

Update June 2018

No. 2018-20

Affected Programs: BadgerCare Plus, Medicaid

To: Adult Mental Health Day Treatment Providers, Advanced Practice Nurse Prescribers With Psychiatric Specialty, Community Health Centers, Hospital Providers, Master's Level Psychotherapists, Narcotic Treatment Services Providers, Nurse Practitioners, Nurses in Independent Practice, Outpatient Mental Health Clinics, Outpatient Substance Abuse Clinics, Physician Assistants, Physician Clinics, Physicians, Psychiatrists, Psychologists, Qualified Treatment Trainees, Substance Abuse Counselors, Substance Abuse Day Treatment Providers, Tribal Federally Qualified Health Centers, HMOs and Other Managed Care Programs

Certification and Service Provision for Opioid Treatment Programs

In response to Wisconsin's opioid crisis, the Wisconsin Department of Health Services (DHS) is committed to expanding access to evidence-based medication-assisted treatment and substance use disorder counseling across the state. The goal is to integrate medication-assisted treatment into the various settings where members receive services, including behavioral health clinics, community health centers, tribal federally qualified health centers, and primary care settings as well as free-standing opioid treatment programs. Wisconsin Medicaid supports the delivery of medication-assisted treatment and substance use disorder counseling in each of these settings.

This *ForwardHealth Update* provides guidance on the steps involved with becoming certified as an opioid treatment program (OTP), also known as narcotic treatment services (NTS) or a narcotic treatment program. It also provides information regarding covered services, program highlights, claim submission, and managed



Figure 1. Process to Become a Wisconsin Opioid Treatment Program

care for BadgerCare Plus and Medicaid members.

Background

In 2017, 883 people in Wisconsin died from opioid overdoses, more than the number killed in car crashes. Over the last decade, the rate of opioid deaths in the state has almost doubled from 5.9 deaths/100,000 residents in 2006 to 10.7 deaths/100,000 in 2015. Prescription opioids have been the main driver of drug overdose deaths and poisonings. In 2015, the majority of opioid-related deaths in Wisconsin (63 percent) involved prescription drugs.¹ Prescription opioid use is often a gateway to heroin use; three out of four people who use heroin first use prescription opioids.² Consequently, heroin-related deaths and hospital encounters have increased dramatically in recent years due to heroin's low cost, easy access, and high potency.

Medication-assisted treatment is the use of Food and Drug Administration (FDA)-approved medications, in combination with counseling and behavioral therapies, to provide a "whole patient" approach to the treatment of substance use disorders. Three medications are commonly used to treat opioid use disorder: methadone, naltrexone, and buprenorphine. The choice of medication is dependent upon the specific needs of the individual. Medication-assisted treatment has proved to be clinically effective and to significantly reduce the need for inpatient withdrawal management services for individuals with opioid use disorder. It provides a comprehensive, individually tailored program of medication and behavioral therapy and includes support services that address the needs of most patients.

The ultimate goal of medication-assisted treatment is recovery, including the ability to live a self-directed life. This treatment approach has been shown to:

- Improve patient survival.
- Increase retention in treatment.
- Decrease illicit opioid use and other criminal activity among people with substance use disorders.
- Increase patients' ability to gain and maintain employment.
- Improve birth outcomes among women who have substance use disorders and are pregnant.

Research also shows that these medications and therapies can contribute to lowering a person's risk of contracting HIV or hepatitis C by reducing the potential for relapse.

OTPs provide medication-assisted treatment for individuals diagnosed with opioid use disorder. Under federal law, only certified OTPs may dispense methadone to treat individuals with opioid use disorder. As such, OTPs are an integral component of the opioid use disorder treatment delivery system. OTPs provide a range of services to reduce, eliminate, or prevent the use of illicit drugs, potential criminal activity, and the spread of infectious disease. OTPs focus on the quality of life of those receiving treatment. Program requirements for OTPs are found in Wis. Admin. Code §§ DHS 75.15 and 75.03.

Certification, Registration, and Enrollment

Certification as an OTP and oversight of treatment medications used in medication-assisted treatment involves multiple state and federal entities.

The federal entities through which OTPs receive certification and registration include the following:

- Substance Abuse and Mental Health Services Administration (SAMHSA)
- Drug Enforcement Agency (DEA)

The state entities through which OTPs (also known as NTS agencies) receive certification and enrollment include the following:

- State Opioid Treatment Authority (SOTA)
- Division of Quality Assurance (DQA)
- Wisconsin Medicaid

Certification and registration through the various federal and state agencies may be pursued concurrently. Refer to the Attachment of this *Update* for a visual depiction of the process by which OTP may become certified.

Certification Through SAMHSA

An OTP is certified by the federal SAMHSA to administer and dispense approved medications to treat opioid use disorder. To become certified, an OTP must successfully complete the certification and accreditation process and meet other requirements outlined in 42 C.F.R. Part 8. A program may apply to SAMHSA for provisional (initial) certification while it is working towards accreditation with a SAMHSAapproved accrediting body. Provisional certification is temporary, lasting for only one year. An OTP must become accredited during this one-year timeframe.

A program may also seek provisional certification while it works to gain state and DEA approvals. The Wisconsin SOTA provides final service approval to SAMHSA once the DEA and DQA approve an OTP provider.

For full instructions on applying for provisional OTP certification through SAMHSA's Division of Pharmacologic Therapies, refer to *https://www.samhsa.gov/medication-assisted-treatment/opioid-treatment-programs/apply/*.

Registration Through DEA

Providers wishing to administer and dispense methadone for maintenance and withdrawal management are required to obtain a separate DEA registration as a narcotic treatment program. Application for registration as a narcotic treatment program is made using DEA Form 363.

Providers can find additional information regarding addiction treatment and access DEA Form 363 by visiting DEA's Diversion Control Division website at *www.DEAdiversion.usdoj.gov/*.

Approval From SOTA

In Wisconsin, the SOTA is part of the DHS Division of Care and Treatment Services (DCTS). Along with DQA, the SOTA approves and oversees operation of OTPs.

In addition to DQA certification and enrollment in Wisconsin Medicaid as an NTS agency, agencies applying for approval to operate an OTP with the intent to use medication-assisted treatment are required to submit all of the following to the SOTA, per Wis. Admin. Code § DHS 75.15(20)(a)1–9:

- Copies of all completed designated federal agency applications
- A copy of the request for registration with the DEA for the use of narcotic medications in the treatment of opiate addiction
- A narrative description of the treatment services that will be provided in addition to pharmacotherapy
- Documentation of the need for the service
- Criteria for admitting a patient
- A copy of the policy and procedures manual for the service, detailing the operation of the service as follows:
 - \checkmark A description of the intake process
 - \checkmark A description of the treatment process
 - ✓ A description of the expectations the service has for a patient
 - ✓ Descriptions of any service privileges or sanctions
 - ✓ A description of the service's use of testing or analysis to detect substances and the purposes for which the results of testing or analysis are used as well as the frequency of use
- Documentation that there are adequate physical facilities to provide all necessary services
- Documentation that the service will have ready access to a comprehensive range of medical and rehabilitative services that will be available if needed
- The name, address, and a description of each hospital, institution, clinical laboratory, or other facility available to provide the necessary services
- A list of persons working in the service who are licensed to administer or dispense narcotic drugs even if they are not responsible for administering or dispensing narcotic drugs

Only service sites approved by SAMHSA, DQA, DEA, and SOTA may be used for treating persons with opioid use disorder with a narcotic drug.

Certification Through DQA

In Wisconsin, the DQA within DHS certifies and oversees operation of OTPs (known as NTS) along with the SOTA. To apply for certification, providers are encouraged to visit *mnm.dhs.wisconsin.gov/regulations/aoda/treatment-opiates.htm*. This webpage includes forms, fees, and process information necessary for completing an application. The following forms are required for DQA certification as an OTP:

- Community Substance Abuse Services (CSAS) or Mental Health Clinic Initial Certification Application, F-62504 (04/2014)
- Community Substance Abuse Services (CSAS) Narcotic Treatment Service for Opiate Addiction Initial Certification Application – Chapter DHS 75.15, F-00538 (11/11)
- Community Substance Abuse Services (CSAS) Outpatient Treatment Service Initial Certification Application – Chapter DHS 75.13, F-00544 (12/11)
- Community Substance Abuse Services (CSAS) General Requirements Initial Certification Application – Chapter DHS 75.03, F-00523 (07/2012)
- Community Substance Abuse Service (CSAS) Verification of Criteria (Clinical Supervisor, Medical Director, Physician, or Service Physician) – Chapter DHS 75.02 (11), F-00438 (07/11)
- Behavioral Health Services Initial Certification Application – DHS 94 Patient Rights and Resolution of Patient Grievances, F-00273 (03/2013)

A caregiver background check is required to be completed for all applicants/legal representatives prior to the approval of any new license, certification, or registration of a DQA regulated entity.

Once an agency submits a completed application for certification, DQA will review the application and will conduct an on-site survey. DQA will either approve or deny the application within 45 days of receiving the completed application. If the application is denied, DQA will give reasons for the denial in writing and will inform the agency of the right to appeal the decision. For more information on these requirements or to begin the application process, contact:

DHS/Division of Quality Assurance Behavioral Health Certification Section PO Box 2969 Madison WI 53701-2969 **Telephone:** 608-261-0656 **Fax:** 608-261-0655 **Email:** DHSDQAMentalHealthAODA@dbs.wisconsin.gov

Final Approval From SOTA

Once DEA registration and DQA certification have been obtained, the SOTA will submit final approval to SAMHSA indicating that all requirements for state OTP certification have been met.

Enrollment in Wisconsin Medicaid

Provider enrollment in Wisconsin Medicaid is required for OTPs to provide services to BadgerCare Plus and Medicaid members. Additional information for provider enrollment may be accessed by clicking the Become a Provider link on the ForwardHealth Portal home page at *nnm.forwardhealth.ni.gov/WIPortal/*. The Information for Specific Provider Types page provides enrollment information specific to Narcotic Treatment Services.

Agencies

For the purposes of Wisconsin Medicaid enrollment, OTPs are considered NTS agencies. To enroll as an NTS agency, the agency is required to:

- Have DQA certification on file as an NTS agency for opioid use disorder, per Wis. Admin Code § DHS 75.15 and separate certification as an outpatient substance abuse clinic, per Wis. Admin Code § DHS 75.13.
- Complete a Mental Health/Substance Abuse enrollment application with a Narcotic Treatment specialty type.

To apply for Medicaid provider enrollment for an OTP agency, the agency should follow these steps:

1. Access the Portal at *www.forwardhealth.wi.gov/*.

- Click Become a Provider, found in the Providers quick link box.
- Click Start or Continue Your Enrollment Application on the upper left side of the Provider Enrollment Information home page.
- Click Medicaid/Border Status Provider Enrollment Application in the To Start a New Medicaid Enrollment box.
- 5. Click **Next** after reading the instructions.
- Navigate through the enrollment wizard, entering or selecting applicable information and clicking Next to advance.
- On the Provider Type panel, select Mental Health/Substance Abuse Clinics (includes Crisis/CSP/CCS).
- On the Provider Specialty panel, select Narcotic Treatment Services.
- 9. Continue through the enrollment wizard panels to completion.

Agencies have a "billing only" category of enrollment. There is no application fee for this provider type.

Individual Providers

All individuals providing services in an NTS agency are required to be Medicaid enrolled individually and have rendering provider numbers. The following apply to individuals providing services in NTS agencies:

- Registered nurses (RNs) and licensed practical nurses (LPNs) — RNs and LPNs are required to obtain Medicaid enrollment specific to narcotic treatment only.
- Other providers Substance abuse counselors, psychotherapists, physicians, and physician assistants are required to be Medicaid-enrolled, but are **not** required to obtain separate enrollment for narcotic treatment.

Individuals have a "rendering only" category of enrollment. There is no application fee for this provider type.

Notice of Enrollment Decision

Wisconsin Medicaid will notify the provider of the status of the enrollment usually within 10 business days, but no longer than 60 days, after receipt of the complete enrollment application. Wisconsin Medicaid will either approve the application and enroll the provider or deny the application. If the enrollment application is denied, Wisconsin Medicaid will give the applicant reasons, in writing, for the denial.

Providers who meet the enrollment requirements are sent a welcome letter and a copy of the provider agreement. Included with the letter is an attachment with important information, such as effective dates and the assigned provider type and specialty. This information is used when conducting business with Wisconsin Medicaid.

Effective Date

The initial effective date of a provider's enrollment will be based on the date Wisconsin Medicaid receives the complete and accurate enrollment application materials. An application is considered complete when all required information has been accurately submitted and all supplemental documents have been received by Wisconsin Medicaid. The date the applicant submits their online provider enrollment application to Wisconsin Medicaid is the earliest effective date possible and will be the effective date if both of the following are true:

- The applicant meets all applicable screening requirements, licensure, certification, authorization, or other credential requirements as a prerequisite for Wisconsin Medicaid on the date of submission.
- Supplemental documents required by Wisconsin Medicaid that were not uploaded as part of the enrollment process are received by Wisconsin Medicaid within 30 calendar days of the date the enrollment application was submitted. To avoid a delay of the enrollment effective date, providers are encouraged to upload documents during the enrollment process.

If Wisconsin Medicaid receives any applicable supplemental documents more than 30 calendar days after the provider submits the enrollment application, the provider's effective date will be the date all supplemental documents are received by Wisconsin Medicaid.

Additional Considerations for Becoming an OTP

In addition to obtaining certification, new agencies may need to take the following into consideration:

- Physical location Agencies planning to either build or purchase a facility may need to allow additional time to address municipal zoning rules, apply for special use permits, and seek community engagement on a proposed site.
- Timeframes At the time they submit an application for DQA certification as an OTP, an agency should be ready to begin providing services; the agency should not apply before staffing, facility, procedures, and other key elements are in place. The DQA will accept or deny an application within 45 days of receiving a completed application.
- Required staff Staff must be hired and named as part of the certification process. A best practice is to have primary staff who have experience in operating an OTP; in other words, they are familiar with the policies and procedures germane to running an agency offering medication-assisted treatment.
- Clinical Laboratory Improvement Amendment (CLIA) requirements — OTPs must comply with specific federal quality standards for laboratories.

Staffing Requirements

ForwardHealth requires OTPs to comply with the following staffing requirements, per Wis. Admin Code § DHS 75.15(4):

- Designate a physician licensed under Wis. Stat. ch. 448 as its medical director. The physician shall be readily accessible and able to respond in person in a reasonable period of time, not to exceed 45 minutes.
- Have an RN on staff and on site to supervise the dosing process and perform other functions delegated by the physician.
- Employ nursing assistants and related medical ancillary personnel to perform functions permitted under state medical and nursing practice statutes and administrative rules.
- Employ substance abuse counselors, substance abuse counselors-in training, or clinical substance abuse

counselors who are under the supervision of a clinical supervisor on a ratio of at least one to 50 patients in the service or fraction thereof.

 Provide supervision and performance evaluation of substance abuse counselors in the areas identified in Wis. Admin. Code § SPS 162.01(5) and ch. DHS 75.

Clinical Laboratory Improvement Amendment Requirements

The federal government implemented the CLIA to improve the quality and safety of laboratory services. CLIA requires **all** laboratories and providers that perform tests (including waived tests) for health assessment or for the diagnosis, prevention, or treatment of disease or health impairment to comply with specific federal quality standards. This requirement applies even if only a single test is being performed.

ForwardHealth complies with the following federal regulations as initially published and subsequently updated:

- Public Health Service Clinical Laboratory Improvement Amendments of 1988
- 42 C.F.R. Part 493, Laboratory Requirements

For more information about CLIA scope, enrollment, and certification, refer to the CLIA Certification or Waiver topic (topic #899) of the Provider Enrollment chapter of the Provider Enrollment and Ongoing Responsibilities section of the ForwardHealth Online Handbook. For additional information about CLIA, providers may refer to the Clinical Laboratories page of the DHS website at *https://www.dbs.wisconsin.gov/regulations/labs/introduction.htm.*

Service Provision

Covered Services

BadgerCare Plus and Medicaid cover the following components of medication-assisted treatment, but reimbursement for each component is administered under a unique benefit and the components are required to be submitted on separate claims:

- Narcotic treatment services Narcotic treatmentrelated medical services are reimbursed under the NTS benefit.
- Substance abuse counseling Substance abuse counseling services are reimbursed under the outpatient substance abuse benefit.
- Medication Medication is reimbursed under the pharmacy benefit.

Narcotic Treatment Services

Narcotic treatment services (also known as OTP services) may include, but are not limited to:

- Performing an assessment of the member's current physiological or psychological dependence, length of history of addiction, medical history, and physical examination prior to administering the first dose of methadone or an FDA-approved narcotic.
- Providing urine drug screens; however, urine drug screens in excess of 40 per year will be allowed only if medically necessary for narcotic treatment and if the need is specifically indicated in the member's treatment plan.
- Screening for tuberculosis, viral hepatitis, and sexually transmitted diseases upon admission and annually, providing appropriate follow-up treatment as needed.
- Prescribing and administering narcotics with dosage and frequency for take-home medications and ensuring that justification for reducing the frequency of service visits for observed drug ingesting is met.

For more inclusive lists of services covered under the NTS benefit, refer to Wis. Admin Code §§ 75.15(1), 75.02(54), and 75.02(90).

The following are allowable procedure codes for narcotic treatment services:

- H0001 (Alcohol and/or drug assessment)
- H0003 (Alcohol and/or drug screening; laboratory analysis of specimens for presence of alcohol and/or drugs)

- H0020 (Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program)
- 86580 (Skin test; tuberculosis, intradermal)
- 99001 (Handling and/or conveyance of specimen for transfer from the patient in other than an office to a laboratory [distance may be indicated])

For more detailed information about allowable narcotic treatment service procedure codes and modifiers, refer to the Procedure Codes topic (topic #7984) of the Codes chapter of the Covered and Noncovered Services section of the Narcotic Treatment service area of the Online Handbook. For more information about laboratory testing, refer to the Testing for Drugs of Abuse topic (topic #17959) in the Covered Services and Requirements chapter of the Covered and Noncovered Services section of the Laboratory/ Pathology service area of the Online Handbook.

Outpatient Substance Abuse Services

Outpatient substance abuse treatment services are provided to address negative symptoms from substance abuse and to restore effective functioning in persons with substance abuse dependency or addiction. When medically necessary, these services may include:

- Individual substance abuse counseling
- Assessment
- Family counseling
- Group counseling

For more detailed information about allowable outpatient substance abuse procedure codes and modifiers, refer to the Procedure Codes topic (topic #5807) of the Codes chapter of the Covered and Noncovered Services section of the Outpatient Substance Abuse service area of the Online Handbook.

Pharmacy Services

Narcotic drugs provided as part of medication-assisted treatment are covered fee-for-service as a pharmacy benefit using the NTS's billing provider number. The following applies to medication-assisted treatment provided as a pharmacy benefit:

- Wisconsin Medicaid reimburses only one dispensing fee per month, per member, regardless of the provider.
- NTS providers are required to indicate the appropriate National Drug Code (NDC) of the product being dispensed on any claim submitted.
- Providers are required to submit claims on the Noncompound Drug Claim form, F-13072 (04/2017)

For more detailed information, refer to the following resources:

- The Opioid Dependency Agents topic (topic #8917) in the Preferred Drug List chapter of the Prior Authorization section of the Pharmacy service area of the Online Handbook.
- The Preferred Drug List Quick Reference on the Pharmacy Resources page of the Providers area of the Portal
- The Diagnosis Restricted Drugs data table on the Pharmacy Resources page of the Providers area of the Portal

Member Admission Criteria

Members admitted to an NTS agency for opioid use disorder must meet the following admission criteria under Wis. Admin. Code § DHS 75.15(5)(a)1–4:

- The person is physiologically and psychologically dependent upon a narcotic drug that may be a synthetic narcotic.
- The person has been physiologically and psychologically dependent upon the narcotic drug not less than one year before admission.
- In instances where the presenting drug history is inadequate to substantiate such a diagnosis, the material submitted by other health care professionals indicates a high degree of probability of such a diagnosis, based on further evaluation.
- When the person receives health care services from outside the NTS, the person has provided names, addresses, and written consents for release of information from each health care provider to allow the

NTS to contact the providers, and agrees to update releases if changes occur.

Enrollment Verification

Providers should always verify a member's enrollment before providing services, both to determine enrollment for the current date (since a member's enrollment status may change) and to discover any limitations to the member's coverage.

Documentation

All narcotic treatment services must be documented in accordance with Wis. Admin. Code ch. DHS 75 and DHS § 106.02(9). In addition, providers can refer to the Documentation chapter of the Provider Enrollment and Ongoing Responsibilities area of the Narcotic Treatment service area of the Online Handbook for more information.

The provider is required to be able to produce documentation upon request from DHS, single audit firms, or federal auditors.

Claim Submission

Providers are required to submit separate claims for the following components of OTP:

- For methadone or other FDA-approved opioid dependency drugs covered under the pharmacy benefit, submit claims using the National Provider Identifier (NPI) of the NTS billing provider using the Noncompound Drug Claim form.
- For covered narcotic treatment services, submit claims using the NPI of the NTS billing provider. These services must be billed using the professional claim format.
- For outpatient substance abuse counseling services, submit claims using the NPI of the outpatient substance abuse clinic billing provider. The services must be billed using the professional claim format.

Note: The provider is responsible for the accuracy, truthfulness, and completeness of all claims submitted,

whether prepared or submitted by the provider or by an outside billing service or clearinghouse.

Pharmacy Claims

The following apply to submission of pharmacy claims for methadone or other FDA-approved drugs used for an OTP service:

- Dispensing Fees One dispensing fee per month is covered per member for methadone or other FDAapproved narcotics, regardless of the provider.
- Claims When submitting claims for methadone or other FDA-approved narcotics, an NTS provider is required to:
 - ✓ Indicate the appropriate NDC of the drug product being administered or dispensed to the member. (*Note:* Only one NDC may be submitted per claim.)
 - Submit the actual quantity dispensed or administered and the correct days' supply on claims for medication dispensed or administered to the member. Claims submitted with incorrect quantities or days' supply are subject to audit and recoupment.

Providers may submit pharmacy claims using one of the following methods:

- National Council for Prescription Drug Programs D.0 Telecommunication Standard for Retail Pharmacy Claims — Providers may refer to the ForwardHealth Payer Sheet: National Council for Prescription Drug Programs (NCPDP) Version D.0, P-00272 (01/2018), on the Portal for more information.
- Direct Data Entry (DDE) on the Portal DDE is an online application that allows providers to submit claims directly to ForwardHealth.
- Noncompound Drug Claim form Paper claims are processed through the pharmacy system but do not furnish a real-time claim response and are subject to a \$1.10 reimbursement reduction per claim.
- Provider Electronic Solutions (PES) software Providers may download PES software from the Trading Partner area of the Portal.

Professional Claims

When submitting claims for covered OTP services, agencies should submit the following:

- NTS billing provider's NPI
- Medicaid-enrolled rendering provider's NPI
- Appropriate NTS procedure codes and modifiers

When submitting claims for substance abuse counseling, agencies should submit the following:

- Separately enrolled outpatient substance abuse clinic billing provider's NPI
- Medicaid-enrolled rendering provider's NPI
- Appropriate procedure codes and modifiers
- Usual and customary charge for the services provided

Professional claims may be submitted using one of the following methods:

- 837 Health Care Claim: Professional (837P) transaction

 Providers may refer to the ForwardHealth
 Instructions Related to 837 Health Care Claim:
 Professional (837P) Transaction Based on ASC X12
 Implementation Guide, P-00265 (04/2017), on the
 Portal for more information.
- DDE on the ForwardHealth Portal for professional claims — DDE is an online application that allows providers to submit claims directly to ForwardHealth.
- 1500 Health Insurance Claim Form Paper claims are subject up to a \$1.10 reimbursement reduction per claim.
- PES software Providers may download PES software from the Trading Partner area of the Portal.

Note: Providers are not allowed to submit claims for OTP services across separate calendar weeks on a single detail. ForwardHealth considers a calendar week to span from Sunday through Saturday. In addition, providers should indicate only the dates on which a service was actually performed.

Managed Care for BadgerCare Plus and Medicaid Members

ForwardHealth contracts with Medicaid and BadgerCare Plus HMOs and Medicaid SSI HMOs to provide all medically necessary covered services, including OTP and outpatient substance abuse services. HMOs in turn contract with individual providers. These providers are required to also be enrolled with Wisconsin Medicaid before rendering services to members. In addition to Medicaid enrollment, HMOs are able to credential individual providers according to their own chosen criteria.

With regard to OTP policies and procedures, HMOs:

- May develop their own PA requirements.
- May have claim requirements that differ from fee-forservice; however, their claim edits cannot be more restrictive than fee-for-service.
- Should ensure NTS providers indicate ForwardHealth modifiers on HMO claims.
- Should ensure NTS providers verify HMO enrollment and submit professional claims to the HMO.

Note: Pharmacy services are covered under Medicaid fee-forservice, meaning they are "carved out" of managed care contracts. For additional information, refer to the Pharmacy service area of the Online Handbook.

For More Information

SAMHSA Certification

Webpage: https://www.samhsa.gov/medication-assistedtreatment/opioid-treatment-programs/apply/

DEA Registration

Webpage: https://www.deadiversion.usdoj.gov/pubs/manuals/ narcotic/index.html

SOTA Approval

Telephone: 608-267-7707 **Email:** *Elizabeth.Collier@dhs.wisconsin.gov* **Address:**

> Elizabeth Collier Department of Health Services 1 W Wilson St Rm 850 Madison WI 53703

DQA/DHS Certification

Telephone: 608-261-0656 Fax: 608-261-0655 Email: DHSDQAMentalHealthAODA@dhs.wisconsin.gov Webpage: https://www.dhs.wisconsin.gov/regulations/aoda/ treatment-opiates.htm Address: DHS/Division of Quality Assurance Behavioral Health Certification Section PO Box 2969

Madison WI 53701-2969

Wisconsin Medicaid Enrollment

Webpage: https://www.forwardhealth.wi.gov/WIPortal/ Subsystem/Certification/EnrollmentCriteria.aspx

Wisconsin Administrative Code References

Webpage: http://docs.legis.wisconsin.gov/code/admin_code/dhs/
Codes:
Wis. Admin. Code ch. DHS 75 — Community
Substance Abuse Service Standards
Wis. Admin. Code ch. DHS 105 — Provider
Certification
Wis. Admin. Code § DHS 106.02(9) — Medical and
Financial Recordkeeping and Documentation

Code of Federal Regulations References

Webpage: https://www.gpo.gov/fdsys/pkg/CFR-2007-title42vol1/pdf/CFR-2007-title42-vol1-part8.pdf Code:

42 C.F.R. Part 8 — Public Health; Medication Assisted Treatment for Opioid Use Disorders

ForwardHealth Online Handbook

Webpage: https://www.forwardhealth.wi.gov/WIPortal/ Subsystem/KW/Display.aspx

ForwardHealth Provider Services Call Center

Telephone: 800-947-9627

Available Monday through Friday, 7:00 a.m.-6:00 p.m. CST

 Wisconsin Department of Health Services. 2017. Select Opioid-Related Morbidity and Mortality Data for Wisconsin. P-01690.

https://www.dhs.wisconsin.gov/publications/p01690.pdf.

² Centers for Disease Control and Prevention. 2016. Understanding the Epidemic: Heroin Use. http://www.cdc.gov/drugoverdose/epidemic/index.html.

The *ForwardHealth Update* is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services, the Wisconsin Department of Health Services (DHS). The Wisconsin AIDS Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health, DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at *www.forwardhealth.wi.gov/*.

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ATTACHMENT Process to Become a Wisconsin Opioid Treatment Program

The following visual depicts the overall steps in the application process to become a certified opioid treatment program (OTP) in Wisconsin.

