

# Recovery Works Rate Sheet Appendix

## **Community-Based**

10.01.2019: The reimbursement rates for Community Services available through Recovery Works are listed below. These rates are subject to change. Maximum lifetime cap for community services is \$2,500.

Community-based services will be billed in WITS based on the individual services (as it normally has been billed).

Units per service vary. Please use the rate sheet below to determine how many units to bill.

RW Code	<u>Service</u>	<u>Rate</u>	<u>Unit</u>
R1010	ANSA Redetermination (Non Medicaid/MRO)	\$77.72	1 assessment
R1020	AOD Urine Screen	\$18.05	1 Screen
R1030	Case Management	\$14.53	1/4 hr
	Comprehensive Mental Health and Substance Use		
R1040	Disorder Assessment w/ ANSA	\$130.00	1 assessment
	Comprehensive Mental Health and Substance Use		
R1520	Disorder Assessment w/ ANSA- TELEHEALTH	\$100.00	1 assessment
R1530	Enrollment Admin Fee	\$50.00	1
R1060	Health Care Coordination Services	\$8.55	1/4 hr
R1490	HIP Power Account Contribution	\$1.00	1
R1090	Intensive Outpatient Treatment	\$130.59	3 hours
R1100	Medication	\$1.00	1
	Medication Assisted Treatment - Methadone *PA		
R1130	Required beyond 10 days	\$16.05	1 day
R1150	Medication Assisted Treatment Assessment	\$112.78	1 assessment

R1160	Medication Review	\$23.88	1/4 hr
R1170	Medication Training & Support - Family/Couple Group w/ Member	\$3.35	1/4 hr
R1180	Medication Training & Support - Family/Couple Group w/o Member	\$3.35	1/4 hr
R1190	Medication Training & Support - Family/Couple Individual w/ Member	\$18.62	1/4 hr
R1200	Medication Training & Support - Family/Couple Individual w/o Member	\$18.62	1/4 hr
R1210	Medication Training & Support - Group	\$3.35	1/4 hr
R1220	Medication Training & Support - Individual	\$18.62	1/4 hr
R1230	Mental Health Counseling- Family/Couple Group w/ Member	\$7.16	1/4 hr
R1240	Mental Health Counseling- Family/Couple Group w/o Member	\$7.16	1/4 hr
R1250	Mental Health Counseling- Family/Couple Individual w/ Member	\$28.65	1/4 hr
R1260	Mental Health Counseling- Family/Couple Individual w/o Member	\$28.65	1/4 hr
R1270	Mental Health Counseling- Group	\$7.16	1/4 hr
R1280	Mental Health Counseling- Individual	\$28.65	1/4 hr
R1290	Peer Recovery Support Services	\$8.55	1/4 hr
R1300	Psychiatric Assessment	\$26.14	1/4 hr
R1320	Skills Training and Development - Family/Couple Group w/ Member	\$4.71	1/4 hr

R1330	Skills Training and Development - Family/Couple Group w/o Member	\$4.71	1/4 hr
R1340	Skills Training and Development - Family/Couple Individual w/ Member	\$26.14	1/4 hr
R1350	Skills Training and Development - Family/Couple Individual w/o Member	\$26.14	1/4 hr
R1360	Skills Training and Development - Group	\$4.71	1/4 hr
R1370	Skills Training and Development - Individual	\$26.14	1/4 hr
R1380	Substance Use Disorder Counseling- Family/Couple Group w/ Member	\$3.65	1/4 hr
R1390	Substance Use Disorder Counseling- Family/Couple Group w/o Member	\$3.65	1/4 hr
R1400	Substance Use Disorder Counseling- Family/Couple Individual w/ Member	\$14.58	1/4 hr
R1410	Substance Use Disorder Counseling- Family/Couple Individual w/o Member	\$14.58	1/4 hr
R1420	Substance Use Disorder Counseling- Group	\$3.65	1/4 hr
R1430	Substance Use Disorder Counseling- Individual	\$14.58	1/4 hr
R1440	Supported Employment Services	\$9.17	1/4 hr
R1500	Tele-psychiatry	\$23.88	1/4 hr
R1450	Transportation - Agency Vehicle	\$10.00	per round trip
R1460	Transportation - Public	actual expense	1 trip

### **Re-Entry Services**

10.01.2019: The reimbursement rates for Re-Entry Services through Recovery Works are listed below. These rates are subject to change and are rounded to the whole dollar. Rates may vary slightly compared to rates in policy and procedure manual. Maximum lifetime cap for re-entry services is \$1,500.

#### Re-Entry Services will be claimed in WITS as one (1) service name:

1. Re-Entry Services – RW

All services are 1 unit = \$1. Reference the chart below to determine the number of units necessary for WITS billing:

<u>Service</u>	<u>Rate</u>	<u>Unit</u>
Comprehensive Assessment - CJI	\$205	1 Assessment
Case Management	\$14	1/4 hour
Intensive Outpatient Treatment	\$130	3 hours
Medication	\$1	1
Medication Assisted Treatment Assessment	\$112	1 Assessment
Medication Assisted Treatment with Daily Medication Administration (Methadone)	\$16	Day
Mental Health Counseling – Group	\$7	1/4 hour
Mental Health Counseling – Individual	\$28	1/4 hour
Peer Recovery Support Services	\$8	1/4 hour
Psychiatric Assessment	\$26	1/4 hour
Skills Training & Development – Group	\$4	1/4 hour
Skills Training & Development – Individual	\$26	1/4 hour
Substance Use Disorder Counseling – Group	\$3	1/4 hour
Substance Use Disorder Counseling – Individual	\$14	1/4 hour
Tele-psychiatry	\$23	1/4 hour
Transportation	\$1	Actual cost

Example: You have an incarcerated individual who needs treatment for his substance use disorder.

- Case Management 15 minutes a week
- Peer Recovery Support Services 3 hours per week
- Substance Use Disorder Counseling Individual 2 hours per week

Calculate the units needed for the services.

Case Management Peer Recovery Substance Use Counseling
=14 units/quarter X 4 weeks =8 units/qrt X 12 qtrs X 4 wks
=56 units/month =384 units/month =448 units/month

TOTAL = 888 units of Re-Entry Services per month

Set up a voucher for dates 10/1/2019 - 10/31/2019. Add Re-Entry Services at 888 units for October

## **Recovery Residence**

10.01.2019: The reimbursement rates for Recovery Residences' services available through Recovery Works are listed below. These rates are subject to change. Maximum lifetime housing cap per client is \$4,000. The \$4,000 includes the daily housing rate and the daily per diem.

#### Recovery Residences may only claim for one (1) service in WITS:

1. Recovery Residence – RW (per diem is included in this service)

All services are 1 unit = \$1. Reference the chart below to determine the number of units necessary for WITS billing:

<u>Service</u>	<u>Rate</u>	<u>Unit</u>
Recovery Residence - Room ONLY	\$15	Day
Recovery Residence – Room & Board	\$20	Day
Per Diem (Level 2)	\$6	Day
Per Diem (Level 3)	\$7	Day
Per Diem (Level 4)	\$7	Day

#### Example:

You are an INARR level 3 home providing Recovery Residence – Room & Board to clients over a 31 day period.

Calculate the units needed for the services.

- 1. Recovery Residence RW
  - = \$20/day X \$1/unit X 31 days
  - = \$620/month
- 2. Per Diem RW (level 3)
  - = \$7/day X \$1/unit X 31 days
  - = \$217/month

Set up a voucher for dates 10/1/2019 – 10/31/2019.

Add Recovery Residence – RW at 837 units.

## <u>Clinically Managed Care – Residential Services</u>

#### \*\*PA REQUIRED\*\*

10.01.2019: The reimbursement rates for Clinically Managed Residential Services available through Recovery Works are listed below. These rates are subject to change. These services are approved through prior authorization (PA) only.

#### **Clinically Managed Residential Services includes two services:**

- 1. Clinically Managed Low-Intensity Residential Services
- 2. Clinically Managed High-Intensity Residential Services

Reference the chart below to determine the number of units necessary for WITS billing:

RW Code	<u>Service</u>	<u>Rate</u>	<u>Unit</u>
R1470	Clinically Managed High-Intensity Residential Services	\$361.65	1 Day
R1480	Clinically Managed Low-Intensity Residential Services	\$126.46	1 Day

To submit a PA for these services, please visit <a href="https://www.in.gov/fssa/dmha/2930.htm">https://www.in.gov/fssa/dmha/2930.htm</a> to download the form. Once completed, submit to <a href="mailto:Recovery.Works@fssa.IN.gov">Recovery.Works@fssa.IN.gov</a>, and the clinical director will review.

# **Aftercare Funding Services**

1.1.2022: The reimbursement rates for Aftercare Funding Services available through Recovery Works are listed below. These rates are subject to change. Maximum lifetime cap for Aftercare services is \$1,500.

For Medication Assisted Treatment (MAT), please complete a RW Prior Authorization Form.

<u>RW</u> <u>Code</u>	<u>Service</u>	<u>Rate</u>	<u>Unit</u>
R1010	ANSA Redetermination (Non-Medicaid/MRO)	\$77.72	1 assessment
R1020	AOD Urine Screen	\$18.05	1 Screen
R1030	Case Management	\$14.53	1/4 hr
R1040	Comprehensive Mental Health and Substance Use Disorder Assessment w/ ANSA	\$130.00	1 assessment
R1510	Comprehensive Mental Health and Substance Use Disorder Assessment w/ ANSA - CJI	\$205.00	1 assessment
R1520	Comprehensive Mental Health and Substance Use Disorder Assessment w/ ANSA- TELEHEALTH	\$100.00	1 assessment
R1530	Enrollment Admin Fee	\$50.00	1
R1060	Health Care Coordination Services	\$8.55	1/4 hr
R1490	HIP Power Account Contribution	\$1.00	1
R1100	Medication	At Cost	\$1.00
R1130	Medication Assisted Treatment - Methadone *PA Required	\$16.05	1 day
R1150	Medication Assisted Treatment Assessment	\$112.78	1 assessment
R1160	Medication Review	\$23.88	1/4 hr
R1220	Medication Training & Support - Individual	\$18.62	1/4 hr
R1280	Mental Health Counseling- Individual	\$28.65	1/4 hr
R1290	Peer Recovery Support Services	\$8.55	1/4 hr
R1300	Psychiatric Assessment	\$26.14	1/4 hr
R1370	Skills Training and Development - Individual	\$26.14	1/4 hr
R1430	Substance Use Disorder Counseling- Individual	\$14.58	1/4 hr
R1440	Supported Employment Services	\$9.17	1/4 hr
R1500	Tele-psychiatry	\$23.88	1/4 hr
R1450	Transportation - Agency Vehicle	\$10.00	per round trip
R1460	Transportation - Public	At Cost	30-day bus pass or individual day bus pass