

DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS
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ADP BULLETIN

Title Drug/Medi-Cal Reimbursements for Narcotic Treatment Program Services		Issue Date: 03-09-98 Expiration Date:	Issue No. 98-08
Deputy Director Approval (signed by) GLORIA J. MERK, II Program Operations Division	Function <input type="checkbox"/> Information Management <input type="checkbox"/> Quality Assurance <input type="checkbox"/> Service Delivery <input checked="" type="checkbox"/> Fiscal <input type="checkbox"/> Administration	Supersedes Bulletin/ADP Letter No.	

PURPOSE

This is to clarify billing processes for Fiscal Year (FY) 1997-98 for monthly and/or daily reimbursement for Drug/Medi-Cal (D/MC) narcotic treatment program (NTP) services and reconciliation processes for adjustments for NTP claims. The monthly and/or daily reimbursements, reconciliations, and the related adjustments described in this letter do not affect NTP counseling services.

DISCUSSION

Chapter 1027 of the Health and Safety Code, Section 11758.42(c) states that reimbursement for NTP services shall be based on a uniform statewide monthly rate (USMR). Section 11758.42(g) further states that, if a patient receives less than a full month of services, reimbursement shall be prorated to the daily cost per patient based on the annual cost and a 365-day year.

ADP Letter #97-57 dated September 24, 1997, is still in effect. It communicated the following information:

- the maximum monthly allowance for NTP services may be claimed if a patient receives a full month of service.
- for all months, irrespective of the number of days in the month, the USMR (i.e., maximum monthly allowance) is \$172.10 for regular D/MC services and \$199.74 for perinatal D/MC services.
- if a patient receives less than a full month of services, claim the daily rate of \$5.66 for regular and \$6.57 for perinatal D/MC services.
- claims which do not follow these instructions will be adjusted by the automated billing system and reimbursements will be made accordingly.

Since the daily rates are a proration of the annualized USMR on a 365-day year, accurate adjustments cannot be made to reconcile approved services with original claims, error correction reports, denied claims, or other adjustments when a monthly claim reflects the USMR. Claims will, therefore, be reconciled at year end using the daily rate. Adjustments will not be made during the year, and directions for year-end adjustments will be included with the FY 1997-98 cost report instructions. For those NTP providers for whom performance reports are required, adjustments will be made using the daily rate when the final payment for the fiscal year is processed.

REFERENCES

Assembly Bill 2071, Chapter 1027, Statutes of 1996

HISTORY

Not applicable

QUESTIONS/MAINTENANCE

If you have questions regarding processing D/MC claims or status of payment for services provided, please call the D/MC Claims Section analyst assigned to your county or contract.

EXHIBITS

Not applicable

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