***Commonwealth of Massachusetts***

***Executive Office of Health and Human Services***

## Office of Medicaid

*www.mass.gov/masshealth*

# MassHealth

# Managed Care Entity Bulletin 12

# May 2019

**TO:** Managed Care Organizations and Accountable Care Partnership Plans Participating in MassHealth, and MassHealth’s Behavioral Health Vendor

**FROM:** Daniel Tsai, Assistant Secretary for MassHealth [Signature of Dan Tsai]

**RE: Medications for Addiction Treatment in the Opioid Treatment Programs**

# Background

Managed Care Organizations (MCOs), Accountable Care Partnership Plans (ACPPs), and MassHealth’s behavioral health vendor are required to cover opioid treatment services for enrolled MassHealth members. (SeeAppendix C of the MCO and ACPP contracts and Appendix A of the behavioral health vendor’s contract.[[1]](#footnote-1))

Opioid treatment programs (OTPs) are outpatient programs that deliver opioid treatment services by providing monitored administering and dispensing of FDA-approved medications for the treatment of opioid use disorder, as well as counseling services. Unlike other providers of medications for addiction treatment (MAT), OTPs do not prescribe medications, but administer and dispense such medications within the structure of the program. Historically, OTPs provided only methadone and counseling services and were unable to administer and dispense buprenorphine and naltrexone. OTPs are now increasingly able to administer and dispense all FDA-approved MAT, including methadone, buprenorphine, and naltrexone.

As part of the opioid treatment services covered by the plan, MCOs, ACPPs, and the behavioral health vendor must cover the administering and dispensing of all FDA-approved MAT, including methadone, buprenorphine, and naltrexone, when provided by OTPs in their networks or the networks of their behavioral health subcontractor, if applicable, as further specified in this bulletin.

# Coverage of Administering and Dispensing of Methadone, Buprenorphine, and Naltrexone through OTPs

No later than July 1, 2019, MCOs, ACPPs, and the behavioral health vendor must cover the administering and dispensing of methadone, buprenorphine, and naltrexone from OTPs in their networks. If an MCO or ACPP uses a behavioral health subcontractor to manage its network of OTPs, then the behavioral health subcontractor must cover administering and dispensing of methadone, buprenorphine, and naltrexone services, on behalf of the MCO or ACPP, for OTPs in its network.

*(continued on next page)*

# MassHealth

# Managed Care Entity Bulletin 12

# May 2019

# Page 2

To put this requirement into effect and ensure consistency across payers, MCOs and ACPPs (or their behavioral health subcontractors, if applicable) and the behavioral health vendor must use the codes in this bulletin for the coverage of methadone, buprenorphine, and naltrexone and related services when delivered by OTPs.

Furthermore, MCOs, ACPPs and the behavioral health vendor must comply with all provisions of the federal rebate regulation, ensuring that providers include the National Drug Code (NDC) on all claims that include clinician-administered drugs (J Codes). MCOs and ACPPs must ensure that OTPs in their networks (or the networks of their behavioral health subcontractors, if applicable) follow the MassHealth ACPP/MCO Uniform Preferred Drug List for any applicable drugs. MassHealth’s behavioral health vendor must ensure that OTPs in its network follow the MassHealth Supplemental Rebate/Preferred Drug List. Please see <https://masshealthdruglist.ehs.state.ma.us/MHDL/> for additional information.

MassHealth may set minimum rates of payment at or above the MassHealth fee-for-service rates for these services in future MCO, ACPP, or behavioral health vendor contract years.

| **Code** | **Unit** | **Description** |
| --- | --- | --- |
| H0020 | Per Dose | Alcohol and/or drug services; methadone administration and/or service (dosing) |
| H0001-U1 | Per Visit | Alcohol and/or drug assessment (buprenorphine and naltrexone medication evaluation by physician and/or midlevel practitioner, one unit maximum annually |
| H0033 | Per Visit | Oral medication administration, with extended direct observation up to 2.5 hours (buprenorphine and associated drug screens, to be billed once during induction); may not be combined with H0033-U2 |
| H0033-U2 | Per Visit | Oral medication administration, direct observation (buprenorphine and associated drug screens, dosing only visit); may not be combined with H0033 |
| H0033-U3 | Per Visit | Oral medication administration, direct observation (oral naltrexone dosing) |
| 96372 | Per Visit | Therapeutic prophylactic or diagnostic injection (specify substance or drug); subcutaneous or intramuscular (Naltrexone) |
| J0571\* | 1 mg | Buprenorphine, oral, 1 mg (maximum 32 mg per day) (prior authorization required) |
| J0572\* | Less than or equal to 3 mg | Buprenorphine/naloxone, oral, less than or equal to 3 mg (maximum of one unit (film or pill) per day; may be combined with J0573, J0574, and J0575, as medically necessary) |

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# MassHealth

# Managed Care Entity Bulletin 12

# May 2019

# Page 3

| **Code** | **Unit** | **Description** |
| --- | --- | --- |
| J0573\* | 3.1 mg to 6 mg | Buprenorphine/naloxone, oral, greater than 3 mg, but less than or equal 3.1 to 6 mg (maximum of one unit (film or pill) per day; may be combined with J0572, J0574, and J0575, as medically necessary) |
| J0574\* | Less than or equal to 10 mg but greater than 6 mg | Buprenophine/naloxone, oral, greater than 6 mg, but less than or equal to 10 mg. (maximum of 4 units (film or pill) per day; may be combined with J0572, J0573, and J0575, as medically necessary) |
| J0575\* | Greater than 10 mg | Buprenorphine/naloxone, oral, greater than 10 mg (maximum of 2 units (film or pill) per day; may be combined with J0572, J0573, and J0574, as medically necessary)  |
| J2315\* | Per 1 mg | Injection, naltrexone, depot form, 1 mg (maximum of 380 mg. per month)  |
| J3490\* | Per 50 mg tablet | Unclassified drugs (Naltrexone, oral) |
| \*NDC required |

# Payment for Required Drug Screenings for Members Receiving Opioid Treatment Services at OTPs

For members receiving methadone and buprenorphine at an opioid treatment program, MCOs, ACPPs, or the behavioral health vendor must account for the costs of associated required drug screenings into the rate for the daily administering of such medications at the OTP.

For members receiving naltrexone at an opioid treatment program, MCOs and ACPPs must pay for all drug screenings required by OTP licensing regulations (see 105 CMR 164.304(B)) as Laboratory Services. MCOs and ACPPs may use the following codes for such drug screenings:

*(continued on next page)*

# MassHealth

# Managed Care Entity Bulletin 12

# May 2019

# Page 4

|  |  |  |
| --- | --- | --- |
| **Code** | **Unit** | **Description** |
| 80305 | Per Visit | Drug tests(s), presumptive, any number of drug classes, any number of devices or procedures (e.g., immunoassay); capable of being read by direct optical observation only (e.g., dipsticks, cups, cards, cartridges) includes sample validation when performed, per date of service |
| 80306 | Per Visit | Drug test(s), presumptive, any number of drug classes, any number of devices or procedures, (e.g., immunoassay) read by instrument assisted direct optical observation (e.g., dipsticks, cups, cards, cartridges), includes sample validation when performed, per date of service |
| 80307 | Per Visit | Drug test(s), presumptive, any number of drug classes, any number of devices or procedures, by instrument chemistry analyzers (e.g., utilizing immunoassay [e.g., EIA, ELISA, EMIT, FPIA, IA, KIMS, RIA]), chromatography (e.g., GC, HPLC), and mass spectrometry either with or without chromatography, (e.g., DART, DESI, GC-MS, GC-MS/MS, LC-MS, LCMS/MS, LDTD, MALDI, TOF) includes sample validation when performed, per date of service |

# MassHealth Website

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To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to join-masshealth-provider-pubs@listserv.state.ma.us. No text in the body or subject line is needed.

# Questions

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900, email your inquiry to providersupport@mahealth.net, or fax your inquiry to (617) 988‑8974.

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1. The behavioral health vendor’s contract will be amended to update the name of this service from opioid replacement therapy to opioid treatment services. All references in this bulletin to opioid treatment services include opioid replacement therapy as currently covered by the behavioral health vendor. [↑](#footnote-ref-1)