

Updated Nevada Medicaid 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 and billing manuals.

Nevada Medicaid consists of four different health care plans:

- 1. Fee-for-Service (FFS)
- 2. Amerigroup Community Care (AGP) (MCO)
- 3. Health Plan of Nevada (HPN) (MCO)
- 4. SilverSummit Healthplan (SSH) (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.

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.

- 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/
- Refer to the following website for more AGP information: https://www.myamerigroup.com/Documents/NVNV CAID PDL ENG.pdf
- 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_SilverSummit-PDL.pdf

Drug	FFS	HPN	AGP	SSH
Drugs Used for Counterac	ting Opioid Overdose:			
Naloxone (Narcan®)	Х	Х	X (Has QL†)	X (Has QL†)
Naloxone Auto-Injector (Evzio®)	х	X (NP**)	X (NP**Requires Clinical PA* & QL†)	X (NP**/ Requires Clinical PA*)
Naloxone Nasal Spray (Narcan®)	Х	X (NP**)	Х	Х
Drugs Used for Treating C	Opioid Dependence:			
Naltrexone ER Susp (Vivitrol®)	X (Requires Clinical PA* & QL†)	X (Requires Clinical PA*)	X (Requires Clinical PA*)	X (Requires Clinical PA*)
Naltrexone Tab (ReVia®)	х	X (Generic Preferred)	X (Generic Preferred)	X (NP**/ Requires Clinical PA*)

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Buprenorphine/naloxone	X (Requires Clinical	X (Requires Clinical	X (Requires Clinical	X (Requires		
(Suboxone®, Zubsolv®,	PA* & QL†)	PA* & QL†)	PA* & QL†)	Clinical PA* &		
Bunavail®)	,	,	,	QL†)		
Buprenorphine	X (Requires Clinical	X (Requires Clinical	X (Has QL†)	X (Requires		
(Subutex®)	PA* & QL†)	PA* & QL† Generic		Clinical PA*)		
		Preferred)				
Drugs Used for Detoxifica	tion/Withdrawal:					
Methadone	X (NP‡)	X ‡PA requirement can	X (Requires Clinical	X (NP**/		
(Dolphine®,		be overridden when	PA* & QL†)	Requires Clinical		
Methadose®)		prescribed for treatment		PA*/QL†)		
		of detoxification/-				
		withdrawal				
	Abuse-Deterrent Opioids: (Drugs with physical barriers that can prevent chewing, crushing, cutting, grating or					
grinding of the dosage fo	grinding of the dosage form. Dosage forms with chemical barriers that resist extraction of the opioid through					
use of common solvents in	ncluding water, alcoho	I or other organic solve	nts.)			
Oxycodone ER Tab	X (NP**)	X (NP**)	X (Requires Clinical	X (NP**)		
(OxyContin®)			PA* ST & QL†)			
Morphine/Naltrexone	X (QL†)	X (NP**)	X (Requires Clinical	X (Has QL†)		
ER Cap (Embeda®)			PA* ST & QL†)			
Hydrocodone ER Tab	X (QL†)	X (NP**)	X (Requires Clinical	X (Has QL†)		
(Hysingla ER®)			PA* ST & QL†)			
Oxycodone ER Cap	X (QL ⁺ /NP**)	X (NP**)	X, NP, QL†, ST			
(Xtampza ER®)						

Drugs for Alcohol Depender	ice			
Acamprosate Tab	Х	X (NP**)	X (Has QL†)	X (NP**)
Naltrexone Tab	Х	X (Generic	X , NP, QL ⁺ ,‡	X (NP**)
(ReVia®)		Preferred)		
Naltrexone ER Susp	Х	X (Requires Clinical	X (NP*‡)	X (Requires
(Vivitrol®)		PA*)		Clinical PA*)
Alcohol Sensitizing Drug:		·		
Disulfiram	Х	X	Х	Х

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

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						

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, 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.

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- Refer to MSM Chapter 400, <u>Mental Health and Alcohol and Substance Abuse Services</u>, at the following web address for more FFS information: http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C400/Chapter400/
- Refer to this website for more AGP information: https://www.myamerigroup.com/nv/benefits/nevada-medicaid.html
- Refer to this website for more HPN information: https://www.healthplanofnevada.com/Member/Mental-Health
- Refer to this website for more SSH information: https://www.silversummithealthplan.com/providers/pharmacy.html

Behavioral Therapies/Services				
Service	FFS	HPN	AGP	SSH
Individual Therapy: 90832, 90834, 90837	X (Requires Clinical PA*, †QL)	Х	X (Requires Clinical PA* for OON provider only)	X (Requires Clinical PA* & †QL for OON
Family Therapy: 90846, 90847, 90849	X (Requires Clinical PA*, †QL)	X	X (Requires Clinical PA* for OON provider only)	provider only) X (Requires Clinical PA* & †QL for OON
Group Therapy: 90853	X (Requires Clinical PA*, †QL)	Х	X (Requires Clinical PA* for OON provider only)	x (Requires Clinical PA* & †QL 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)	X (Requires Clinical PA* & +QL for OON provider only)
Skills Training & Development: H2014, H2014 HQ	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*,†QL)	X (Requires Clinical PA*)	X (Requires Clinical PA*,†QL)
Psychosocial Rehabilitation: H2017, H2017 HQ	X (Requires Clinical PA*, †QL)	X (Requires Clinical PA*,†QL)	X (Requires Clinical PA*)	X (Requires Clinical PA*,†QL)
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)	X (Requires Clinical PA*,†QL)

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.

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	FFS	HPN	AGP	SSH
Alcohol and/or substance (other than tobaccos) abuse structured screening (e.g. AUDIT, DAST), and brief	Х	Х	Х	Х

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intervention (SBI) services; 15 to 30 minutes: 99408				
Greater than 30 minutes: 99409	Х	Х	Х	Х
Brief face-to-face behavior counseling for alcohol misuse; 15 minutes: G0443	Х	Х	Х	Х

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)	AGP	SSH
Inpatient detoxification	X (Requires Clinical	X (Requires	X (Requires Clinical	X (Requires
	PA*, †QL)	Clinical PA*,	PA*)	Clinical PA*)
		†QL)		
Outpatient Observation	X (Requires Clinical	X (Requires	X	X
(not to exceed 48 hrs.)	PA*, †QL)	Clinical PA*,		
		†QL)		

Resources and Links:

Resources for Providers:

Quantity Limits and Policy Guidelines for FFS:

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

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/

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

Preferred Drug List (PDL) for FFS: https://www.medicaid.nv.gov/providers/rx/PDL.aspx

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 for Recipients:

Crisis Call Center – 24-hour crisis line is available 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://crisiscallcenter.org/
- 1-775-784-8090
- 1-800-273-8255

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- 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. If it's not an emergency, recipients may call 2-1-1 to find a hotline to services such as mental health, housing and shelter, addiction and family support. The 2-1-1 operator will help recipients find health and service resources in Nevada. Or recipients may go to the website at: http://www.nevada211.org/

Substance Abuse Prevention and Treatment Agency (SAPTA) – 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:

<u>Carson City District Office</u> 1000 East William Street, Suite 111 Carson City, NV 89701

Telephone: (775) 684-3651

Elko District Office 1010 Ruby Vista Drive, Suite 103 Elko, NV 89801

Telephone: (775) 753-1191

<u>Las Vegas District Office</u> 1210 S. Valley View, Suite 104

Las Vegas, NV 89102

Telephone: (702) 668-4200

Reno District Office 560 Hammill Lane Reno, NV 89511

Telephone: (775) 687-1900

For eligibility questions, 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

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