

FAQs for 2.5.19 SUD Monthly Provider Call

Q1: I am asking for clarification on supportive counseling. On the October 4th FAQ call, SUD Waiver Q22 asked if H0004 (Supportive Counseling) billable for high school graduates? A22 states yes, if the high school graduate has 2 years documented working in the behavioral health/substance use field. The confusion I have is according to Chapter 503, in the Behavioral Health Rehabilitation Services, it states staff credentials must have a Bachelor's (page 28). Is it different for Chapter 504? I could not find anything on staff credentialing except for the Q&A I quoted.

A1: Make sure you are looking at the most current Chapter 503:
[https://dhr.wv.gov/bms/Pages/Chapter 503 LBHC Services.aspx](https://dhr.wv.gov/bms/Pages/Chapter%20503%20LBHC%20Services.aspx)

If you look at Chapter 503.17.3 - Behavioral Health Counseling Supportive, Individual (H0004), it says for Staff Credentials: Individuals providing this service must have a bachelor's degree in a human services field or a high school diploma or GED with two years documented experience in mental health and/or substance abuse services. Staff must be properly supervised according to BMS policy on clinical supervision. The service may be provided in a variety of settings by appropriately designated, trained, and supervised staff.

503.17.4 - Behavioral Health Counseling Supportive, Group, (H0004 HQ) says the same.

Q2: What type of documentation do you need on file for the 2 years working experience in the behavioral health/substance use field? When it states 2 years of documented work experience, what do I need to have for my high school diploma staff?

A2: You would need to verify the employment listed on their application.

Q3: What if I have a client that goes into Legends or Waves (SUD) and for some odd reason does not qualify for Presumptive Eligibility? (The main reason would be that they have had Presumptive Eligibility in the past year.) So, we would give the client BHHF Charity Care. Now once the client gets into the program, a staff member will complete the full inroads application for them. If the client is eligible for Medicaid, they will back date the service coverage date. Currently, to get an Authorization for Rehab (since they are now eligible and the coverage date has backed up), we would just simply go in and switch the authorization from BHHF Charity Care to Rehab. How are we going to be able to do this now that we no longer do BHHF authorizations through KEPRO? Sometimes we do not catch that their insurance has changed for a few weeks. So, we would end up being past our ten day rule.

A3: If a provider receives notice of retroactive Medicaid coverage, submissions can be sent to KEPRO with the beginning date of coverage. Regarding payment from BBH for the period not covered by Medicaid, please contact BBH directly.