

Billing for Buprenorphine in OASAS OTP Programs

Programs may bill Medicaid for Buprenorphine dispensed to each patient in OASAS OTP facilities (rate codes 1564 [and 1567 may be billed when interim billing ends]) by including the billing code J0592 on the weekly claim with the number of units of medication dispensed (each unit equals 8 mgs) and the procedure code for buprenorphine medication administration. The reimbursement for the J0592 is \$7.01/8 mg strip⁽¹⁾ (with a maximum of 32mg (4 strips) per day). The maximum reimbursement per week for J0592 is \$196.28 ($\$7.01 * 4 \text{ strips} * 7 \text{ days}$).

For services and medication costs billed through the APG methodology retroactive to January 2014 the program will submit a bill for each week and the claim should include:

- At least one H0033 which is the code a provider will use to bill medication administration with the KP modifier appending to the first weekly administration provided during the weekly episode.
- At least one J0592. The J0592 code should be included on a separate line for each Date of Service (DOS) in which the drug was provided with the corresponding number of units of medication dispensed and the acquisition cost of the drug supplied to the patient inputted in the charges field.
- Additionally, the provider should include any other procedures and/or services provided during the weekly episode of care on a separate line.

For services and medication costs billed through the APG methodology beginning January 2015 the program will submit a bill for each week and the claim should include:

- At least one H0033 with the KP modifier appending to the first weekly administration provided during the weekly episode.
- At least one J0592. The J0592 code should be included on a separate line for each Date of Service (DOS) in which the drug was provided with the corresponding number of units of medication dispensed.
- However, for DOS beginning January 2015 providers will no longer have to code their acquisition cost for J0592.
- Note, for claims beginning July 2015 the provider will need to include the NDC code on all drug code lines.
- Additionally, the provider should include any other procedures and/or services.

⁽¹⁾ The term “strip” is used here, however physicians may prescribe or dispense any formulation of the medication including the sublingual film or sublingual tablets.