

Magellan Compliance Notebook

Magellan Behavioral Health of Pennsylvania, Inc. (Magellan) strives to be proactive and use education as a preventative tool to help ensure our members receive the highest quality of care through you, the provider. The Compliance Department at Magellan is committed to sending monthly e-mails to targeted providers regarding a Compliance-related subject.

This e-mail communication is specific to your HealthChoices (Pennsylvania Medicaid) Contract with Magellan.

This month, we would like to share some important reminders with contracted Outpatient Clinics (Mental Health and Drug & Alcohol) regarding the services provided to Magellan HealthChoices recipients by Certified Registered Nurse Practitioners (CRNP), Registered Nurses (RN) and Licensed Practical Nurses (LPN).

Please be advised that similar guidance on this topic was distributed to the provider network in April 2016 and again in November 2019; however, some adjustments have been made to Magellan's expectations. Additionally, we want to ensure that providers are utilizing staff with nursing degrees in the most optimal and clinically appropriate manner in accordance with the regulations and Magellan guidelines. Below we have outlined the scope, duties, necessary qualifications, and billing parameters around services rendered by CRNPs, RNs and LPNs.

CRNP Scope, Qualifications and Duties

Certified Registered Nurse Practitioner (CRNP)— A professional nurse licensed in this Commonwealth who is certified by the Board in a specialty and who, while functioning in the expanded role as a professional nurse, performs acts of medical diagnosis or prescription of medical therapeutic or corrective measures in collaboration with a physician licensed to practice in this Commonwealth.

Collaborative agreement— The written and signed agreement between a CRNP and a collaborating physician in which they agree to the details of their collaboration including the elements in the definition of collaboration.

According to the PA Code (see Title 49 PA Code Chapter 21 Subchapter C and Title 55 PA Code Chapter 1153), when acting in collaboration with a physician as set forth in a collaborative agreement and within the CRNP's specialty, a CRNP may perform comprehensive assessments

of patients and establish medical diagnoses; order, perform and supervise diagnostic tests for patients and, to the extent the interpretation of diagnostic tests is within the scope of the CRNP's specialty and consistent with the collaborative agreement, may interpret diagnostic tests; and develop and implement treatment plans, including issuing orders to implement treatment plans. A CRNP with current prescriptive authority approval may develop and implement treatment plans for pharmaceutical treatments; and prescribe psychotropic medication relevant to the area of practice of the CRNP if that authorization is documented in the collaborative agreement with a physician. A CRNP may not delegate prescriptive authority. In order to provide services to Magellan HealthChoices (Medicaid) recipients within a Psychiatric Outpatient Clinic or Substance Use Disorder Outpatient Clinic, a CRNP must have certification as either an Adult Psychiatric Mental Health Nurse Practitioner or a Psychiatric Mental Health Nurse Practitioner.

RN Scope, Qualifications and Duties

Registered Nurse (RN)— A graduate nurse who has passed a state board examination and has been registered and licensed to practice nursing in this Commonwealth.

RN activities in a licensed outpatient clinic may include medication administration including injections, BMI measurements, medication education, and assessment of medication effectiveness in consultation with a physician. Per the PA Code (see Title 49 PA Code Chapter 21 Subchapter A), a registered nurse shall undertake a specific practice only if the registered nurse has the necessary knowledge, preparation, experience, and competency to properly execute the practice. In order to promote competence in psychiatric mental health nursing, it's recommended that RNs working in behavioral health clinics are board certified by The American Nurses Credentialing Center as a Psychiatric-Mental Health Nurse (RN-BC).

LPN Scope, Qualifications and Duties

Licensed Practical Nurse (LPN) — A nurse who has graduated from an accredited school of nursing and has become licensed to practice in this Commonwealth under the supervision of a RN.

By law, RNs are required to oversee LPNs. Allowable activities by an LPN in a licensed outpatient clinic are limited but may include collecting data (such as vital signs) and medication administration (with limitations- see Title 49 PA Code Chapter 21 Subchapter B) under the supervision of an RN. LPNs cannot assess members. Additionally, per the PA Code (see Title 49 PA Code Chapter 21 Subchapter B), a licensed practical nurse shall undertake a specific practice only if the nurse has the necessary knowledge, preparation, experience, and competency to properly execute the practice. LPNs should otherwise be in full compliance with § 21.145: Functions of the LPN. *In order to promote competence in psychiatric mental health*

nursing, it's recommended that LPNs working in Mental Health and Drug & Alcohol clinics have prior experience working in a behavioral health setting.

CRNP Reimbursed Services in Magellan Outpatient Clinics

Office Outpatient Visits for Medication Management (99202 – 99215 SA): Per the PA Code, psychiatric clinic medication visits may be provided for administration of a drug and evaluation of an individual's physical or mental condition during the course of prescribed medication. This visit can be provided by a CRNP under the prescribing practices defined by licensing and regulatory requirements.

As defined by an agency's Exhibit B Magellan Reimbursement Schedule, Outpatient Clinics may bill for Office Outpatient / Medication Management Visits by a CRNP utilizing the 99202-99215 codes depending on the length and intensity of the session. The modifier of SA must be used to differentiate services rendered by the CRNP from a Psychiatrist/ Medical Doctor (additional informational modifiers are also required- please reference your Reimbursement Schedule).

Diagnostic Assessments (90792 SA): Per OMHSAS Policy Clarification #03-08 and Title 55 PA Code Chapter 1153, a psychiatric evaluation may only be performed by a psychiatrist, but psychiatric evaluations are only required for a limited set of services. A psychiatric evaluation is required for admission to an accredited Residential Treatment Facility (RTF) or a Long-Term Structured Residence (LTSR); and evaluations for involuntary commitments (302's) must also be completed only by a physician. The terms psychiatric evaluation or psych eval are often used loosely to describe the initial diagnostic evaluations required by the PA Code for admission to and treatment planning for members seeking outpatient services in outpatient mental health clinics. There is no requirement that these diagnostic evaluations be completed by a psychiatrist, and they may be completed by a CRNP. With regards to providing diagnostic evaluations in Drug & Alcohol treatment clinics, the same limits and billing issues apply. The Department of Health (DOH) regulations do not prohibit the use of CRNP's to perform mental health assessments/ evaluations in so far as they are permitted to do so by state regulation governing the scope of their practice. This refers only to the CRNP performing a mental health function, not a D&A Assessment. Within those confines, the CRNP could collaborate with the D&A workers as appropriate for patients with co-occurring disorders, but their function should remain primarily focused on MH services for the purposes of performing a diagnostic mental health evaluation.

As defined by an agency's Exhibit B Magellan Reimbursement Schedule, "Diagnostic evaluation with medical services" refers to the evaluation or assessment conducted by a CRNP. Outpatient Clinics may bill for the diagnostic evaluation/ assessment by a CRNP utilizing the 90792 SA code (additional informational modifiers are also required- please reference your Reimbursement Schedule).

Therapy (e.g., Individual, Group, Family): Per Title 55 PA Code Chapter 1153, Individual, Group and Family Psychotherapy is conducted by a clinical staff person. A clinical staff person may be a psychiatrist, a mental health professional or a mental health worker. A CRNP with the required certification of either Adult Psychiatric Mental Health Nurse Practitioner or Psychiatric Mental Health Nurse Practitioner would meet the criteria of a mental health professional. Please reference your Exhibit B Magellan Reimbursement Schedule for the code combinations that should be utilized when providing and billing for Individual, Group or Family Psychotherapy.

RN and LPN Reimbursed Services in Magellan Outpatient Clinics

Medication Training and Support (H0034 SA): Per the PA Code, psychiatric clinic medication visits may be provided for administration of a drug and evaluation of an individual's physical or mental condition during the course of prescribed medication. This visit can be provided by a registered nurse or licensed practical nurse. An RN or LPN may administer a drug ordered for a patient in the dosage and manner prescribed (see above scope for additional RN and LPN functions).

As defined by an agency's Exhibit B Magellan Reimbursement Schedule, Outpatient Clinics may bill for Medication Training and Support by an RN or LPN utilizing H0034 SA code combinations depending on the length of the session (additional informational modifiers may also be required- please reference your Reimbursement Schedule).

Diagnostic Assessments (90792 UA): Diagnostic evaluations may be completed by a RN as long as they qualify as a mental health worker under the PA Code. RNs who are conducting assessments in an outpatient mental health clinic should be board certified by The American Nurses Credentialing Center as a Psychiatric-Mental Health Nurse (RN-BC). With regards to providing diagnostic evaluations in Drug & Alcohol treatment clinics, and as indicated above, DOH regulations do not prohibit the use of RNs to perform mental health assessments/ evaluations in so far as they are permitted to do so by state regulation governing the scope of their practice. This refers only to the RN performing a mental health function, not a D&A Assessment. Within those confines, the RN could collaborate with the D&A Clinic staff as appropriate for patients with co-occurring disorders, but their function should remain primarily focused on MH services for the purposes of performing a diagnostic mental health evaluation. Additionally, as indicated above, an LPN is not qualified to conduct a diagnostic assessment.

As defined by an agency's Exhibit B Magellan Reimbursement Schedule, "Initial Diagnostic Assessment- no medical services" can refer to evaluation or assessment conducted by a RN, if they otherwise qualify as a mental health worker (see below definition). In this case, Outpatient Clinics may bill for the diagnostic evaluation/ assessment by a RN utilizing the 90792 UA code (additional informational modifiers are also required- please reference your Reimbursement Schedule).

Therapy (e.g., Individual, Group, Family): Per Title 55 PA Code Chapter 1153, Individual, Group and Family Psychotherapy is conducted by a clinical staff person. A clinical staff person may be a psychiatrist, a mental health professional or a mental health worker. An RN or LPN <u>may</u> meet the criteria of a mental health worker which is defined as:

Mental health worker—A person acting under the supervision of a mental health professional to provide services who meets one of the following:

- (i) Has a bachelor's degree from a college or university that is accredited by an agency recognized by the United States Department of Education or the CHEA in a recognized clinical discipline including social work, psychology, nursing, rehabilitation or activity therapies.
- (ii) Has a graduate degree in a clinical discipline with 12 graduate-level credits in mental health or counseling from a program that is accredited by an agency recognized by the United States Department of Education or the CHEA.
- (iii) Has an equivalent degree from a foreign college or university that has been evaluated by the AICE or the NACES. The Department will accept a general equivalency report from the listed evaluator agencies to verify a foreign degree or its equivalency.

If an RN or LPN meets the criteria of a mental health worker and your agency is otherwise in compliance with the staffing pattern as described in § 5200.22, Individual, Group or Family Psychotherapy may be provided by these practitioners in a MH Outpatient Clinic. Please reference your Exhibit B Magellan Reimbursement Schedule for the code combinations that should be utilized when providing and billing for Individual, Group or Family Psychotherapy.

Incident-To Billing/ Sub-contracting

"Incident-to" billing, as defined by federal legislation, refers to the provider billing of services and supplies that are performed by auxiliary personnel. "Incident-to" is an exception that allows 100 percent reimbursement for non-physician services that meet certain requirements to bill the physician rates. Services meeting the requirements may be billed under the supervising physician's NPI, as if the physician personally performed the service. Per Magellan Policy (please reference our National Provider Handbook), Magellan does NOT allow "incident-to" billing. The term "incident-to" is specific to Medicare reimbursement only. Furthermore, please be advised that Magellan does not allow any sub-contracting or sub-delegation of the Individual Provider Agreement or of the Group Provider Agreement.

At Magellan, we will continue to educate our providers with updated MA Bulletins, regulations, and other pertinent information to ensure Compliance. Although providers are ultimately responsible for knowing and complying with all applicable regulations, we proactively engage providers on an ongoing basis to make sure they are aware of compliance related requirements

and expectations. Medicaid Program Integrity is truly a collaborative effort between our providers, county customers, Magellan, Bureau of Program Integrity (BPI) and other oversight agencies. The monthly e-mail blast topics are generated from audit results and trends; however, are also sent in response to recent Magellan policy updates; newly released or relevant MA Bulletins and Policy Clarifications; or Regulation changes. The intention is to afford our providers with as many resources as possible to combat FWA and reduce overpayments.

Thank you for your ongoing hard work and dedication to our members!

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