

Medicare Intensive Outpatient Services

Credentialing, contracting and billing requirements for Medicare-Certified Opioid Treatment Programs to provide Intensive Outpatient Services

Overview

To help increase access to behavioral health services, Medicare now allows for reimbursement of Intensive Outpatient Services (IOP) provided by Medicare certified Opioid Treatment Programs (OTPs) for the treatment of opioid use disorder (OUD). This provision, outlined in the [CY 2024 Physician Fee Schedule for OTPs](#) final rule* released by CMS, applies to facilities and agencies effective Jan. 1, 2024. The provision does not apply to individually licensed clinicians.

Please review the following guidance and information OTPs should know to provide IOP under this provision.

IOP credentialing requirements

Currently contracted OTP provider	Out-of-network (non-contracted) OTP provider
- Complete the Agency Specialty Attestation Form - Check the box for “Medicare Intensive Outpatient (IOP) in Opioid Treatment Program (OTP)”, if your program meets the requirements In addition to your current credentialing requirements as a network OTP, you must also: - Have state license for IOP and hold a valid accreditation and/or site audit or state survey for IOP, if required by state - Be a Medicare-certified OTP and be listed on the CMS OTP provider site Providers in Minnesota: Please contact your Provider Relations Advocate to begin the IOP credentialing process.	- Submit an agency application - Have state license for OTP and IOP, and hold a valid accreditation and/or site audit or state survey for IOP, if required by state - Be a Medicare-certified OTP and be listed on the CMS OTP provider site - Certification from the Substance Abuse and Mental Health Services Administration (SAMHSA) - Current Drug Enforcement Administration (DEA) and/or Controlled Dangerous Substance (CDS) Certificate (where required by state), or acceptable substitute, in each state where the provider practices Providers in Minnesota: Please contact the Network Management representative for your state. If you’re not able to reach them, you can call the Provider Service Line at 1-877-614-0484.

Treatment requirements

- Certified IOP providers, at approved individual locations, may begin rendering services once their credentialing application is approved by Optum Behavioral Health.
- Each service must be medically reasonable and necessary and cannot be duplicative of any service paid for under any bundled payments billed for an episode of care in a given week.



Provider Quick Reference Guide

- **Prior authorization is required before IOP services are delivered in an OTP setting**, unless the service meets the criteria outlined under [42 CFR 422.112\(b\)\(8\)\(i\)\(B\)](#) or is otherwise indicated in the member plan documents. This applies to both in-network and out-of-network facilities and agencies.
- Patients must receive **a minimum of 9 hours of IOP services per week** (a consecutive 7-day period). Review the Medicare [level of care criteria](#) for more information.
- IOP services must be **delivered face to face**. There is no coverage for these services if rendered virtually via telehealth.

As permitted by state law and consistent with scope of practice requirements, the following practitioners may deliver IOP services furnished in a Medicare-certified OTP setting:

- Physicians
- Nurse practitioners
- Physician assistants
- Clinical psychologists
- Clinical social workers
- Mental health counselors
- Marriage and family therapists
- Any other non-physician practitioners as defined in section [1842\(b\)\(18\)\(C\)](#) of the Act

Billing guidelines

- Claims submitted for IOP services rendered in a Medicare Certified OTP setting must include G0137 as an add-on code.
 - The 9 services must be completed within the 7-contiguous day period, per Medicare billing guidelines. Claims cannot be prorated if fewer services are provided during that period.
 - Please reference [Chapter 39 - Opioid Treatment Programs \(OTPs\)](#) or the [CY 2024 Physician Fee Schedule](#) for OTPs for additional details on how to bill for G0137.
- For providers who are already contracted with Optum Behavioral Health for Medicare OTP services, the G0137 code has been added to your outpatient fee schedule.

Questions?

Please contact the Network Management contract representative [for your state](#) or call the Provider Services Line at **1-877-614-0484**.

Resources

[CMS IOM 100-02, Medicare Benefit Policy Manual](#)

- [Chapter 17 - Opioid Treatment Programs \(OTPs\)](#)

[CMS IOM 100-04, Medicare Claims Processing Manual](#)

- [Chapter 1 - General Billing Requirements](#)
- [Chapter 39 - Opioid Treatment Programs \(OTPs\)](#)