Substance use agencies across the nation are underutilizing opportunities for addiction programs and services being provided through the Patient Protection and Affordable Care Act [ACA] provisions. The most recent research conducted by Dr. Christina Andrews (University of South Carolina, College of Social Work) and colleagues discusses the implications of limited application of addiction resources in their article, “Despite resources from the ACA, most states do little to help addiction treatment programs implement health care reform.”

Using survey data from 49 single-state agencies and the District of Columbia, their research shows that, across the nation, many single-state agencies are limited in the technical assistance provided for addiction programs and services in four key areas: improving health IT, enhancing cross-health system collaborations, conducting consumer outreach and enrollment, and achieving insurance certification. One of the 10 elements of the essential health benefits identified by the ACA are services for substance use. Because of this renewed focus on addiction treatment by the ACA, expansion and enhancing of services can become priority areas for 301 agencies that can be supported through new ACA provisions.
Since the ACA extended parity requirements that prevent insurance agencies from limiting the amount of substance use services patients are allowed to receive, many more patients can receive billable addiction services.\(^3\) Service demand is also increasing as more and more patients are receiving insurance coverage. The ACA’s focus on areas that can improve access and delivery of services are outlined below and may be of use to 301 agencies.

**CLINICIANS OBTAINING LICENSURE IN ORDER TO BILL MEDICAID FOR SERVICES\(^4\)**

Clinicians with master’s degrees and licensure can bill Medicaid for a broader range of behavioral health services than staff with bachelor’s degrees only. Licensure through the following boards are considered sufficient to bill for certain addiction services:

- SC Board of Social Work Examiners
- SC Board of Examiners for Licensure of Professional Counselors, Marriage and Family Therapists, & Psycho-Educational Specialists
- Behavior Analyst Certification Board
- SC Association of Alcoholism & Drug Abuse Counselors Certification Commission
- National Association for Alcohol and Drug Abuse Counselors
<table>
<thead>
<tr>
<th>Service</th>
<th>Billable Services for Licensed Clinicians</th>
<th>Billable Services for Staff with a Bachelors Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavior Modification (B-Mod)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Behavioral Health Screening (BHS)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Crisis Management (CM)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Diagnostic Assessment (DA)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Family Support (FS)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Family Psychotherapy (FT)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Group Psychotherapy (GT)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Individual Psychotherapy (IT)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Multiple Family Group Psychotherapy (MFT)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Psychosocial Rehabilitation Service (PRS)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Service Plan Development (SPD)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Alcohol &amp; Drug Substance Abuse Counseling (SAC)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Skills Training &amp; Development (ST)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Psychological Testing &amp; Reporting (PTR)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol &amp; Drug Assessment (ADA)</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Alcohol &amp; Drug Screening (ADS)</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

**Clinicians Obtaining Medical Degrees**

Clinicians who obtain medical degrees are becoming valuable members within the addictions field. In addition to all the services for which licensed professionals can bill Medicaid, clinicians with medical or doctoral degrees can also bill for the following services:

- Alcohol and Drug Nursing Assessment (ADN)
- Injection Medication (IJ)
- Medication Administration (MA)
- Medication Management (MM)
- Medical Evaluation and Management (E&M)
- Psychological Testing and Evaluation (PT)

Guidelines within the ACA are making Medication Assisted Treatment (MAT) a more viable option for providing services. 301 agencies seeking ways to change and/or increase services can look for ways to recruit individuals with medical degrees or help fund current employees wanting to advance their education. If this is not feasible, agencies can look for clinicians willing to volunteer or contract with the agency.

**Agencies Obtaining In-Network Status**

Obtaining in-network status for private insurance providers in South Carolina can be very beneficial for 301 agencies. The following links provide information on qualifying for credentialing for in-network status for 3 of the largest insurance providers in the state.

**Blue Cross Blue Shield Mental Health Network**

*Blue Cross Blue Shield Credentialing*

Documents Needed:

- Blue Cross Blue Shield Application
- Drug Enforcement Administration License
• Companion Benefit Alternatives Professional Agreement
• National Provider Identifier Assignment Letter
• Health Maintenance Organization Hold Harmless Agreement
• Proof of Current Malpractice Coverage
• State Licenses

CIGNA
Cigna Credentialing
  » Click “Behavioral Health Resources”
  » Click “Doing Business with Cigna—View Documents”
  » Click “Credentialing”

These are forms for licensed, independent professionals to apply to join the Cigna Behavioral Health Network. For entire facilities wishing to join the network, contact Cigna Behavioral Health’s Provider Service Center: 1-800-926-2273.

Frequently Asked Questions about Cigna Credentialing
  » Click “Behavioral Health Resources”
  » Click “Doing Business with Cigna—View Documents”
  » Click “Credentialing”
  » Click “Frequently Asked Questions” at the bottom of the page

UNITED HEALTHCARE
United Healthcare Online (select NEW USER)

In order to find information on credentialing/gaining in-network status for United Healthcare, users are required to log-in to their Website or call their National Credentialing Center.

National Credentialing Center: 877-842-3210

Recovery Program Transformation & Innovation Fund
AGENCIES ASSISTING CLIENTS IN OBTAINING INSURANCE\textsuperscript{5,6}

Since South Carolina is a state with a federally facilitated marketplace, consumer support, outreach, and education about health insurance may be conducted through the US Department of Health and Human Services. However, the state is better equipped to handle this type of outreach because of their knowledge and partnerships with local communities and businesses. In 2014, South Carolina’s Palmetto Project was awarded over $1,000,000 in funds to establish a statewide navigator system to educate and help consumers sign up for health insurance. It may benefit 301 agencies to contact and/or partner with Palmetto Project in order to help expand insurance coverage to their client base.

**Palmetto Project: SignUpSC**

There are also Exchange-Certified Insurance Agents, available through the National Association of Health Underwriters or Trusted Choice, who can provide more information to 301 agencies and consumers on the health insurance marketplace.

**National Association of Health Underwriters**

Phone #: (803) 252-7128

**Trusted Choice**

Phone #: (803) 731-9460

**AGENCIES COORDINATING CARE WITH OTHER PROVIDERS**

Currently, in South Carolina, there are 106 Patient-centered Medical Homes (PCMHs) and 2 Accountable Care Organizations. Due to the new financial incentives for primary healthcare organizations to provide comprehensive care, partnering with 301 agencies is becoming a more feasible option.
301 agencies have the opportunity to coordinate care with these organizations in order to provide even more comprehensive services for their clients. A list of PCMHs in South Carolina can be found on the following Webpage.

**SC PCMHs**

» Click on the link “Visit Now” at the bottom of the Webpage

In addition, the Department of Alcohol and Other Drug Abuse Services has joined with the Department of Health and Human Services in order to include substance use disorders as part of their Healthy Outcomes Program (HOP). The HOP aims to increase care coordination in health care delivery settings. Ten 301 agencies are participating in the initiative; however, this can be an avenue for all agencies to increase health care coordination.

**AGENCIES IMPLEMENTING/SUSTAINING IT FOR EHRs**

As the statewide implementation of CareLogic by all 301 agencies comes to a conclusion, agencies can now look toward ways to utilize the new system to better serve their clients and coordinate care. Agencies can make sure that the Electronic Health Records (EHRs) have “meaningful use” as defined by the Center for Medicare & Medicaid Services (CMS). Though these measures were designed around EHRs use within a hospital or clinic setting, they can still be used as a guide for behavioral health agencies implementing new EHRs.
Measures of “meaningful use” of EHRs include:

<table>
<thead>
<tr>
<th>1. Electronic data to immunization registries**</th>
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<tbody>
<tr>
<td>2. Syndromic surveillance data to public health agencies**</td>
</tr>
<tr>
<td>3. Drug formulary checks</td>
</tr>
<tr>
<td>4. Incorporation of clinical lab test results</td>
</tr>
<tr>
<td>5. Patient lists by specific conditions</td>
</tr>
<tr>
<td>6. Patient access to health information</td>
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<tr>
<td>7. Patient reminders for preventative/follow up care</td>
</tr>
<tr>
<td>8. Patient-specific education resources</td>
</tr>
<tr>
<td>9. Medication reconciliation at transfer of care</td>
</tr>
<tr>
<td>10. Summary of care records</td>
</tr>
</tbody>
</table>

** These two measures are geared more toward hospital/clinic settings; however, as the behavioral health field moves in the direction of integrated care systems, it is important that agency EHRs are able to execute these functions.

**AGENCIES IMPLEMENTING TRAININGS FOR ADDICTION TREATMENT COUNSELORS**

Trainings are an important part of maintaining an advanced workforce as more and more research is conducted, changing ideas on how to help substance-using populations. Agencies that keep their staff up to date in their trainings and Continuing Education Units are better able to serve their clients. Depending on the level of certification an employee is seeking, he/she needs between 250 and 450 hours of addiction counseling training/education. Agencies can utilize funds to provide trainings in-house in order to bolster workforce development.
REFERENCES


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