

York County
Commissioners

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**YORK/ADAMS
DRUG & ALCOHOL COMMISSION**

Recovery on the Horizon

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Memorandum of Importance

DATE: December 12, 2018

TO: YADAC Contracted Providers; YADAC Staff

FROM: Billie Kile, Assistant Administrator *BK*

SUBJECT: SCA PARAMETERS FOR FUNDING INDIVIDUALS NEEDING DRUG AND ALCOHOL TREATMENT

Effective: Immediately

THIS MEMO SUPERSEDES ANY PREVIOUS MEMOS REGARDING FUNDING PARAMETERS

This memo is to serve as notice that in order to safeguard Commission treatment funding; the SCA shall enforce the following funding parameters immediately:

1. As the Commission is the payer of last resort, the SCA shall no longer fund individuals for treatment who have private insurance substance abuse coverage including, but not limited to: Medical Assistance, Community Care Behavioral Health, private insurance, etc.

Community Care Behavioral Health has been made aware of this determination and has offered to assist with any and all concerns with coverage under CCBH. Please reach out to the York/Adams HealthChoices Unit directly for assistance. They may be contacted at: 717-771-9900.

2. If requesting the SCA to fund individuals who have private insurance coverage, but whose insurance does not have substance abuse benefits for the recommended level of care, the SCA **MUST** receive documentation of the lack of substance abuse benefits prior to SCA funding approval.

In the event that individuals are recommended for outpatient treatment, this documentation must be received with the invoice.

In the event that individuals are recommended for inpatient treatment, the documentation must be submitted with the Request for Authorization (RFA.)

Providers may utilize SCA funding for Withdrawal Management without providing the insurance denial upon submission of the RFA. However, appropriate documentation must be submitted to the SCA with the invoice for funding to be released. Further, pregnant females are considered a priority population and therefore may receive approval for treatment admission without insurance denial documentation for all levels of care, however the denial **MUST** be submitted with the invoice or services rendered will not be funded.

3. The Commission shall no longer fund private insurance co-pays or deductibles.

The Commission recognizes that these changes may impact the ability for individuals to access substance abuse benefits. It is the Commission's expectation that Providers advocate for individuals including appealing insurance decisions in addition to securing non-participating contracts with insurance companies or warm-hand off to providers who do accept the insurance.

Please be aware that the information above is subject to change and providers will be notified of such changes, should they occur.