

Informational Bulletin on Medications and Services for Substance Use Disorders

This bulletin is informational only and does not supersede any policy or information documented in the Fee for Service (FFS) or Managed Care Organization (MCO) policy, billing manuals.

Nevada Medicaid consists of three different health care plans:

1. Fee for Service
2. Health Plan of Nevada (HPN)(MCO)
3. Amerigroup (MCO)

Recipients will be enrolled in one of these plans. It is important to know what plan recipients are enrolled in. In some situations recipients can transfer to a different health care plan. Recipients must also be Medicaid eligible at the time of service.

All pharmacies and medical prescribers and servicing providers must be enrolled as billing/servicing providers in the Medicaid health care plan. Just because a provider is enrolled with FFS does not mean they are enrolled as providers with the MCO plans.

Medicaid Covered Outpatient Drugs used for Opiate Addiction

These drugs may be subject to prior authorization (PA) approval and /or quantity limits (QL) and Preferred Drug List (PDL) status.

Refer to MSM Chapter 1200, Prescribed Drugs, at the following web address for more FFS information:

http://dhcfp.nv.gov/uploadedFiles/dhcfpnv.gov/content/Resources/AdminSupport/Manuals/MSM/C1200/MSM_1200_16_05_16.pdf

Refer to the following website for more HPN information: <http://www.myhpnmedicaid.com/PrescriptionCoverage.htm>

Refer to the following website for more Amerigroup information: https://www.myamerigroup.com/Documents/NVNV_CAID_PDL_ENG.pdf

Drug	Fee For Service (FFS)	Health Plan of NV (HPN)	Amerigroup
Drugs used for opioid overdose:			
Narcan (naloxone)	X	X	X (Has QL†)
Evzio	X	X (NP**)	X (NP**Requires Clinical PA* & QL†)
Narcan® Nasal Spray	X	X (NP**)	X
Drugs used for opioid dependence:			
Vivitrol	X (Requires Clinical PA* & QL†)	X (Requires Clinical PA*)	X (Requires Clinical PA*)
ReVia (naltrexone)	X (Requires Clinical PA*)	X	X (Generic Preferred)
Suboxone (buprenorphine/naloxone)	X (Requires Clinical PA* & QL†)	X (Requires Clinical PA* & QL†)	X (Requires Clinical PA* & QL†)
Zubsolv	X (Has QL†)	X (Requires Clinical PA* & QL† & NP**)	X (Requires Clinical PA* & QL†)
Bunavail	X (Requires Clinical PA*)	X (Requires Clinical PA* & QL† & NP**)	X (Requires Clinical PA* & QL†)
Subutex (buprenorphine)	X (Requires Clinical PA* & QL†)	X (Requires Clinical PA*)	X (Has QL†)
Drugs used for detoxification/withdrawal:			
Dolophine (methadone)	X	X	X (Has QL†)
Methadone HCl	X (NP‡)	X	X (Has QL†)
Methadose (methadone)	X (NP‡)	X	X (Has QL†)
Abuse deterrent opioids (Drugs with physical barriers that can prevent chewing, crushing, cutting, grating, or grinding of the dosage form. Dosage forms with chemical barriers that resist extraction of the opioid through use of common solvents including water, alcohol or other organic solvents.)			
Reformulated Oxycontin (oxycodone)	X (NP**)	X (NP**)	X (Requires Clinical PA* ST & QL†)
Embeda (morphine/naltrexone)	X	X (NP**)	X (Requires Clinical PA* ST & QL†)
Hysingla ER (hydrocodone)	X (NP**/QL†)	X (NP**)	X (Requires Clinical PA* ST & QL†)
Zohydro ER (hydrocodone)	X (NP**/QL†)	X (ST)	X (Requires Clinical PA* ST & QL†)

Drug for Alcohol Abstinence			
Acamprosate	X	X (NP**)	X (Has QL†)
Alcohol Sensitizing Drug			
Disulfiram	X	X	X

Methadone Clinics: Payment for the direct observation of oral medications to treat opioid dependence/withdrawal given at methadone clinics.			
Direct Observation	X	X	X

Lock-In: When a recipient has demonstrated drug seeking behaviors they are locked in to one specific pharmacy for controlled substance scripts.

Lock-In Program	X	X	X
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*Clinical PA = PA required

‡PA requirement can be overridden when prescribed for treatment of detoxification/withdrawal.

QL† = Quantity Limit

**Requires a Standard Preferred Drug List Exception Criteria Prior Authorization.

NP = Nonpreferred.

ST = Step Therapy

OON=Out of Network

X = Covered

Medication Assisted Treatment

Medication-assisted treatment (MAT), including opioid treatment programs (OTPs), combines behavioral therapy and medications to treat substance use disorders as defined by the Substance Abuse and Mental Health Services Administration (SAMHSA). MAT is a combination of medications and services that are provided in concert to assist recipients with a substance use disorder (SUD).

Refer to MSM Chapter 400, Mental Health and Alcohol and Substance Abuse Services, at the following web address for more FFS information:

http://dhcfnv.gov/uploadedFiles/dhcfpnavgov/content/Resources/AdminSupport/Manuals/MSM/C600/MSM_Ch_600_Packet_16-7-1.pdf

Refer to the following website for more HPN information: <https://www.healthplanofnevada.com/Member/Mental-Health>

Refer to the following website for more Amerigroup information: <https://www.myamerigroup.com/NV/Pages/medicaid.aspx>

Behavioral Therapies/Services

Service	Fee For Service (FFS)	Health Plan of NV (HPN)	Amerigroup
Individual Therapy: 90832, 90834, 90837	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*)
Family Therapy: 90846, 90847, 90849	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA* for OON provider only)
Group Therapy: 90853	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA* for OON provider only)
Therapy in Home or Community Setting: H004, H004 HQ	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA* for OON provider only)
Skills Training & Develop.: H2014, H2014 HQ	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*)
Psychosocial Rehabilitation: H2017, H2017 HQ	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*)
Self-Help/Peer-Support: H0038, H0038 HQ	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA* for OON provider only)

Medications

Review covered medications identified previously in this bulletin.

NV Physician Administered Drugs (NVPAD): These outpatient drugs are administered in places such as physician's office, outpatient clinics, End-Stage Renal Disease (ESRD) facilities, etc. These drugs are not subject to PDL requirements.

Screening, Brief Intervention and Referral to Treatment (SBIRT) - SBIRT is an evidence based practice used to identify, reduce, and prevent problematic use, abuse, and dependence on alcohol and illicit drugs.

Services	Fee For Service (FFS)	Health Plan of NV (HPN)	Amerigroup
Alcohol and/or substance (other than tobaccos) abuse structured screening (eg, AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes: 99408	X	X	X
Greater than 30 minutes: 99409	X	X	X
Brief face-to-face behavior counseling for alcohol misuse; 15 minutes: G0443	X	X	X

Detoxification - Inpatient substance abuse services are those services delivered in freestanding substance abuse treatment hospitals or general hospitals with a specialized substance abuse treatment unit which includes a secure, structured environment, 24-hour observation and supervision by mental health substance abuse professionals and a structured multidisciplinary clinical approach to treatment. These hospitals provide medical detoxification and treatment services for individuals suffering from acute alcohol and substance abuse conditions.

Services	Fee For Service (FFS)	Health Plan of NV (HPN)	Amerigroup
Inpatient detoxification	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*)
Outpatient Observation (not to exceed 48 hrs.)	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*, †QL)	X

Resources and Links:

Quantity Limits and Policy Guidelines:

MSM Chapter 400

http://dhcfp.nv.gov/uploadedFiles/dhcfpnavgov/content/Resources/AdminSupport/Manuals/MSM/C400/MSM_400_16_5_1_BHCN_Packet.pdf

MSM Chapter 600

http://dhcfp.nv.gov/uploadedFiles/dhcfpnavgov/content/Resources/AdminSupport/Manuals/MSM/C600/MSM_Ch_600_Packet_16-7-1.pdf

MSM Chapter 1200

http://dhcfp.nv.gov/uploadedFiles/dhcfpnavgov/content/Resources/AdminSupport/Manuals/MSM/C1200/MSM_1200_16_05_16.pdf

Provider Billing Guides for Quantity Limits

<https://www.medicaid.nv.gov/providers/BillingInfo.aspx>

Preferred Drug List (PDL)

https://www.medicaid.nv.gov/Downloads/provider/NV_PDL_20160309.pdf

Citations:

Information Bulletin on MAT

<https://www.medicaid.gov/Federal-Policy-Guidance/downloads/CIB-07-11-2014.pdf>

Fact Sheet for SBIRT

https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/SBIRT_Factsheet_ICN904084.pdf

Resources:

Crisis Call Center – 24-hour crisis line is here to provide a safe, non-judgmental source of support for individuals in any type of crisis. In addition to a 24-hour crisis hotline, Crisis Call Center also offers crisis intervention through text messaging.

- <http://crisiscenter.org/>
- 1-775-784-8090
- 1-800-273-8255
- Text "ANSWER" to 839863
- Medicaid District Office staff can assist with recipient benefit questions or problems.

Nevada 2-1-1 Services – Nevada 2-1-1, a program of the Financial Guidance Center, is committed to helping Nevada citizens connect with the services they need.

<http://www.nevada211.org/>

Substance Abuse Prevention and Treatment Agency (SAPTA) – The Substance Abuse Prevention & Treatment Agency (SAPTA) administers programs and activities that provide community-based prevention and treatment.

http://dpbh.nv.gov/Programs/ClinicalSAPTA/Home_-_SAPTA/

Medicaid District Office Staff Assistance:

Carson City District Office

1000 East William Street, Suite 118
Carson City, NV 89701
Telephone: (775) 684-3651

Las Vegas District Office

1210 S. Valley View, Suite 104
Las Vegas, NV 89102
Telephone: (702) 668-4200

Elko District Office

1010 Ruby Vista Drive, Suite 103
Elko, NV 89801
Telephone: (775) 753-1191

Reno District Office

560 Hammill Lane
Reno, NV 89511
Telephone: (775) 687-1900