

Provider Bulletin

From Molina Healthcare New Mexico, Inc.
(December 2021)

No Behavioral Health Cost Sharing Effective January 1, 2022

Effective January 1, 2022, Behavioral Health services covered by Molina Healthcare of New Mexico Marketplace plans will have no Member cost share. Pursuant to Senate Bill 317, titled “No Behavioral Health Cost Sharing” cost sharing, which includes copayments, deductibles, or co-insurance will be prohibited for covered behavioral health services. Behavioral Health services that are not subject to member cost sharing, by service type, are listed below. Payment to providers will be in accordance with the carrier’s standard reimbursement rate or at an agreed upon rate.

Member Eligibility Verification

- Possession of a Molina ID card does not guarantee Member eligibility or coverage. A Provider should verify eligibility of Molina Members prior to rendering services. Payment for services rendered is based on enrollment and benefit eligibility. The contractual agreement between Providers and Molina places the responsibility for eligibility verification on the Provider of Services.

Professional Services

- Professional services rendered by a Behavioral Health provider, except when delivered in an emergency room or urgent-care center. For services rendered in an emergency room or urgent-care center, the applicable member cost sharing applies.
- Professional services rendered by a Primary Care Provider when a Behavioral Health diagnosis is the 1st or 2nd code on the claim. A list of Behavioral Health diagnoses is included below.

Outpatient Facility Services

- Outpatient services, including professional services, delivered in a Behavioral Health facility.
- Outpatient services, including professional services, delivered in a non-Behavioral Health facility if the attending provider is a Behavioral Health provider
- Non-emergency room and non-urgent care center outpatient services, including professional services, delivered in a non-Behavioral Health facility, by a non-Behavioral Health provider, when a Behavioral Health diagnosis is the 1st or 2nd code on the claim. A list of Behavioral Health diagnoses is included below.
- Transcranial magnetic stimulation treatment services and electroconvulsive therapy services, including professional services.

Inpatient Facility Services

- Inpatient services including professional services, delivered in a Behavioral Health hospital or in the Behavioral Health department of a general acute care hospital.

- Inpatient services, including professional services, delivered in a residential treatment center.
- Inpatient services, including professional services, delivered in a general, acute care hospital when the attending provider is a behavioral health provider.
- Detoxification services, including professional services, delivered in a Behavioral Health hospital, a general acute care hospital, or a residential treatment center.
- Transcranial magnetic stimulation treatment services and electroconvulsive therapy services, including professional services.

Ancillary Services

- Clinical laboratory services, radiology services and or other imaging services when the ordering provider is a Behavioral Health provider.
- Clinical laboratory services, radiology services and other imaging services when the ordering provider is not a Behavioral Health provider, or when the ordering provider information is not present on the claim, but a Behavioral Health diagnosis code is the 1st or 2nd code on the claim.

Prescription Drugs

- Prescription drugs prescribed for Behavioral Health conditions.
- Some prescription drugs on the list below can be used for both physical and behavioral health conditions. If the prescribed drug is for a Behavioral Health condition, it must be submitted with the appropriate diagnosis code at an in-network pharmacy.
- Prescribers should include the diagnosis and ICD-10 code on all prescriptions. The diagnosis information on the prescription will help the pharmacy submit the claim accurately at the point of sale.
- If a Member receives Behavioral Health prescription from an out-of-network pharmacy, member cost share may apply with the following exceptions:
 - Services governed by the Surprise Billing Act, or
 - Out-of-network services authorized by Molina

Behavioral Health Prescription USP Category/Class Not Subject to Cost-Sharing

U.S. Pharmacopeia (USP) Therapeutic Category	U.S. Pharmacopeia (USP) Class
Anti-addiction/Substance Abuse Treatment Agents	<ul style="list-style-type: none"> • Alcohol Deterrents/Anti-craving • Opioid Dependence • Opioid Reversal Agents • Smoking Cessation Agents
Anticonvulsants	<ul style="list-style-type: none"> • Gamma-aminobutyric Acid (GABA) Augmenting Agents • Sodium Channel Agents • Anticonvulsants, Other
Antidepressants	<ul style="list-style-type: none"> • Monoamine Oxidase Inhibitors • SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors) • Tricyclics • Antidepressants, Other

Antiparkinson Agents	<ul style="list-style-type: none"> • Anticholinergics • Dopamine Agonists
Antipsychotics	<ul style="list-style-type: none"> • 1st Generation/Typical¹ • 2nd Generation/Atypical² • Treatment-Resistant

Behavioral Health Prescription USP Category/Class Not Subject to Cost-Sharing

Anxiolytics	<ul style="list-style-type: none"> • SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors) • Benzodiazepines • Anxiolytics, Other
Bipolar Agents	<ul style="list-style-type: none"> • Mood Stabilizers • Bipolar Agents, Other
Cardiovascular Agents	<ul style="list-style-type: none"> • Alpha-adrenergic Blocking Agents
Central Nervous System Agents	<ul style="list-style-type: none"> • Attention Deficit Hyperactivity Disorder Agents, Amphetamines • Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines • Central Nervous System Agents, Other
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)	<ul style="list-style-type: none"> • Not applicable – no class assigned by USP
Sleep Disorder Agents	<ul style="list-style-type: none"> • Sleep Promoting Agents

- The following is the list of drugs that require a Behavioral Health diagnosis to qualify for a \$0 Cost Share.

Generic Drug Name	Generic Product Identifier (GPI)
Liothyronine Sodium	28100020*****
Clonidine	36201010*****
Guanfacine HCl	36201025*****
Prazosin HCl	36202030*****
Diphenhydramine	41200030*****
Carbamazepine (Antipsychotic)	59400015*****
Pimozide	62000030*****
Deutetrabenazine	62380030*****
Tetrabenazine	62380070*****
Valbenazine Tosylate	62380080*****
Pregabalin (Once-Daily)	62540060*****
Divalproex Sodium	72500010*****
Valproate Sodium	72500020*****
Valproic Acid	72500030*****
Carbamazepine	72600020*****

¹ Includes long acting injectables

² Includes long acting injectables

Gabapentin	72600030*****
Lamotrigine	72600040*****
Oxcarbazepine	72600046*****
Pregabalin	72600057*****
Topiramate	72600075*****
Pramipexole Dihydrochloride	73203060*****

Behavioral Health Diagnosis Codes

The ICD-10 code set contains a set of diagnosis codes that begin with “F” that includes behavioral health conditions subject to NM Senate Bill 317. The ICD-10 “F” codes need to be in the 1st or 2nd diagnosis on the claim to be identified as a Behavioral Health service with the following exceptions:

- F01.x – F09.9x – Mental disorders due to known physiological conditions
- F70.x – F79.9x – Mild intellectual disabilities
- F80.x – F83.9x – Pervasive and specific development disorders
- F85.x – F89.9x – Pervasive and specific development disorders
- F91.x – F98.9x – Behavioral and emotional disorders with onset usually occurring in childhood adolescence

References: Please see attached

**Thank you for your commitment to serving
Molina Healthcare of New Mexico Members and the community!**

STATE OF NEW MEXICO

OFFICE OF SUPERINTENDENT OF INSURANCE

SUPERINTENDENT OF INSURANCE
Russell Toal



DEPUTY SUPERINTENDENT
Jennifer A. Catechis

BULLETIN 2021-009

June 14, 2021

TO: ALL INSURERS LICENSED TO SELL HEALTH INSURANCE IN NEW MEXICO

RE: SENATE BILL 317: APPLYING COST-SHARING WAIVERS TO BEHAVIORAL HEALTH SERVICES

Senate Bill 317, titled “No Behavioral Health Cost Sharing”, was signed into law by Governor Michelle Lujan Grisham on April 8, 2021, will become effective January 1, 2022 and is scheduled to expire on December 31, 2026. Among other advancements, SB317 prohibits cost sharing, including imposition of a deductible, for behavioral health (“BH”) services covered by any health care plan “delivered, issued for delivery or renewed in New Mexico”. To ensure that all New Mexicans receive equal treatment with respect to health plan coverage for BH services, the application of the prohibition on cost-sharing for BH services must be standardized across all subject health plans on January 1, 2022. To that end, the New Mexico Office of Superintendent of Insurance (“OSI”) directs every subject health plan to use the following criteria to identify BH services that are not subject to cost sharing, listed by service type.

Professional Services

- Professional services rendered by a BH provider, except when delivered in an emergency room or urgent-care center.
- Services rendered by a primary care provider when a BH diagnosis is the 1st or 2nd code on the claim (see definition of BH diagnoses below.)

Outpatient Facility Services

- Outpatient services, including professional services, delivered in a BH facility.
- Outpatient services, including professional services, delivered in a non-BH facility if the attending provider is a BH provider.
- Non-emergency room and non-urgent care center outpatient services, including professional services, delivered in a non-BH facility, by a non-BH provider, when a BH diagnosis is the 1st or 2nd code on the claim.
- Transcranial magnetic stimulation treatment services and electroconvulsive therapy services, including professional services.

Inpatient Facility Services

- Inpatient services, including professional services, delivered in a BH hospital or in the BH department of a general acute care hospital.
- Inpatient services, including professional services, delivered in a residential treatment center.
- Inpatient services, including professional services, delivered in a general, acute care hospital when the attending provider is a BH provider.
- Detoxification services, including professional services, delivered in a BH hospital, a general acute care hospital, or a residential treatment center.
- Transcranial magnetic stimulation treatment services and electroconvulsive therapy services, including professional services.

Ancillary Services

- Clinical laboratory services, radiology services and other imaging services when the ordering provider is a BH provider.
- Clinical laboratory services, radiology services and other imaging services when the ordering provider is not a BH provider, or when the ordering provider information is not present on the claim, but a BH diagnosis code is 1st or 2nd on the claim.

Prescription Drugs

- A prescription drug covered on the plan's drug formulary or authorized by the plan when the drug is in a USP therapeutic category and class combination as specified on the attached list. While examples of drugs in a class are provided, the lists are not all inclusive and the carrier shall ensure its Pharmacy Benefits Manager is able to identify all drugs included in the listed categories and class combinations.
- Special considerations apply for the off-label use of drugs for the treatment of BH conditions. To that end, the attached list includes some non-BH USP therapeutic categories and classes of drugs that might be used off-label for BH conditions. If the prescriber is a BH provider, the drug is to be considered a BH drug.
 - A BH provider might prescribe drugs from other therapeutic categories and classes that are not on the attached list. It is up to the carrier to determine whether the drug should be treated as a BH drug for cost-sharing purposes.
 - Cost-sharing may be applied to these non-BH drugs if the prescriber is not a BH provider. However, at least monthly, a carrier shall analyze utilization of these drugs to identify members who likely filled these prescriptions for treatment of a BH condition. When confirmed with the prescriber, carriers will reimburse these identified members their cost-sharing expenditures for these drugs and take appropriate steps to remove the cost sharing requirement for the member when prescriptions for the specified drug(s) are filled in the future.

These directives apply to cost-sharing policies. Carriers may continue to apply their plans' drug formulary policies, prior authorization and utilization management policies, and other drug coverage policies. For example, if a carrier's formulary covers the generic version of a brand drug, there is nothing in the bill or in this guidance that would require the carrier to pay for the brand name product.

If a member receives BH services subject to this guidance from an out-of-network provider, the plan may impose cost-sharing for those services unless:

1. Reimbursement for the service is governed by the Surprise Billing Act; or
2. The plan specifically authorized the out-of-network provider to deliver the service(s).

If a plan is required to reimburse a member for cost sharing pursuant to this guidance, the plan may recoup the reimbursement amount from the contracted provider that accepted the cost sharing from the member, if authorized under the terms of the provider agreement.

BH Diagnosis Codes

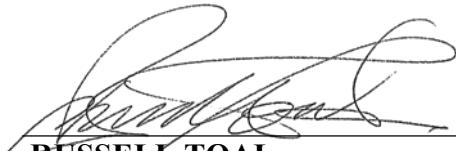
The International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) contains a set of diagnosis codes that begin with "F" that includes behavioral health conditions subject to SB317. Carriers are directed to use the presence of an ICD-10-CM "F-code" in the 1st or 2nd diagnosis as needed to identify a BH service, except for the following code sets:

- F01.x – F09.9x - Mental disorders due to known physiological conditions
- F70.x – F79.9x - Mild intellectual disabilities
- F80.x – F83.9x - Pervasive and specific developmental disorders
- F85.x – F89.9x - Pervasive and specific developmental disorders
- F91.x – F98.9x - Behavioral and emotional disorders with onset usually occurring in childhood and adolescence

The OSI will, at times, reevaluate these directives based on carrier and other stakeholder input and on claims data.

As always, OSI thanks carriers for their partnership and cooperation.

ISSUED this 14th day of June, 2021.


RUSSELL TOAL
Superintendent of Insurance



Behavioral Health Prescription Medications Not Subject to Cost-Sharing

U.S. Pharmacopeia (USP) Therapeutic Category	U.S. Pharmacopeia (USP) Class (Carriers must cross-reference to their comparable therapeutic classes)	<u>EXAMPLES</u> OF MEDICATIONS IN THE CLASS (Not intended to be all-inclusive)
Anti-addiction/Substance Abuse Treatment Agents	Alcohol Deterrents/Anti-craving	Acamprosate Calcium, Disulfiram, Naltrexone, Naltrexone Hydrochloride
	Opioid Dependence	Buprenorphine, Buprenorphine/Naloxone Hydrochloride, Lofexidine, Naltrexone
	Opioid Reversal Agents	Naloxone Hydrochloride
	Smoking Cessation Agents	Bupropion Hydrochloride, Nicotine Polacrilex, Varenicline Tartrate
Anticonvulsants	Gamma-aminobutyric Acid (GABA) Augmenting Agents	Gabapentin, Pregabalin
	Sodium Channel Agents	Carbamazepine, Oxcarbazepine
	Anticonvulsants, Other	Divalproex sodium, Lamotrigine, Topiramate, Valproic Acid
Antidepressants	Monoamine Oxidase Inhibitors	Isocarboxazid, Phenelzine Sulfate, Selegiline, Tranylcypromine Sulfate
	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	Citalopram Hydrobromide, Desvenlafaxine, Duloxetine Hydrochloride, Escitalopram Oxalate, Fluoxetine Hydrochloride, Fluvoxamine Maleate, Nefazodone Hydrochloride, Paroxetine Hydrochloride, Sertraline Hydrochloride, Trazodone Hydrochloride, Venlafaxine Hydrochloride
	Tricyclics	Amitriptyline Hydrochloride, Amoxapine, Clomipramine Hydrochloride, Desipramine Hydrochloride, Doxepin Hydrochloride, Imipramine Hydrochloride, Imipramine Pamoate, Nortriptyline Hydrochloride, Protriptyline Hydrochloride Trimipramine Maleate
	Antidepressants, Other	Maprotiline Hydrochloride, Bupropion Hydrobromide, Bupropion Hydrochloride, Mirtazapine,



Behavioral Health Prescription Medications Not Subject to Cost-Sharing

U.S. Pharmacopeia (USP) Therapeutic Category	U.S. Pharmacopeia (USP) Class (Carriers must cross-reference to their comparable therapeutic classes)	<u>EXAMPLES</u> OF MEDICATIONS IN THE CLASS (Not intended to be all-inclusive)
		Aripiprazole, Quetiapine Fumarate, Esketamine Hydrochloride, Chlordiazepoxide/ Amitriptyline Hydrochloride, Olanzapine/ Fluoxetine, Perphenazine/ Amitriptyline Hydrochloride
Antiparkinson Agents	Anticholinergics	Benzotropine Mesylate, Diphenhydramine Hydrochloride, Trihexyphenidyl Hydrochloride
	Dopamine Agonists	Pramipexole Dihydrochloride (for augmentation in severe depression)
Antipsychotics	1st Generation/Typical ¹	Chlorpromazine, Fluphenazine, Haloperidol, Loxapine, Perphenazine, Pimozide, Prochlorperazine, Thioridazine, Thiothixene, Trifluoperazine
	2nd Generation/Atypical ²	Aripiprazole, Asenapine, Brexpiprazole, Cariprazine Hydrochloride, Iloperidone, Lurasidone Hydrochloride, Olanzapine, Pimavanserin Tartrate, Quetiapine Fumarate, Paliperidone, Risperidone, Ziprasidone
	Treatment-Resistant	Clozapine
Anxiolytics	SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/ Serotonin and Norepinephrine Reuptake Inhibitors)	Duloxetine Hydrochloride, Escitalopram Oxalate, Paroxetine Hydrochloride, Sertraline Hydrochloride, Venlafaxine Hydrochloride
	Benzodiazepines	Alprazolam, Chlordiazepoxide, Clonazepam, Clorazepate Dipotassium, Diazepam, Midazolam, Lorazepam, Oxazepam
	Anxiolytics, Other	Buspirone Hydrochloride, Doxepin Hydrochloride, Hydroxyzine Hydrochloride, Hydroxyzine Pamoate, Meprobamate

¹ Includes long-acting injectables

² Includes long-acting injectables



Behavioral Health Prescription Medications Not Subject to Cost-Sharing

U.S. Pharmacopeia (USP) Therapeutic Category	U.S. Pharmacopeia (USP) Class (Carriers must cross-reference to their comparable therapeutic classes)	<u>EXAMPLES</u> OF MEDICATIONS IN THE CLASS (Not intended to be all-inclusive)
Bipolar Agents	Mood Stabilizers	Carbamazepine, Divalproex Sodium, Lamotrigine, Lithium Carbonate, Lithium Citrate
	Bipolar Agents, Other	Aripiprazole, Asenapine, Lurasidone, Olanzapine, Olanzapine Pamoate, Quetiapine Fumarate, Risperidone, Ziprasidone Hydrochloride
Cardiovascular Agents	Alpha-adrenergic Blocking Agents	Prazosin Hydrochloride (for treatment of PTSD)
Central Nervous System Agents	Attention Deficit Hyperactivity Disorder Agents, Amphetamines	Amphetamine, Dextroamphetamine Sulfate, Dextroamphetamine Saccharate/ Amphetamine Aspartate/ Dextroamphetamine Sulfate/ Amphetamine Sulfate, Lisdexamfetamine Dimesylate, Methamphetamine Hydrochloride
	Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines	Atomoxetine Hydrochloride, Clonidine Hydrochloride, Dexmethylphenidate Hydrochloride, Guanfacine Hydrochloride, Methylphenidate Hydrochloride
	Central Nervous System Agents, Other	Valbenazine, Deutetrabenazine
Hormonal Agents, Stimulant/Replacement/ Modifying (Thyroid)	Not applicable – no class assigned by USP	Liothyronine (for augmentation in severe depression)
Sleep Disorder Agents	Sleep Promoting Agents	Eszopiclone, Zolpidem (IR, ER, CR), Suvorexant, Zaleplon, Estazolam, Flurazepam, Quazepam, Temazepam, Triazolam