

Date: March 23, 2017

Subject: Responsibility of Payment for Medication Assisted Treatment Services (MAT) for Individuals with Opiate Use Disorder (OUD)

To: HealthChoices Behavioral Health Contractors

From: Sherry Peters, Director, Bureau of Policy, Planning & Program Development, OMHSAS

Purpose:

The purpose of this communication is to provide guidance to the Behavioral Health Primary Contractors and their Behavioral Health-Managed Care Organizations (BH-MCOs) congruent with earlier guidance provided by the Managed Care Operations division of the Office of Medical Assistance in General Operations, HCALL – 02/2017-005 on the responsibility for coordination of care as well as coverage and payment for services related to buprenorphine products and injectable naltrexone prescribed for the medication assisted treatment of opioid use disorder. This memo addresses additional questions raised about services related to buprenorphine as well as injectable naltrexone.

Background:

On September 1, 2010 the Department of Human Services (the department) issued Managed Care Operations Memorandum 08/2010-015 “Responsibility for Payment for Subutex and Suboxone Treatment Services,” concerning coverage and payment responsibilities related to Subutex and Suboxone treatment services. Since the issuance of the operations memorandum, additional treatment for opioid use disorders have become available including buprenorphine products and injectable naltrexone related treatment services. Both PH-MCOs and BH-MCOs networks include providers who evaluate and treat individuals suffering from Opioid Use Disorders (OUDs) with buprenorphine as well as injectable naltrexone, leading to questions regarding responsibility for coverage and payment of buprenorphine and injectable naltrexone related treatment services. On February 1, 2017, the Department issued Managed Care Operations Memorandum, General Operations, HCALL - 02/2017-005 (link below), which provided updated guidance to reinforce the department’s expectations for payment and care coordination for these services. To ensure wide dissemination of this memo OMHSAS, is engaging in further distribution of the content of this memo.



MC Ops Memo
HCALL 08-2010-015.p



MC Ops Memo
HCALL 02-2017-005.p

Discussion:

BH and PH MCOs are responsible for coverage of medication assisted treatment involving buprenorphine and injectable naltrexone within their respective networks as delineated below.

When a behavioral health provider prescribes buprenorphine or injectable naltrexone, the PH-MCO is responsible for coverage of and payment for the prescribed medication. The BH-MCO is not responsible for the payment of these prescriptions. The BH-MCO is responsible for coverage of and payment for related medication assisted treatment services such as evaluation and management assessments, medication assessments, diagnostic tests, laboratory screening tests, injection fees and any other medically necessary services rendered by the behavioral health provider. To prescribe buprenorphine products for medication assisted treatment, the behavioral health provider must be enrolled in the MA program, participate as an in-network provider and be granted a waiver from SAMHSA to prescribe buprenorphine products. Providers prescribing injectable naltrexone must meet the same requirements except for the SAMHSA waiver. The BH-MCO is responsible to pay for drug and alcohol counseling services offered by BH-MCO enrolled providers to persons receiving buprenorphine products and injectable naltrexone. BH health prescribers of buprenorphine products and injectable naltrexone must coordinate their treatment services with the patient's primary care provider and other appropriate substance use disorder treatment providers.

When a physical health provider prescribes buprenorphine or injectable naltrexone, the PH-MCO is responsible for coverage of and payment for the medication as well as related treatment services such as evaluation and management assessments, diagnostic tests, laboratory screening tests, injection fees and any other medically necessary services rendered by the physical health provider. To prescribe buprenorphine products for medication assisted treatment, the physical health physician must be enrolled in the Medical Assistance (MA) program, participate as an in-network provider and be granted a physician waiver from the Substance Abuse and Mental Health Administration (SAMHSA) to prescribe buprenorphine products. Providers prescribing injectable naltrexone must meet the same requirements except for the SAMHSA waiver. The PH-MCO will require that the physical health prescriber of buprenorphine products and injectable naltrexone coordinate the member's care with his or her primary care provider, mental health provider and related providers of substance use disorder treatment. The BH-MCO is responsible to pay for drug and alcohol counseling services offered by BH-MCO enrolled providers to persons receiving buprenorphine products and injectable naltrexone.

BH and PH MCOs are responsible for working with their provider networks and each other to coordinate care for individuals with OUD. This care coordination can be best accomplished with informed patient consent to share basic OUD related information as outlined in Pa Code 255.5 and 709.28. BH and PH MCOs should work together to coordinate primary care, mental health services, drug and alcohol counseling services, pain management services, and other medically necessary specialty care services. PH-MCOs are already interacting with both BH and PH prescribers through the prior authorization process of buprenorphine products and injectable naltrexone, which requires documentation of drug and alcohol counseling services. The department facilitates the frequent sharing between BH and PH MCOs of claims based physical health, mental health, and pharmacy services for each recipient enrolled in HealthChoices. The



department expects the BH and PH MCOs to utilize this information to better coordinate care. BH-MCOs should use the pharmacy information to inform narcotic treatment programs of possible safety issues such as drug-drug interactions.

Next Steps:

This information must be provided to all appropriate staff including Pharmacy Management Director(s) and Medical Directors, within your organization.