

Background Information

Hub service payments are based on a monthly case rate which allows providers to bill for a full month of hub services so long as the client has received at least one clinical service and one health home service during the month. Because it is a monthly rate, two different providers cannot receive payment for the same client in the same month, even if a client is transferred mid-month. Partial month rates are not practical because that would also impact any new intake that occurs mid-month, anyone who changes eligibility within the month, and any discharge that occurs in the middle of the month which would have unintended consequences.

General Procedure

The Hub Administration Workgroup, with participation from all hubs, agreed that transfers from one hub to another shall be effective the first of the month. In other words, the sending provider will provide services until the last day of the month and the receiving provider will provide services beginning the first day of the new month. This means that only one provider will bill for each month which eliminates billing conflicts. It also assists in discharge planning and transfer scheduling to make the transfer go more smoothly.

What if There is an Urgent Need to Transfer Mid-Month?

There may be some very limited urgent situations where a client must transfer in the middle of the month. For example, if a person is a victim of domestic abuse and moves to another part of the state in order to escape the situation. In that situation, please use guest dosing protocols to finish out the month. Providers may work out a private payment arrangement to distribute the case rate for situations such as these but ADAP/DVHA will not participate in the agreement. We suggest using guest dosing protocols in situations such as this.

Guest Dosing and Suboxone

Suboxone is an expensive drug and is not included in the case rate. Since the billing is separate from and not tied to the case rate, two different providers may bill for Suboxone in the same month. It is essential that the Medicaid billing reflects the actual dates the Suboxone was dispensed at each provider and that the dates do not overlap.

Guest Dosing and Methadone

Since Methadone is an inexpensive drug and the drug cost is included in the case rate, providers must negotiate their own agreements around guest dosing.