

North Carolina Department of Health and Human Services

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LME-MCO Communication Bulletin #J265

Date: September 8, 2017

To: LME-MCOs

From: Deb Goda, Behavioral Health Unit Manager, DMA

Mabel McGlothlen, Team Leader for System Performance and Project Management,

DMH/DD/SAS

Subject: Clarification of Services in an IMD

This bulletin clarifies the provision of services in an Institute for Mental Disease (IMD) as defined in CFR 435.1010 for acute and subacute inpatient psychiatric or substance use disorders. Beneficiaries age 21-64 who meet medical necessity criteria for inpatient level of care may be treated for up to 15 days per calendar month in an IMD.

The hospitals must meet the criteria for an IMD as defined in CFR 435.1010 for acute and subacute inpatient psychiatric or substance use disorders. Providers must meet/follow the requirements for inpatient level of care outlined in the Division of Medical Assistance (DMA) Clinical Coverage Policy (CCP) 8-B, Inpatient Behavioral Health Services.

Providers must contact the Prepaid Inpatient Health Plan (PIHP) for authorization of services within 48 working hours of admission. Authorization and documentation of review is required by the PIHP.

- For beneficiaries with psychiatric disorders, initial authorization is <u>limited to three days</u> with continued stay review.
- For beneficiaries with substance use disorders, initial authorization is limited to seven days.

The PHIP must comply with the Centers for Medicare & Medicaid Services (CMS) requirements, ensuring that no more than 15 days are authorized in each calendar month. For admissions spanning two

consecutive months, the total length of stay may exceed 15 days, but no more than 15 days must be authorized in each month.

Please see attached in lieu of definition.

Please contact Deb Goda at deborah.goda@dhhs.nc.gov or 919-855-4297 if you have any questions.

Previous bulletins can be accessed at http://www.ncdhhs.gov/divisions/mhddsas/joint-communication-bulletins.

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