

## **Introduction**

Good afternoon. My name is Paul Velho, and I am the Senior Manager of Behavioral Health Strategy and Finance at the MassHealth Office of Accountable Care and Behavioral Health within the Executive Office of Health and Human Services (EOHHS). I am here to present testimony on the proposed amendments to 101 CMR 306.00: *Rates for Mental Health Services Provided in Community Health Centers and Mental Health Centers*. The proposed amendments are anticipated to be effective for dates of service on or after August 1, 2025.

## **Background**

Regulation 101 CMR 306.00 governs payment rates to be used by all governmental units and workers' compensation insurers for outpatient mental health services provided by mental health centers and community health centers (CMHCs), including mental health centers in nursing facilities. The regulation incorporates several services, including diagnostic evaluation, psychotherapy, individual and family therapy, group therapy, pharmacotherapy, community consultation and education, structured outpatient addiction services, enhanced structured outpatient addiction services, intensive outpatient services, and certified peer specialist services. Additionally, a subset of CMHCs is designated as behavioral health urgent care (BHUC) providers, whose rates are separately established in 101 CMR 306.00.

## **Proposed Amendments**

The proposed amendments include updates to rates, coverage, and codes. The proposed rates are in compliance with M.G.L. Chapter 118E Section 13C, requiring that rates established by EOHHS for health care services be "adequate to meet the costs incurred by efficiently and economically operated facilities providing care and services in conformity with applicable state and federal laws and regulations and quality and safety standards and which are within the financial capacity of the commonwealth."

### **Rate Updates**

EOHHS proposes to remove the rates for structured outpatient addiction program (SOAP) services (code H0015) and enhanced structured outpatient addiction program (E-SOAP) services (code H0015-TF) in 101 CMR 306.00. This regulation will refer to 101 CMR 444.00: *Rates for Certain Substance Use Disorder Services* for the SOAP and E-SOAP rates.

The proposed amendments modify the psychological testing services codes. Psychological testing services rates billed by CMHCs are currently set under 101 CMR 329.00: *Rates for Psychological and Independent Clinical Social Work Services*. EOHHS proposes to establish codes for psychological testing services (codes 96112, 96113, 96116, 96121, 96130 through 96133, and 96136 through 96139) in 101 CMR 306.00 and align their rates to the current minimum Managed Care Entity (MCE) fee schedule.

Similarly, the proposed amendments modify the rates for certain medication visit services codes. All medication visit services provided by CMHCs are currently paid using the rates established in 101 CMR 317.00: *Rates for Medicine Services*. EOHHS proposes to establish rates for certain medication visits (codes 99202 through 99205, 99211 through 99215, and 99417) in 101 CMR 306.00 and to align their rates to the current minimum MCE fee schedule. All other medication visit codes (99304-99310, 99324-99328, 99334-99337, 99341-99345, and 99347-99350) for services provided by CMHCs will continue to be paid using the rates established in 101 CMR 317.00.

EOHHS proposes to increase the rate for certified peer specialist services (code H0046-HE) from \$16.92 to \$19.70. The proposed rate aligns with the current peer recovery coaching rate established under 101 CMR 346: *Rates for Certain Substance-Related and Addiction Disorders Programs*.

Additionally, EOHHS proposes to increase the rates for 14 existing mental health center service codes (90791, 90791-HA, 90832, 90833, 90834, 90836, 90837, 90839, 90840, 90846, 90847,

90849, 90853, and 90853-EP) by aligning their rates with existing rates established in the MCE fee schedule.

EOHHS proposes to establish encounter bundled rates for CMHCs designated as BHUCs billing certain delineated services. The encounter codes (H2013-HA and H2013-HB) are proposed to support flexible, team-based care. The new encounter bundled rates will be implemented as follows: 1) Remove the requirement that CMHCs designated as BHUCs bill using the -GJ modifier; 2) Permit providers to bill only one encounter code per member/per date of service, regardless of the component delineated services provided to the member on the date of service; and 3) Establish separate encounter bundled rates for services provided by CMHCs designated as BHUCs to members under age 21 (code H2013-HA) and members age 21 and older (code H2013-HB) to reflect distinctions in clinical intensity of services provided to youth and adults.

The proposed encounter bundled rates are \$168.83 for code H2013-HA and \$160.02 for code H2013-HB. Proposed rates for the encounter bundled services were established utilizing model budgets with input from various data, including: (1) CMHC Uniform Financial Report (UFR) staffing titles to populate the models and then cross-walked to their corresponding 2023 Bureau of Labor Statistics (BLS) staffing titles; (2) The average of the 50<sup>th</sup> and 75<sup>th</sup> percentile of 2023 BLS salary data used for each staffing title. Additionally, the medical director salary utilized in the model budgets reflects May 2023 National Industry-Specific Occupational Employment and Wage Estimates; (3) Input from the Association for Behavioral Healthcare (ABH) used to help inform staff types and FTE counts; (4) Massachusetts Comptroller-approved FY2024 tax and fringe data used to set the percentage of taxes and benefits relative to total salary expenses; and (5) 2022/2023 CMHC UFR data used for other direct costs and indirect costs percentages relative to total salary expenses.

Lastly, EOHHS proposes to maintain rates for the following services at their current levels: (1) Intensive outpatient psychiatric services (IOP) per diem (code S9480); (2) Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers or institutions (code 90882); (3) Interpretation or explanation of results of psychiatric,

or other medical examinations and procedures (code 90887); (4) Preparation of report of patient's psychiatric status, history, treatment or progress for other individuals or agencies or insurance carriers (code 90889); (5) Community Consultation and Education, per hour, which does not have an assigned procedure code; and (6) Reevaluation, per hour, which does not have an assigned procedure code.

### **Coverage and Code Updates**

EOHHS proposes to establish code 90792 for psychiatric diagnostic evaluation with medical services performed by doctoral level child psychiatrists and psychiatrists. The proposed rate of \$144.98 aligns to the existing rate established in the MCE fee schedule for child psychiatrists and the existing rate established in 101 CMR 317.00: *Rates for Medicine Services* for psychiatrists.

EOHHS also proposes to establish the doctoral-level child psychiatric clinician licensure-level with code modifier -UG. The proposed rates for CMHC services billed with the code modifier -UG align with existing rates established for services with code modifier -UG in the MCE fee schedule.

Similarly, the proposed amendments establish rates for CMHC services provided by psychiatric nurse mental health clinical specialists. These CMHC services must be submitted with code modifier -SA that allows payment of 85% of the respective CMHC rates for services billed with code modifier -AF performed by psychiatrists, whose allowable fees are contained in 101 CMR 306.03(5).

EOHHS proposes to remove the Emergency Services Program (ESP) code (S9485) and associated rate from 101 CMR 306.00. Effective January 1, 2023, ESP services have been restructured and are now administered as the Adult Mobile Crisis Intervention services by Community Behavioral Health Centers (CBHC) providers.

To align with the Subchapter 6 Mental Health Service Codes for the associated CMHC programmatic regulation, 130 CMR 429.000: *Mental Health Center Services Providers*, EOHHS proposes to include the following two service codes in 101 CMR 306.00: 1) Peer recovery

coaching (code H2016-HM), whose rate will be referenced to 101 CMR 346.00: *Rates for Certain Substance-Related and Addictive Disorders Programs*; and 2) Recovery support navigator services (code H2015-HF), whose rate will be referenced to 101 CMR 444.00: *Rates for Certain Substance Use Disorder Services*.

EOHHS also proposes to update codes for mental health centers in nursing facilities to align with programmatic expectations. Rates for services provided in mental health centers in nursing facilities are the same as the rates for services provided outside of nursing facilities.

In addition to the proposed amendments described above, 101 CMR 306.00 will be amended to reflect updated terminology and current policy.

### **Fiscal Impact**

The estimated annual aggregate fiscal impact on fee-for-service spending is \$1.36 million, which is an increase of 5.72% over CY 2023 spending of \$23.86 million.

This concludes my testimony.

Thank you.