



Please Read Immediately
Addendum # 3
Outpatient Treatment Services

1. This addendum is issued as supplemental information to the RFP for clarification, correction, and/or additional information that will be of use to applicants.

This addendum includes Questions and Answers that arose from **Addendum 2- Outpatient Treatment Services Questions and Answers** that was posted on the Department of Behavioral Wellness website on April 12, 2018.

Please see the Questions and Answers below:

1) Question: Is the \$33.81 rate for Outpatient services for 15 minutes increments or per hour?

Answer: The \$33.81 rate for Outpatient services is for 15 minutes increments.

2) Question: Would a 90-minute group be billed at the rate of \$33.81 x 6 (units of 15 minutes each) for a total of \$202.86 and does that include documentation time or would the agency bill 7 units of 15 minutes each for a 90-minute group (\$236.67)?

Answer: Yes, assuming the CBO's cost per unit meets or exceed the county maximum then they can be reimbursed \$202.86 for a group session. Plus, they can bill the time needed for documentation, such that if the counselor spends an additional 15 minutes on documentation then the total reimbursable amount is \$236.67.

3) Question: Does the Residential 90 day limit apply to Outpatient Services as well?

Answer: No, there is no 90 day limit on outpatient. Outpatient treatment lasts as long as medically necessary.

4) Question: Can you please let me know what this service below is, that reimburses \$141.39 for 15 minutes of Additional Medication Assisted Treatment?

| Service Modality (funded by DMC) | Billing/ Unit of Service (minutes, day, hour) | Proposed Interim Rate per Unit of Service |
|--|---|---|
| Additional Medication Assisted Treatment | 15 minute increments | \$ 141.39 |

Answer:

Please refer to numbers 136 and 137 in the STC's, also copied below.

DMC-ODS Required MAT includes:

- Narcotic Treatment Program (NTP) Services
- Access to buprenorphine, naloxone, disulfiram, and methadone in an NTP setting with rates set by DHCS

DMC-ODS Optional Additional MAT includes:

- FDA approved medications (any DMC setting)
- Ordering, prescribing, administering, and monitoring of MAT
- Utilization of long-acting injectable naltrexone at DMC facilities, including NTPs

•County-proposed interim rates for additional MAT outside of a NTP setting, including buprenorphine, disulfiram, naloxone, and long-acting injectable naltrexone.

136. Opioid (Narcotic) Treatment Program (ASAM OTP Level 1) services are provided in NTP licensed facilities. Medically necessary services are provided in accordance with an individualized treatment plan determined by a licensed physician or licensed prescriber and approved and authorized according to the State of California requirements. NTPs/OTPs are required to offer and prescribe medications to patients covered under the DMC-ODS formulary including methadone, buprenorphine, naloxone and disulfiram.

a. A patient must receive at minimum fifty minutes of counseling sessions with a therapist or counselor for up to 200 minutes per calendar month, although additional services may be provided based on medical necessity.

b. The components of Opioid (Narcotic) Treatment Programs are (see Outpatient Treatment Services for definitions):

i. Intake

ii. Individual and Group Counseling

iii. Patient Education

iv. Medication Services

v. Collateral Services

vi. Crisis Intervention Services

vii. Treatment Planning

viii. Medical Psychotherapy: Type of counseling services consisting of a face- to- face discussion conducted by the Medical Director of the NTP/OTP on a one- on-one basis with the patient.

ix. Discharge Services

137. Additional Medication Assisted Treatment (ASAM OTP Level 1) includes the ordering, prescribing, administering, and monitoring of all medications for substance use disorders. Medically necessary services are provided in accordance with an individualized treatment plan determined by a licensed physician or licensed prescriber.

a. Opioid and alcohol dependence, in particular, have well- established medication options.

b. The current reimbursement mechanisms for medication assisted treatment (MAT) will remain the same except for the following changes for opt-in counties: buprenorphine, naloxone and disulfiram will be reimbursed for onsite administration and dispensing at NTP programs; additionally, physicians and licensed prescribers in DMC programs will be reimbursed for the ordering, prescribing, administering, and monitoring of medication assisted treatment.

c. The components of Additional Medication Assisted Treatment are ordering, prescribing, administering, and monitoring of medication assisted treatment.

d. The goal of the DMC-ODS for MAT is to open up options for patients to receive MAT by requiring MAT services in all opt-in counties, educate counties on the various options pertaining to MAT and provide counties with technical assistance to implement any new services. These medications are available through the DMC- ODS and outside of Drug Medi-Cal programs. Further details explaining the financing and availability of MAT services in the Medi-Cal system are contained in Attachment CC.

e. Counties may also choose to utilize long-acting injectable naltrexone in allowable DMC facilities under this optional provision. Long-acting injectable naltrexone will be reimbursed for onsite administration and physicians and licensed prescribers in DMC-ODS programs will be reimbursed for the ordering, prescribing, administering and monitoring.

f. Counties that choose to provide long-acting injectable naltrexone through this option must cover the non-federal share cost. While a treatment authorization request will not be required at the State level, under this option the county may choose to implement an approval process at the county level.

Source: http://www.dhcs.ca.gov/provgovpart/Pages/DMC_ODS_Resources.aspx

5) Question: How should the format/document order of the RFP proposal submission look?

Answer:

1. Exhibit A- Cover sheet on top, 2. A Table of Contents (there should only be 1 and Table of Contents should list documents in order of how it is listed in Proposal Submission Template), 3. Proposal submission should look like the Proposal Submission template we included in the RFP pgs. 31 to 46 (Sections 1-15), with all of the Attachments we requested to be at the end.

The order in which the Attachments are included is not important, just as long as all of the attachments are included in the proposal submission.

Also, you may tab each section if you would like, as long as each section is included in the proposal submission.

❖ **Please Note:** From this point on, we will no longer be answering questions pertaining to the Outpatient Treatment Services RFP.

To access all related documents to this RFP, please go to:
<http://countyofsb.org/behavioral-wellness/bids.sbc>