

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF BEHAVIORAL HEALTH



Bulletin 108

Bulletin ID: No. 108
Issued Date: December 21, 2016

GUIDANCE ON MEDICATION ASSISTED THERAPY (MAT) DOCUMENTATION, BILLING AND CLAIMS SUBMISSION

The purpose of this bulletin is to inform Adult Substance Abuse Rehabilitation Services (ASARS) Certified Medication Assisted Therapy (MAT) providers who have a Human Care Agreement with the Department, of the documentation, billing, and claims submission requirements for as described in District of Columbia Municipal Regulations Title 22, Chapter A63.

First, Chapter 63 (6343.11) directs that “Documentation for this service must include medication log updates and an encounter note for each visit, which captures the therapeutic guidance provided.” Specifically, in addition to receiving a dose of medication, all clients must have documentation of the therapeutic guidance provided to them. The code for billing this encounter is H0020HF, MAT Administration. Although MAT providers are allowed to bill MAT dosing directly to the Department of Health Care Finance (DHCF), for each dose billed to DHCF, there must be an accompanying MAT Administration note documented in the Department’s system of record – currently DATA/Wits.

Second, all MAT related billing must be documented on a per-encounter-basis. This means that there shall be no more service roll up and/or “date span” billing allowed. Each dose of MAT must be recorded on a separate encounter note than that of the dosing note, by the person who delivered the dose.

Third, as of October 1, 2016, all Medicaid eligible ASARS services other than MAT dosing are required to be documented and billed through the Department’s system of record – currently DATA/Wits. An example of a Medicaid eligible ASARS service would be Individual Counseling [H0005] – this must be documented and billed on a per-encounter-basis in DATA/Wits. No services other than the MAT dose may be billed directly to DHCF.

Additionally, the Department is issuing this bulletin in order to reiterate providers’ responsibilities under District of Columbia statute and regulation to ensure that their billing properly reflects appropriate service provision. This is also consistent with 42 CFR *Part. 2* and HIPAA Privacy Regulations. Providers are responsible to insure that services billed to the Department, regardless of payer, meet the requirements outlined for the services in the regulations under which the provider is certified. As such, ASARS must be provided in accordance with DCMR Title 22A, Chapter 63.

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For questions regarding this bulletin, please contact your agency's Provider Relations Specialist.