

Updated Nevada Medicaid Informational Bulletin on Medications and Services for Substance Use Disorder

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 and billing manuals.

Nevada Medicaid consists of four different health care plans:

- 1. Fee-for-Service (FFS)
- 2. Anthem Blue Cross and Blue Shield Healthcare Solutions (ANT) (MCO)
- 3. Molina Healthcare of Nevada (MHC) (MCO)
- 4. Silver Summit Health Plan (SSH) (MCO)
- 5. UnitedHealthcare Health Plan of Nevada Medicaid (HPN) (MCO)

Before providing any services to a Medicaid recipient, it is important to verify in which plan the recipient is enrolled, and that the recipient is currently eligible. Both eligibility status and plan enrollment are subject to change. Providers can verify eligibility at https://www.medicaid.nv.gov/hcp/provider/Home/tabid/135/Default.aspx.

All pharmacies and servicing providers must be actively enrolled in the FFS system even if they do not intend to see FFS recipients. They must also enroll with each MCO for whose recipients they wish to provide services. The same rules apply to medical prescribers, except that they may complete an abbreviated enrollment as an Ordering/Prescribing/Referring (OPR) provider if they do not wish to bill for any services themselves.

Medicaid Covered Outpatient Drugs used for Opioid Addiction

These drugs may be subject to prior authorization (PA) approval and/or quantity limits (QL) and Preferred Drug List (PDL) status. *Note: PDL is subject to change. Refer to the links below for the most current PDL Information.

Refer to the Medicaid Services Manual (MSM) Chapter 1200, Prescribed Drugs, for more FFS information: http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C1200/Chapter1200/

Nevada Medicaid and Nevada Check Up PDL: https://nevadamedicaid.magellanrx.com/provider/documents

Refer to the following website for more Anthem information: https://mediproviders.anthem.com/nv/pages/formulary.aspx

Refer to the following website for more HPN information: https://www.myhpnmedicaid.com/Provider

Refer to the following website for more SSH information: https://www.silversummithealthplan.com/content/dam/centene/Nevada/Medicaid/PDFs/NV_SilverSum mit-PDL.pdf

Refer to the following website for more Molina Healthcare information: <u>https://www.molinahealthcare.com/members/nv/en-us/-</u>/media/Molina/PublicWebsite/PDF/members/nv/en-us/formulary.pdf

Drug	FFS	HPN	ANT	SSH	МОН	
Drugs Used for Counteracting Opioid Overdose:						
Naloxone (Narcan [®])	Х	X (QL ⁺)	X (QL ⁺)	X (QL ⁺)	Х	
Naloxone Nasal Spray (Narcan®)	Х	X	X (QL†)	X	х	
Drugs Used for Treating Op	oioid Dependence:					
Naltrexone ER Susp (Vivitrol [®])	X (*PA / QL†)	X	X (QL ⁺)	X	X (QL†)	
Burprenorphine ER Inj (Sublocade®)	X	X (*PA)	X (QL ⁺)	X (NP / *PA)	X (NP / **)	
Buprenorphine Implant (Probuphine [®])	Х	XM (*PA)	XM (NP / *PA)	XM (*PA)	XM (*PA)	
Naltrexone Tab (ReVia [®])	X (GP)	X (GP)	(GP)	X (GP)	X (QL+)	

Buprenorphine/naloxone	X (QL ⁺)	X (2mg and	X (GP / QL ⁺)	X (QL ⁺)	X (QL†
(Suboxone [®] , Zubsolv [®] ,		8mgfilm			
Bunavail [®])		only / QL†)			
Buprenorphine (Subutex [®])	X (GP/QL ⁺)	X (QL†	X (QL ⁺)	x	X (QL†)
		/ GP)			
Drugs Used for Detoxificat	ion/Withdrawal:		1		
Methadone				X (‡PA / *PA /	
(Dolphine [®] ,	X (NP/**/	X (‡PA)	X (*PA / QL†)	**/	X (*PA / QL ¹
Methadose [®])	‡PA)			QL ⁺)	
Abuse-Deterrent Opioids: grinding of the dosage forr of common solvents includ	n. Dosage forms wit	h chemical barriers	s that resist extracti		
Oxycodone ER Tab	X (NP / **/	X (NP /	X (NP / *PA /	X (NP / **)	X (NP / *PA
(OxyContin [®])	QL ⁺)	**)	QL ⁺)	Λ(Ν) /	QL ⁺)
Oxycodone IR Tab (Roxybond®)	X (QL ⁺)	X (QL ⁺)	X (*PA / QL†)	X (*PA / ST / QL†)	X (QL†)
Morphine/Naltrexone ER Cap (Embeda®)	X (NP/**)	X (NP / **)	X (NP / *PA / QL†)	X (*PA / QL†)	X (NP /*PA QL†)
Morphine Sulfate ER					
Tab (Morphabond ER [®] ,	X (NP /**/	X (NP /	X (NP / *PA /	X (*PA / ST /	X (NP /*PA
Arymo ER®)	QL†)	**)	QL†)	QL†)	QL†)
Hydrocodone ER Tab (Hysingla ER®)	X (NP / **)	X (NP / **)	X (NP / *PA / QL [†])	X (*PA / NP)	X (NP /*PA QL†)
Oxycodone ER Cap (Xtampza ER®)	x	X (NP / **)	X (NP / *PA / QL†)	X (NP / *PA)	X (NP / *PA QL†)
Drugs for Alcohol Depende Acamprosate Tab	ence X	x	X (01 ±)	V (ND / **)	x
Naltrexone Tab		X (GP)	X (QL [†])	X (NP / **)	× ×
(ReVia®)	X (GP)	A (GP)	X (GP)	X (GP)	•
Naltrexone ER Susp (Vivitrol [®])	X (*PA/ QL†)	X (*PA)	X (QL ⁺)	x	X (NP/**)
		Sensitizing Drug:	1		
Disulfiram	X	x	X	Х	Х

Lock-In: When a recipient has demonstrated drug seeking behaviors, they are locked-in to one specific							
pharmacy for all controlled substance scripts.							
Lock-In Program X X X X X							
Madication Assisted Treatment (NAAT)							

Х

Х

Х

Medication Assisted Treatment (MAT)

Х

Medication-assisted treatment (MAT), including opioid treatment programs, combines behavioral therapy and medications to treat substance use disorders as defined by the Substance Abuse and Mental Health Services

Direct Observation

Х

Administration (SAMHSA). MAT is a combination of medications and services that are provided in concert to assist recipients with a substance use disorder.

- Refer to MSM Chapter 3800, Medication Assisted Treatment, at the following web address for more FFS information regarding office based opioid treatment: <u>http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C3800/Chapter3800/</u>
- Refer to MSM Chapter 400, Mental Health and Alcohol and Substance Abuse Services, at the following web address for more FFS information regarding behavioral health services that can be used in combination with MAT: http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C400/Chapter400/
- Refer to this website for more ANT information: <u>https://mss.anthem.com/nevada-</u>
- Refer to this website for more HPN information: <u>https://www.healthplanofnevada.com/Member/Mental-Health</u>
- Refer to this website for more SSH information: <u>https://www.silversummithealthplan.com/providers/pharmacy.html</u>
- Refer to this website for more MOH information:
 <u>Opioid Safety Provider Education Resources (molinahealthcare.com)</u>

Service	FFS	HPN	ANT	SSH	МОН	
Substance Use Services						
Alcohol and/or drug services; group counseling by a clinician: H0005	X (*PASL)	X (*PA for OON provider only)	x	X (*PA for OON provider only / SL)	X (*PA for OON provider only)	
Alcohol and/or drug services; crisis intervention (outpatient):H0007	X (SL)	x	х	X (*PA for OON provider only)	X (*PA for OON provider only)	
Alcohol and/or drug services; intensive outpatient program (3 hours per day at least 3 days per week): H0015	X (*PA / QL†)	X (*PA)	X (*PA)	X (*PA)	X (*PA required after 16 visits)	
Mental health partial hospitalization, treatment less than 24 hours: H0035	X (*PA / QL†)	X (*PA)	X (*PA)	X (*PA)	X (*PA required greater than 20 hours/week or 60 hours/3 weeks	

Alcohol and/or drug services; (State defined: individual counseling by a clinician): H0047	X (^PASL)	X (*PA for OON provider only)	x	X (^PASL / *PA for OON provider)	X (*PA for OON provider only)
Behavioral Therapies Servi	ces				
Individual Therapy: 90832, 90834, 90837	X (^PASL)	X (*PA for OON provider only)	X (*PA / SL)	X (^PASL / *PA for OON provider)	X (*PA required after 26 units)
Family Therapy: 90846, 90847, 90849	X (^PASL)	X (*PA for OON provider only)	X (*PA / SL)	X (^PASL / *PA for OON provider)	X 90846/90849 *(PA for OON provider only; 90847 *PA required after 26 units)
Group Therapy: 90853	X (^PASL)	X (*PA for OON provider only)	X (*PA / SL)	X (^PASL / *PA for OON provider)	X *(PA required after 26 units)
Self-Help/Peer-Support: H0038, H0038 HQ	X (^PASL)	X (*PA for OON provider only)	X (*PA for OON provider only)	X (^PASL / *PA for OON provider)	X (*PA for OON provider only)

Medications

Refer to the Medicaid-Covered Outpatient Drugs used for Opioid Addiction table beginning on Page 1 of this bulletin.

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

Services	FFS	HPN	ANT	SSH	МОН
Brief face-to-face behavior counseling for alcohol misuse; 15minutes: H0049	x	x	X	x	X (*PA for OON provider only)
Alcohol and/or substance(other than tobaccos) abuse structured screening (e.g. AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes: 99408	X	X	X	X	X (*PA for OON provider only)
Greater than 30 minutes: 99409	x	X	X	X	X (*PA for OON provider only)

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	FFS	HPN)	ANT	SSH	МОН
Inpatient detoxification	X (*PA / SL)	X (*PA / SL)	X (*P A)	X (*PA)	X (*PA)
Outpatient Observation (not to exceed 48 hrs.)	X (*PA / SL)	X (*PA / SL)	Х	x	X (*PA for OON provider only)

Symbol Legend								
*PA = Clinical PA Required	QL† = Quantity Limit	NP = Non-preferred Agent	ST = Step Therapy					
OON = Out of Network X = Covered XM = Covered by Medical Benefit GP = Generic Preferre								
‡PA = Requirement can be overridden when prescribed for treatment of detoxification/withdrawal								
** = Requires a Standard Preferred Drug List Exception Criteria Prior Authorization								
SL = Service Limitations								
^PASL = PA required after service limitations met and/or exceeded								

Quantity Limits and Policy Guidelines for FFS:

Resources and Links:

MSM Chapter 400: http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C400/Chapter400/

Resources for Providers:

MSM Chapter 600: http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C600/Chapter600/

MSM Chapter 1200: http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C1200/Chapter1200/

MSM Chapter 3800: <u>http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C3800/Chapter3800/</u>

Provider Billing Guides for Quantity Limits for FFS: <u>https://www.medicaid.nv.gov/providers/rx/billinginfo.aspx</u>

Preferred Drug List (PDL) for FFS: <u>https://nevadamedicaid.magellanrx.com/provider/documents</u>

Information Bulletin on MAT: <u>https://www.medicaid.gov/Federal-Policy-Guidance/downloads/CIB-07-11-2014.pdf</u>

Fact Sheet for SBIRT: <u>https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-</u>MLN/MLNProducts/Downloads/SBIRT_Factsheet_ICN904084.pdf

Resources for Recipients

Crisis Call Center – 24-hour crisis line is available to provide a safe, non-judgmental source of support for individual type of crisis. In addition to a 24-hour crisis hotline, Crisis Call Center also offers crisis intervention through text messages.

- <u>http://crisiscallcenter.org/</u>
- 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 connect with the services they need. If it's not an emergency, recipients may call 2-1-1 to find a hotline to servicemental health, housing and shelter, addiction and family support. The 2-1-1 operator will help recipients find he service resources in Nevada. Or recipients may go to the website at: <u>http://www.nevada211.org/</u>

Substance Abuse Prevention and Treatment Agency (SAPTA) – SAPTA administers programs and activities that promote community-based prevention and treatment. <u>http://dpbh.nv.gov/Programs/ClinicalSAPTA/Home___SAPTA/</u>

Find certified behavioral health providers specializing in substance use disorder and co-occurring mental healthdisorder treatment services here: <u>https://behavioralhealthnv.org/</u>

Medicaid District Office Staff Assistance:							
Las Vegas District Office	Elko District Office	Reno District Office					
1210 S. Valley View, Ste. 104	1010 Ruby Vista Dr, Ste.Elko,	560 Hammill Lane					
Las Vegas, NV 89102	NV 89801	Reno, NV 89511					
Telephone: (702) 668-4200	Telephone: (775) 753-1233	Telephone: (775) 687-1900					
For Eligibility Contact:							
State of Nevada, Division of Welfare and Supportive Services							
P.O. Box 15400							
Las Vegas NV 89114-5400							
Telephone: (800) 992-0900 ext. 47200							
,	Las Vegas District Office 1210 S. Valley View, Ste. 104 Las Vegas, NV 89102 Telephone: (702) 668-4200 Welfare and Supportive Service	Las Vegas District OfficeElko District Office1210 S. Valley View, Ste. 1041010 Ruby Vista Dr, Ste.Elko,Las Vegas, NV 89102NV 89801Telephone: (702) 668-4200Telephone: (775) 753-1233Welfare and Supportive Services					

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