



MEMORANDUM

To: Mainstream Medicaid Managed Care Plans, Health and Recovery Plans (HARPs), HIV Special Needs Plans (HIV SNPs), Medicaid Advantage Plus (MAP) Plans, and Assertive Community Treatment (ACT) Providers

From: New York State (NYS) Office of Mental Health (OMH)

Date: October 1, 2024

Subject: Rate Approval: ACT Reimbursement and Billing Changes – Division of Budget (DOB) Approval

Dear Health Plan Administrators,

On May 23, 2024, OMH notified Mainstream Medicaid Managed Care Plans, HARPs, HIV SNPs, MAP Plans (collectively referred to as “MMCPs” herein), and ACT providers of billing and reimbursement changes for OMH ACT programs. This memorandum is being sent to alert MMCPs and ACT providers that DOB approval was received on September 24, 2024, and the following system changes must be implemented:

Retrospective Rate Changes for Adult and Youth ACT Teams:

Per Chapter 57 of the Laws of 2022 and Chapter 451 of the Laws of 2019, MMCPs are required to pay claims based on the effective date of the rate changes. As a result, MMCPs must complete necessary systems edits to ensure payable ACT claims for applicable dates of service, October 1, 2023 and thereafter, are reimbursed as described in the [May 23, 2024 memorandum](#). MMCPs must complete these activities as soon as possible but no later than 90 days from this notification, **December 31, 2024**.

Additionally, with this DOB approval, the existing 48 and 36 Slot Youth ACT teams will be reimbursed as 36 and 28 Slot teams respectively to be consistent with their licensure, and the adjusted rates will be paid retroactively for those converted slots back to October 1, 2023. To support MMCPs’ system configurations, the State will provide a list of Adult and Youth ACT teams and their capacity transition at such time their operating certificates have been updated.

Prospective Rate Code Changes for Youth ACT Teams:

Beginning January 1, 2025, Youth ACT teams will no longer bill using rate codes 4508, 4509, and 4511, and should utilize new youth rate codes 4513 - 4515 and their associated procedure codes and modifiers. Please note, there is no rate code change to Adult ACT teams. MMCPs and Youth ACT teams must ensure that their systems are configured to comply with these billing changes for dates of service on January 1, 2025, and thereafter.

Please refer to the [Mandated Rate Update: ACT Reimbursement and Billing Changes \(May 23, 2024\)](#) for the original notification distributed to MMCPs and ACT providers. The [Assertive Community Treatment \(ACT\) - Regional Rate](#) file on the [Medicaid Reimbursement Rates \(ny.gov\)](#) webpage has been updated to reflect the new ACT Regional Rates.

Please note: This document is only being transmitted electronically. No hard copy will be forthcoming. If you have any questions regarding these changes, please contact OMH Managed Care by phone at 518-402-2822 or by email at BHO@omh.ny.gov (MMCP inquiries) or OMH-Managed-Care@omh.ny.gov (provider inquiries).