# Update to American Society of Addition Medicine (ASAM) Value Based Payment (VBP) Case Rate Arrangement

This Notice is to alert in network Providers to upcoming reprocessing of claims submitted for American Society of Addition Medicine (ASAM) 1.0 services in the Value Based Payment (VBP) arrangement.

As stated in **CBH Provider Notice: April 4, 2022**, all submitted encounters for service dates beginning April 1, 2022, were adjudicated for one unit. Providers were instructed to bill claims with the unit amounts that match the service provided, with CBH planning to reprocess the claim at a later time to reflect the billed unit amounts. This temporary process was put in place to allow timely adjudication and payment of claims as the ASAM 1.0 level of care transitioned to the case rate payment arrangement.

Reprocessing of claims will be completed on the back end and no action is required of providers at this time. Providers will be able to track the back out and reprocessing of the claims on the 835 Remittance Advice.

Moving forward, remittance reports will reflect the unit amounts as submitted. The case rate will be present on the 835 Remittance Advice with the case rate billing information and the service date of the claim that triggered the case rate.

- Providers should continue to submit all claims for every service that was delivered to the Member. Claim submission should not be restricted to the fewest number of billable services that are minimally required for the case rate payment.
- All treatment services are set at a $0 rate on the provider's contract (Schedule A).
- The case rate is included on the provider's contract (Schedule A) and includes a dollar amount, **BUT** Providers should not bill directly for this service. If the case rate for ASAM OP service is billed, the claim will reject.
- The case rate will automatically be paid when the provider bills for the required number of qualifying services.
- The case rate will be retracted when the supporting claims are backed out via provider self-audits or CBH Compliance audit. Rejected or denied claims will not count toward the encounter requirement.

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Please contact Claims Manager **Nil Gok** or your assigned CBH Claims Technical Analyst with questions.