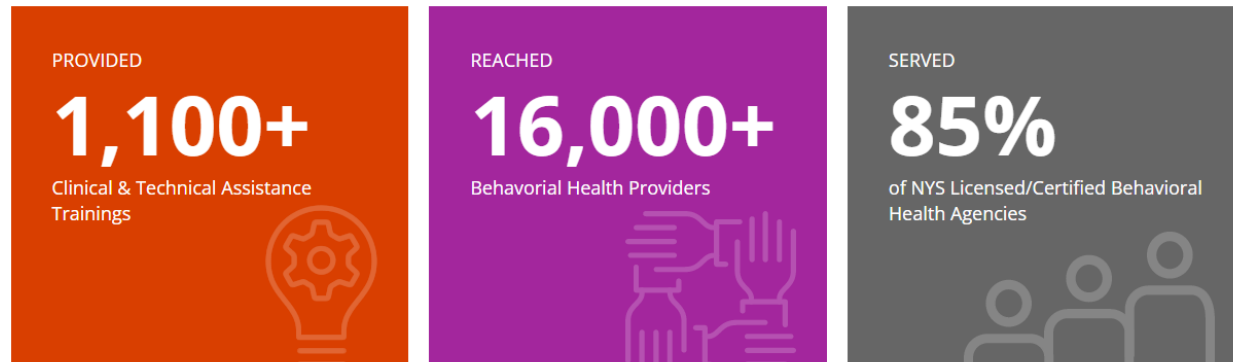
New Users: Enrollment Form for CPI Trainings: cumc.co1.qualtrics.com/jfe/form/SV_7UiDOZnSqJw7hyJ

Community Technical Assistance Center (CTAC) and Managed Care Technical Assistance Center (MCTAC)

- The centers work closely with OMH, OASAS and key strategic partners to provide training and technical assistance to all behavioral health agencies in New York State.
- Providing our community, a centralized location for city, state and federal resources

Our Impact

Since 2011, we have:



- Billing and Coding
- Designation & Staffing (Credentialing)
- General Managed Care
- Services & Workflows
- Additional Training Resources
- And more

ctacny.org/about-us/



Evidence Based Treatment Dissemination Center (EBTDC)

ideas4kidsmentalhealth.org/evidence-based-treatment-dissemination-center.html

- The EBTDC is funded by NYS OMH
- Provides clinical training and consultation on evidence-based treatment protocols to NYS OMH-Licensed Mental Health Professional

Please note: The CTAC and EBTDC trainings available here are only open to staff at public, child-serving agencies/programs licensed by the New York State Office of Mental Health.

[Click here](#) to see if you are an OMH-licensed provider.



If you are a private-practice clinician, please visit the [National Council for Behavioral Health](#) for training and technical assistance.

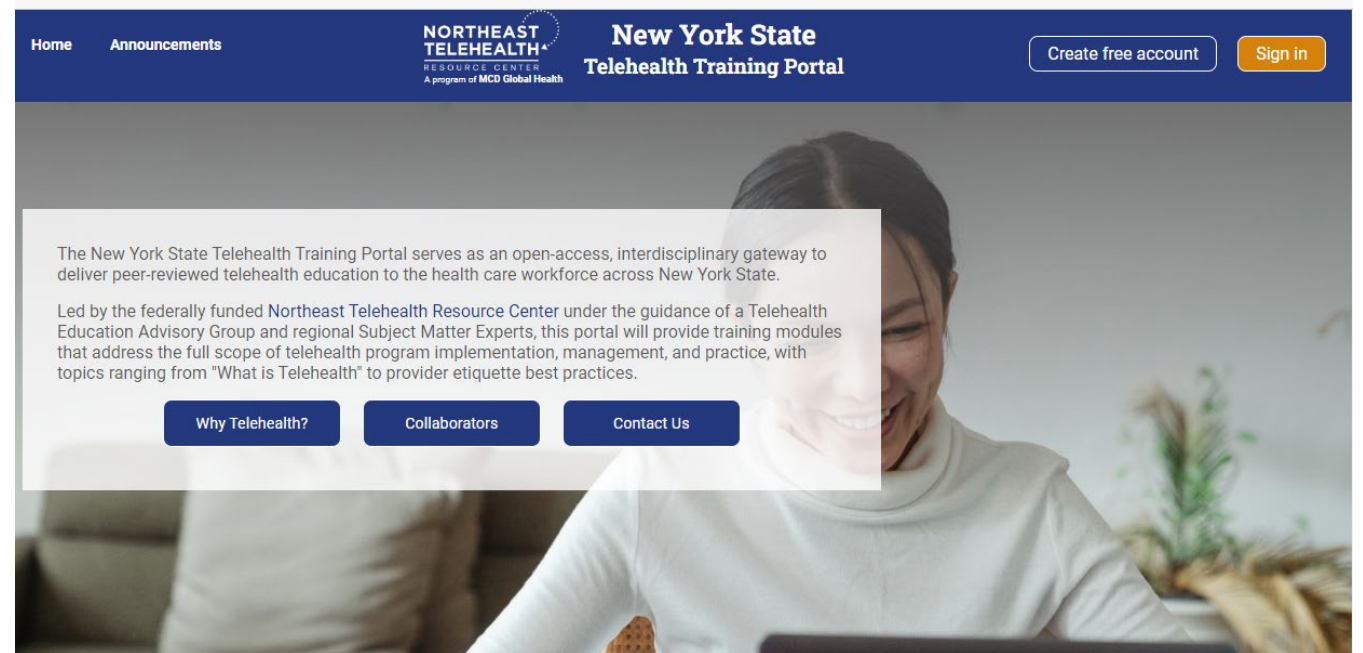
New York State Telehealth Resources

Northeast Telehealth Resource Center New York State Telehealth Training Portal:

nytelehealth.netrc.org/

Includes:

- eLearning Module
- CME and CEUs coming soon
- GNYHA Telehealth Learning Series
- Guidance and Regulatory Updates



Appendix

Additional Resources

Mental Health Outpatient Treatment and Rehabilitative Services (MHOTRS) Rate Codes

omh.ny.gov/omhweb/clinic_restructuring/clinic_rate_codes.html

MHOTRS Rate Codes

Description	Non Hospital*	Hospital
Base Rate	1504	1516
Off-site Base Rate	1507	1519
Health Services (e.g., Health Monitoring, Health Physicals) / Peer Support Services	1474	1588
Crisis Intervention	1579	1576
Intensive Outpatient Program (IOP)	1042	1048
Delivery System Reform Incentive Payment (DSRIP)	1106	1110
Integrated Outpatient Services (IOS)	1480	1122
Integrated Outpatient Services with Intensive Outpatient Services – Off-site	1084	1086
Integrated Outpatient Services (IOS) Off-site	1092	1094
Utilization Threshold Exempt (Court Order / AOT / SIST)	1136	1140

*Non hospital includes Diagnostic & Treatment Center (D&TCs), Local Governmental Unit (LGUs), freestanding Art 31s, and state operated injections may be claimed using either the Health Services rate codes or the Clinic rate codes.

MHOTRS Rate Codes Exempt from Utilization Threshold Counts

Description	Non Hospital*	Hospital
Off-site Base Rate	1507	1519
Health Services (e.g., Health Monitoring, Health Physicals) / Peer Support Services	1474	1588
Crisis Intervention	1579	1576
Intensive Outpatient Program (IOP)	1042	1048
Delivery System Reform Incentive Payment (DSRIP)	1106	1110
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Integrated Outpatient Services (IOS) Off-site	1092	1094
Utilization Threshold Exempt (Court Order / AOT / SIST)	1136	1140

OMH Federally Qualified Health Center (FQHC) Rate Codes

Description	Rate Code
OMH – FQHC	4301
OMH – FQHC Group	4303
OMH – FQHC Offsite	4306

CORE and Other OASAS/OMH Services Allowable Service Combinations

OMH/OASAS Service	CPST	PSR	FST	Peer
OMH Clinic ((including Licensed Behavioral Health Practitioner (LBHP))	Yes ⁷	Yes	Yes	Yes
Certified Community Behavioral Health Clinic (CCBHC) ⁸ - Sites Receiving NYS CCBHC Demonstration Medicaid Rate	Yes ⁷	No	Yes	No
Certified Community Behavioral Health Clinic (CCBHC) Expansion Grant Awardees ⁹ – Sites Not Eligible for NYS CCBHC Demonstration Medicaid Rate	Yes ⁷	Yes	Yes	Yes
OMH Assertive Community Treatment (ACT)	No	No	No	No
OMH Personalized Recovery Oriented Services (PROS)	No	No	No	Yes
OMH Continuing Day Treatment (CDT)	No	Yes	Yes	Yes
OMH Partial Hospitalization	No	Yes	Yes	Yes
OASAS Outpatient / Opioid Treatment Program (OTP)	Yes	Yes	Yes	Yes ¹⁰
OASAS Permanent Supportive Housing (PSH)	Yes	Yes	Yes	Yes
OASAS Residential	Yes	Yes	Yes	Yes
OASAS Outpatient Rehabilitation	Yes	Yes	Yes	Yes ¹⁰
OASAS Inpatient/Outpatient Detox	Yes	Yes	Yes	Yes

CORE and BH HCBS Allowable Service Combinations

BH HCBS	CPST	PSR (rate codes 7784 or 7785)	PSR with Education focus (rate code 7811)	PSR with Employment Focus (rate code 7810)	FST	Peer
BH HCBS Habilitation	Yes	Yes ⁶	Yes	Yes	Yes	Yes
BH HCBS Education Support Services	Yes	Yes	No	Yes	Yes	Yes
BH HCBS Pre-Vocational Services	Yes	Yes	Yes	No	Yes	Yes
BH HCBS Transitional Employment	Yes	Yes	Yes	No	Yes	Yes
BH HCBS Intensive Supported Employment	Yes	Yes	Yes	No	Yes	Yes
BH HCBS Ongoing Supported Employment	Yes	Yes	Yes	No	Yes	Yes

Allowable Billing Combinations of OMH/OASAS State Plan Services and HCBS

HCBS/State Plan Services	OMH Clinic/OLP	OASAS Clinic	OASAS Opioid Treatment Program	OMH ACT	OMH PROS	OMH IPRT/CDT	OMH Partial Hospital*	OASAS Outpatient Rehab
PSR	Yes	Yes	Yes				Yes	
CPST							Yes	
Habilitation	Yes	Yes	Yes		Yes	Yes	Yes	Yes
Family Support and Training	Yes	Yes	Yes			Yes	Yes	Yes
Education Support Services	Yes	Yes	Yes		Yes	Yes	Yes	Yes
Peer Support Services	Yes	Yes	Yes		Yes	Yes	Yes	Yes
Employment Services	Yes	Yes	Yes			Yes	Yes	Yes

CORE Services and Rate Codes

Service	Rate Code(s)	Recommended Daily Unit Range	Minutes Conversion
Community Psychiatric Support and Treatment	7790, 7791, 7792, 7793	1-6	15-90 min.
Psychosocial Rehabilitation (Individual) ¹⁸	7784, 7785, 7810, 7811	1-12	15-180 min.
Psychosocial Rehabilitation (Group)	7786, 7787, 7788	1-4	15-60 min.
Family Support and Training (Individual)	7799	1-12	15-180 min.
Family Support and Training (Group)	7800	1-6	15-90 min.
Empowerment Services - Peer Support	7794	1-16	15-240 min.

¹⁸1:1 PSR services may be delivered in any combination on a single day, including PSR with an Employment Focus and PSR with an Educational Focus, up to a total of 12 units per day. The range may be exceeded as appropriate, as outlined above.

NY OASAS Billing Guidance and Resources

Outpatient Services: oasas.ny.gov/reimbursement/ambulatory-providers

Opioid Treatment Programs: oasas.ny.gov/reimbursement/ambulatory-providers

Inpatient Residential: oasas.ny.gov/reimbursement/non-ambulatory

Withdrawal and Stabilization: oasas.ny.gov/reimbursement/non-ambulatory

State Inpatient Addiction Treatment Centers: oasas.ny.gov/system/files/documents/2020/06/atcs.xlsx

Article 32 Inpatient Withdrawal Rates: oasas.ny.gov/system/files/documents/2020/06/detox-freestanding-rates_0.xlsx

Medication Billing

Vivitrol: oasas.ny.gov/system/files/documents/2019/10/Vivitoral%20Billing.xlsx

Buprenorphine Billing: oasas.ny.gov/system/files/documents/2021/01/buprenorphine-billing.xlsx

Medication Management: oasas.ny.gov/system/files/documents/2019/10/2019.10.17-guidance-memo-on-billing-for-medication-mgmt-for-co-occurring-disorders.pdf

NYS OMH, OCFS, and DOH Medicaid Rates

NYS OMH Link: omh.ny.gov/omhweb/medicaid_reimbursement/

Behavioral Health Billing: omh.ny.gov/omhweb/bho/billing-services.html

NYSDOH Link to CFTSS Medicaid Rates: health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/proposed_spa.htm

NYS 29-I Health Facility Rates and Billing Guidance:
health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/vol_foster_trans.htm

Billing for Dual Eligible Enrollees Guidance

Billing for Dual Eligible Enrollees OMH Guidance: omh.ny.gov/omhweb/bho/policy-guidance/billing_for_dual_eligible_enrollees.pdf

Duals Reimbursement in Medicaid Managed Care: health.ny.gov/health_care/managed_care/plans/docs/2021-12-01_duals_reimbursement_mmc.pdf

FAQs on Duals Billing: omh.ny.gov/omhweb/bho/docs/duals-billing-faq.pdf

Medicaid Advantage Plus (MAP) Billing Guidance: omh.ny.gov/omhweb/bho/map-bh-billing-and-coding-manual.pdf

MAP Coding Taxonomy for BH Services: omh.ny.gov/omhweb/bho/map-coding-taxonomy-for-bh-services.xlsx

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