Behavioral Health Rate Study — Provider FAQ

Q1. Is participation in the rate study mandatory or voluntary for selected providers? Are there any regulatory or contractual requirements, or consequences for a provider that elects not to participate?

A: In accordance with the HOPE Act, MDH requests that providers selected for the rate study participate fully and respond promptly to requests for information, clarification, and validation throughout the study. Limited provider participation may require the Department to supplement the analysis with publicly available or other external data sources that may not fully reflect provider operations or costs.

Q2. How were providers selected to participate in the initial phase of the study?

A: All Providers for each level of care are included in the selection for the cost study analysis. Please review the Provider Notification letter (attached after the FAQs).

Q3. What specific role does Myers and Stauffer serve in conducting this survey?

A: The Myers and Stauffer team's role is to develop and utilize a cost-report survey to collect provider cost data, provide training and support to assist providers in completing the cost-report survey, and complete analysis of the cost data once collected. Myers and Stauffer's work will be informed by MDH, the Maryland Health Care Commission (MHCC), and the Behavioral Health Rate Setting Methodology Workgroup, as created by Chapter 218, Laws of 2026.

Q4. How will the information collected be used beyond the development of the rate analysis?

A: The scope of this rate-setting project is limited to the development and implementation of transparent, cost–based reimbursement methodologies for behavioral health services.

Q5. Will any agency-specific information ever become public, or will all data remain confidential?

A: Data collected during this rate-setting process will remain de-identified to MDH and MHCC as well as to the general public.

Q6. What legal or administrative safeguards are in place to protect participating agencies' confidential financial and operational information?

A: Myers and Stauffer have administrative, physical, and technical safeguards in place to protect data that is received. They will also adhere to all guidelines as accepted by industry standards and all applicable federal, state, and local information security laws, including the Maryland Department of Technology Information Security Policy. They have implemented confidentiality policies and procedures as required by law, including without limitation those policies and procedures required under the administrative simplification section of HIPAA and the accompanying regulations.

Q7. Could participation expose agencies to additional regulatory review or scrutiny if their operational costs, staffing models, or financial data differ significantly from more established providers?

A: No. All provider data will be aggregated and de-identified before MDH receives it.

Q8. Is an exemption, deferral, or modified participation available for newly established providers?

A: No, in accordance with the HOPE Act, MDH and MHCC request that providers selected for the rate study participate fully and respond promptly to requests for information, clarification, and validation throughout the study. Limited provider participation may require the Department to supplement the analysis with publicly available or other external data sources that may not fully reflect provider operations or costs. "Modified" participation is not available as providers are expected to complete the cost-report fully and accurately.

Q9. Will requests for a submission extension beyond the August 28, 2026 due date be considered?

A: No, in accordance with the HOPE Act, MDH and MHCC request that providers selected for the rate study participate fully and respond promptly to requests for information, clarification, and validation throughout the study. Limited provider participation may require the Department to supplement the analysis with publicly available or other external data sources that may not fully reflect provider operations or costs. Due to the timelines established by Chapter 218, Laws of 2026, we request that all cost surveys be submitted by the August 28, 2026 due date.

Q10. My organization received multiple emails/letters. Do we need to submit a cost survey for each email/letter we received?

A: No. Please include all costs for one Maryland provider number. Include all site locations under the main provider number together. For example, if your provider number is 9999900 and you have site 00, site 01, and site 02, all three sites should be on one cost survey. Also, if your organization has multiple locations and/or provider numbers, include all locations on one cost survey and identify them on Tab -Location Info. For example, if you are an OMHC and you have a different provider number for each OMHC, each OMHC should be included on the same cost survey.

Q11. Does the PRP (Psychiatric Rehabilitation Program) rate also include RRP (Residential Rehabilitation Program) services?

A: Yes. Applicable modifiers for Residential Rehabilitation Program (RRP) clients are included in PRP Procedure Codes. Room and Board are not Medicaid billable and thus are not included in the PRP codes.

Q12. Which category do Supported Employment services fall under — PRP or another category?

A: PRP Procedure Code S9445 includes a supported employment program that has its own Provider type and can be reported in the other category. Supported Employment has its own Procedure Codes (H2023, H2024, H2024-21, H2026, H2026-21, and S9445-52) which can also be captured in the other category.

Q13. What distinguishes a Level 1 SUD program from a Level 2 SUD program?

A: SUD levels of care are based on ASAM 3 criteria. Level 1 providers must have a BHA license as SUD level 1 outpatient (per COMAR 10.63.03.06 requirements) and level 2 are 2.1 Intensive Outpatient program (per COMAR 10.63.03.03 requirements) and 2.5 Partial Hospitalization (per COMAR 10.63.03.07 requirements).

Maryland
DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Meena Seshamani, M.D., Ph.D., Secretary

July 22, 2026

Dear Administrator:

The Maryland Department of Health (MDH), through the Behavioral Health Administration (BHA) and Maryland Medicaid, is conducting a statewide Behavioral Health Rate Study pursuant to the Heroin and Opioid Prevention Effort (HOPE) and Treatment Act of 2017. The purpose of this study is to collect current provider cost information to support the modernization of Maryland's behavioral health reimbursement methodology and inform future rate setting.

MDH has contracted Myers and Stauffer LC to conduct the study, collect provider data, and develop the rate analysis.

Your organization has been identified as a provider included in the initial phase of the rate study because it provides one or more of the following services:

- Outpatient Mental Health Clinic (OMHC)
- Psychiatric Rehabilitation Program (PRP)
- Substance Use Disorder (SUD) Level 2 services, including Intensive Outpatient Programs (IOPs) and Partial Hospitalization Programs (PHPs)

Your participation is essential to the success of this effort. A comprehensive and representative data set is necessary to accurately evaluate the costs of delivering these services and to support future reimbursement decisions.

Please confirm receipt of this letter by e-mailing MDBHACostSurvey@mslc.com with the name and contact information of the main contact for this exercise. Include your provider name and Medicaid provider number in your response.

In accordance with the HOPE Act, MDH requests that providers selected for the rate study participate fully and respond promptly to requests for information, clarification, and validation throughout the study. Limited provider participation may require the Department to supplement the analysis with publicly available or other external data sources that may not fully reflect provider operation or costs.

Myers and Stauffer will release the cost survey to providers by **July 24, 2026**. The cost survey and instructions document can be downloaded at https://myersandstauffer.com/provider-resources/maryland/maryland-behavioral-health-administration/. Cost survey responses will be due by **August 28, 2026**.

To support providers throughout the process, Myers and Stauffer will conduct training webinars during the week of **July 27, 2026**, which will include detailed instructions for completing the survey. These sessions will be recorded and made available for providers unable to attend live. The training will be conducted on:

- Tuesday, July 28, 2026 from 11:00 a.m. to 12:30 a.m.
- Thursday, July 30, 2026 from 2:30 p.m. to 4:00 p.m.

In addition, Myers and Stauffer will host optional office hours during the weeks of **August 3 and August 17** to answer questions and provide technical assistance. Office hours will be conducted on:

- Wednesday, August 5, 2026 from 1:00 p.m. to 2:00 p.m.
- Tuesday, August 18, 2026 from 1:00 p.m. to 2:00 p.m.

Webinar invitations and participation instructions will be distributed separately.

After surveys are submitted, Myers and Stauffer will review each submission and may contact providers to clarify responses or request additional information. Following completion of the analysis, Myers and Stauffer will develop rate models for the participating provider types and deliver a final rate analysis report to MDH by January 31, 2027.

All provider-specific information submitted during the study will remain confidential. Myers and Stauffer will maintain all individual provider data, and MDH will receive only aggregated, de-identified information.

Please know that the cost survey was informed by input from members of the Behavioral Health Rate Methodology Modernization Workgroup established by SB 39/HB 772. The workgroup consists of various stakeholders, including community behavioral health and substance use providers, legislative representatives from the Senate and House of Delegates, the Community Behavioral Health Association, the Maryland Addiction Directors Council, and the Maryland Hospital Association.

Thank you in advance for your timely participation and partnership in this important initiative. Questions regarding the survey or data collection process should be directed to **MDBHACostSurvey@mslc.com**. Questions regarding the Behavioral Health Rate Methodology Modernization Workgroup may be directed to **andre.chappel@maryland.gov**.

Sincerely,

Perrie Briskin,
Deputy Secretary for Health Care Financing and Medicaid Director

Dr. Rachel Talley,
Deputy Secretary for Behavioral Health