**Acute Inpatient Hospitals – Billing Instructions for Long-Acting Injectable (LAI) Antipsychotics Effective 5/15/2024**

# INTRODUCTION

Pursuant to **Sections 5.B.4.g** of the current MassHealth Acute Hospital Request for Applications (as amended from time to time, the “Acute Hospital RFA” or “RFA”), which is applicable to in-state providers, participating in-state MassHealth acute inpatient hospital providers will be paid for Long-Acting Injectable (LAI) Antipsychotics effective May 15, 2024, under a new payment methodology. To ensure proper payment, hospitals **must** follow special billing instructions.

Below are the **special billing instructions** that participating MassHealth acute hospital providers must follow when submitting **inpatient claims for LAI Antipsychotics**, as referenced in **Section 5.B.4.g of the RFA (for in-state providers)**. Failure to do so could result in an inaccurate payment.

*\*These billing instructions may be updated from time to time.*

# LAI ANTIPSYCHOTIC CODES

The LAI Antipsychotic codes that are subject to these billing instructions are identified on the *Long-Acting Injectable Antipsychotic Medications Administered in Inpatient Psychiatry Units* document within the MassHealth Drug List. If the hospital qualifies for separate payment of LAI Antipsychotics during an acute hospitalization, the hospital will be reimbursed for the LAI Antipsychotics according to the fee schedule in 101 CMR 317.00: *Rates for Medicine Services*, which incorporates by reference the rates listed in the Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing File. For LAI Antipsychotics not listed in the fee schedule, payment is set by individual consideration (IC).

# BILLING INSTRUCTIONS FOR LAI Antipsychotics (Acute Inpatient Hospitals with DMH licensed beds)

The following **billing instructions** apply to inpatient claims **for LAI Antipsychotics** submitted by ***Acute Inpatient Hospitals* (Provider Type 70),** referred to as “**hospitals**” in **Part II**.

* 1. Special Requirements for Transmitting Claims for LAI Antipsychotics.
1. Costs, charges, and any other claims-based data corresponding to the LAIs **must be *excluded from any facility/institutional claim*** (including Claim Types I and A) that the hospital submits for the member’s stay. The hospital must instead claim separate payment for the LAIs **on a *professional* claim (Claim Types M and B)**.
2. For drugs that are designated as IC, the hospital must submit the claim via **Direct Data Entry (DDE**) ***and*** include ***Delay Reason Code 11.*** Along with the member ‘s name, date(s) of service, and other usual information, the separate DDE claim for the LAIs **must also** include the appropriate **National Drug Code (NDC)** identifier and corresponding ***HCPCS* code(s)**.
3. The claims must indicate inpatient place of service.
4. The rendering provider field must be left blank.
5. The hospital **must** also include an invoice from a wholesale drug distributor or drug manufacturer that indicates the actual acquisition cost of the drug with the claim submission.

(i) This can be done using the attachment functions in the Provider Online Service Center (POSC):

* **Attachments** Tab: List of Attachments
* On the **List of Attachments** panel, click **New Item**. The **Attachment Detail** panel displays.
* Select **Report Type** from the drop-down list.
* Select **Transmission Code** from the drop-down list.
* Click **Brown** and navigate to the attachment file.
* Select the desired file and click **Open**.
* Click **Add/Upload**.
* Click the **Confirmation** Tab.
1. NOTE: MassHealth may require additional documentation upon request of the claim, if necessary to price the claim.
2. Claims Adjudication.

Claims for LAI Antipsychotics with IC submitted using the instructions above will suspend for review and pricing by MassHealth in accordance with the payment methodology described in Section 5.B.4.g of the Acute Hospital RFA (for in-state providers). Upon completion of the steps above, MassHealth will release the claim to complete its adjudication.