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5160-30-02 Coverage and limitation policies for alcohol and other drug treatment services.

- (A) The following identifies alcohol and other drug treatment services that may be covered by medicaid and the limitation policies applicable to these services.
 - (1) "Assessment " is the service defined in rule 3793:2-1-08 of the Administrative Code and provided by an eligible provider as defined in this chapter.
 - (2) "Crisis intervention " is the service defined in rule 3793:2-1-08 of the Administrative Code and provided by an eligible provider as defined in this chapter.
 - (3) "Individual counseling " and "group counseling " are those services defined in rule 3793:2-1-08 of the Administrative Code and provided by an eligible provider as defined in this chapter.
 - (4) "Medical somatic " is the service defined in rule 3793:2-1-08 of the Administrative Code and provided by an eligible provider as defined in this chapter.
 - (5) "Laboratory urinalysis" is the service defined in rule 3793:2-1-08 of the Administrative Code and provided by an eligible provider as defined in this chapter. Notwithstanding the provisions found in Chapters 3793:2-1 and 3793:2-2 of the Administrative Code, a physician must order the drug screening/urinalysis for medicaid to cover the service.
 - (6) "Opioid agonist administration" is the service defined in rule 3793:2-1-08 of the Administrative Code and provided by an eligible provider as defined in this chapter.
 - (7) "Case management " is the service defined in rule 3793:2-1-08 of the Administrative Code and provided by an eligible provider as defined in this chapter.
 - (8) "Intensive outpatient " is the service defined in rule 3793:2-1-08 of the Administrative Code and provided by an eligible provider as defined in this chapter.
 - (9) "Ambulatory detoxification" is the service defined in rule 3793:2-1-08 of the Administrative Code and provided by an eligible provider as defined in this

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chapter.

- (B) Alcohol and other drug treatment services must be recommended by a professional who is qualified to sign an individualized treatment plan in accordance with rule 3793:2-1-06 of the Administrative Code.
- (C) Alcohol and other drug treatment services must be performed by a professional who is qualified to perform the specific service. The identification of professionals qualified to perform each specific service is set forth in rule 3793:2-1-08 of the Administrative Code.
- (D) The medications listed in appendix A to this rule are covered by the department when rendered and billed by an eligible provider as described in rule 5160-30-01 of the Administrative Code. The medication must be administered by a qualified provider acting within the provider's professional scope of practice. Reimbursement rates are determined by the methodology described in paragraph (E) of rule 5160-4-12 of the Administrative Code.
- (E) The medications and services listed in appendix B to this rule are covered by the department when rendered and billed by an opiate treatment program as described in rule 5122-29-35 of the Administrative Code and licensed as such by the Ohio department of mental health and addiction services and/or federally certified as such as stated in 42 CFR 8.11 (21 U.S.C. 823(g)(1)). Reimbursement rates are determined by the methodology described in paragraph (E) of rule 5160-4-12 of the Administrative Code or as listed in the appendix to the rule.

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Five Year Review (FYR) Dates:

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Certification

Date

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