Outpatient Services

Service Name	MEDICATION MANAGEMENT
Funding Source	Medicaid Behavioral Health Services (Registered service, does not require prior authorization under this funding source)
Setting	Medical office, clinic, hospital, or other appropriate outpatient setting
Facility License	Hospital, medical clinic, mental health center, substance abuse treatment center
Basic Definition	Medication Management is the level of outpatient treatment where the sole service rendered by a qualified prescriber is the evaluation of the individual's need for psychotropic medications, provision of a prescription, and ongoing medical monitoring of those medications.
Service Expectations	• Medical evaluation • Medication monitoring routinely and as needed • Client education pertaining to the medication to support the individual in making an informed decision for its use. • The service provider must make a good faith attempt to coordinate care with the individual's primary medical provider
Length of Services	As often and for as long as deemed medically necessary and client/guardian continues to consent
Staffing	Psychiatrist, or other physician qualified to evaluate the need for medication and provide this service, Advanced Practice Registered Nurse (APRN), Physician Assistant (PA) or Nurse Practitioner (NP) supervised by a psychiatrist or other physician qualified to evaluate the need or and provide this service. • Psychiatrist, or other physician qualified to evaluate the need for medication and provide this service • Advanced Practice Registered Nurse (APRN), Physician Assistant (PA) or Nurse Practitioner (NP) supervised by a psychiatrist or other physician qualified to evaluate the need for and provide this service
Staffing Ratio	As per physician or approved designee caseload
Hours of Operation	Generally outpatient, Monday through Friday, day hours.
Desired Individual Outcome	Stabilization/resolution of psychiatric symptoms for which medication was intended as an intervention
Rate	NMMCP: CPT code based on occurrence and is not time-limited. See NMMCP rate schedule BHS: See BHS rate schedule