



Aetna Better Health® of Louisiana

Reimbursement Policy Statement Louisiana Medicaid

Original Issue Date	Next Annual Review	Effective Date
12-03-2019	12-03-2020	TBD
Policy Name		Policy Number
<i>Opioid Use Disorder (OUD)</i>		ABHLA-RP-0200
Policy Type		
Medical	Administrative	Pharmacy
		Reimbursement

Aetna Better Health of Louisiana reimbursement policies are intended to provide a general reference for claims filing, coding and documentation guidelines. Coding methodology, regulatory requirements, industry-standard claims logic, benefits design and other factors not listed in this policy statement are considered in the development of reimbursement policies.

In addition to this Policy, reimbursement of rendered services are subject to member benefits, eligibility on the date of service, medical necessity, other plan policies and procedures, claim editing logic, provider contracts and all applicable authorization, notification and utilization management guidelines set forth by either CMS or the Louisiana department of Health.

This policy does not ensure either an authorization or reimbursement of services. Please refer to the plan contract for the service(s) referenced therein. If there is a conflict between either this policy or the plan contract, then the plan contract will be the controlling document used to make an authorization or payment determination.

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This Reimbursement Policy has been reviewed, given due consideration and has been approved by the Policy committee of Aetna Better Health of Louisiana.



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A. Policy

Effective January 20, 2020 Aetna Better Health of Louisiana will provide for coverage of Methadone as an authorized medication to treat Opioid Use Disorder.

B. Overview

Effective January 20, 2020, Aetna Better Health of Louisiana will reimburse for the use of Methadone when treating Opioid Use Disorder (OUD) within a certified Opioid Treatment Program (OTP). Treatment for those enrollees 18 years old or older who are diagnosed with Opioid Use Disorder (OUD) longer than a year will be covered. Reimbursement for Methadone treatment will only be made to those Providers categorized as an OTP. For a Provider to be listed as an OTP they must adhere to all policies, rules and regulations set forth by the LA Department of Health; Office of Behavioral Health, State Opioid Treatment Authority. Services shall be provided in accordance with the standards set forth by SAMHSA, Health Standards Licensing, the US Department of Justice Drug Enforcement Administration (DEA), the LA Board of Pharmacy and all applicable SAMSHA approved accrediting bodies as accepted by the LA Department of Health.

Providers must be registered and credentialed with Aetna Better Health, and have an NPI that supports the following:

Provider Type	Provider Specialty	Provider Subspecialty
68 – CLINIC OR OTHER GROUP PRACTICE	70 - SUBS/ALCOH ABSE CTR	8V – METHADONE CLINIC

Reimbursement for Medication Assisted Therapy will be made to OTP's in two bundles:

Code	Explanation
H0020	<p>Methadone Bundled Rate</p> <p>Bundled rate includes all state and federal regulatory mandated components of treatment. Services include but are not limited to the following:</p> <ul style="list-style-type: none"> • Medication: This includes the administration, dosing, and dispensing of Methadone as per the patient's treatment plan. • Counseling: Patients are required to participate in group or individual sessions as part of the patient's treatment plan. • Urine Drug Testing: This includes the urine drug testing or other laboratory tests deemed medically necessary. • Physical examinations by a physician or advanced practice registered nurse. • Evaluation and management visits. • Case management. • Laboratory services. <p>*The OTP may be reimbursed for the bundled rate for participants receiving take-home doses in accordance with state and federal regulations and the patient's treatment plan phase.</p>

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	* <u>Guest dosing occurs when a patient receives Methadone dosing at another OTP other than their primary/home-based OTP clinic. The guest dosing provider will bill for the bundled rate and provide clinical care, if appropriate, that is coordinated with the "home" provider and Methadone Central Registry (MCR) to ensure correct dosing.</u>
<u>H0047</u>	<u>Buprenorphine Bundled Rate</u> <u>Bundled rate includes all components of treatment, except for the Buprenorphine medication. Services include but are not limited to the following:</u> <ul style="list-style-type: none"> • <u>Assessment and individualized plan of care.</u> • <u>Individual and group counseling.</u> • <u>Urine Drug Testing or laboratory testing.</u> • <u>Coordination of medically necessary services.</u> <u>Buprenorphine medication will be billed separately using the applicable J-codes (J0571-J0575) depending on dosage amounts.</u>

C. Definitions

Opioid Treatment Program (OTP): <https://www.samhsa.gov/medication-assisted-treatment/opioid-treatment-programs>

SAMHSA: Substance Abuse and mental Health Services Administration – <https://www.samhsa.gov/>

DEA: Drug Enforcement Agency – <https://www.dea.gov/>

D. Reimbursement Guidelines

- J0571-J0575 should not be billed alone. The bundled code of H0047 should accompany to ensure that MAT is provided in a person-centered environment.
- Only those OTP's with a verified subspecialty of 8V – Methadone Clinic may bill for H0020. & H0047

E. Codes/Condition of Coverage

H0020 - Methadone Bundled Rate

H0047 - Buprenorphine Bundled Rate

J0571 – Buprenorphine, oral, 1 mg

J0572 – Buprenorphine/naloxone, oral, less than or equal to 3 mg buprenorphine

J0573 - Buprenorphine/naloxone, oral, greater than 3 mg, but less than or equal to 6 mg buprenorphine

J0574 – Buprenorphine/naloxone, oral, greater than 6 mg, but less than or equal to 10 mg buprenorphine

J0575 - Buprenorphine/naloxone, oral, greater than 10 mg buprenorphine

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F. Frequently Asked Questions

- 1.) **Will Medication Assisted Treatment (MAT) require a prior authorization?**
 - a. **No, MAT will not require prior authorization**
- 2.) **Does a provider require special licensure or certification to provide MAT?**
 - a. **Yes, a Provider will need require certification by SAMHSA and the DEA and be regulated by the Louisiana Department of Health, including the Office of Behavioral Health and Health Standards. The Louisiana Board of Pharmacy requires the DATA 2000 waiver identification number or "X" number.**

G. Review/Revision Date

<u>Action</u>	<u>Date</u>	<u>Comments</u>
<u>Date Issued</u>	<u>12-03-2019</u>	
<u>Date Revised</u>		
<u>Effective Date</u>	<u>01-20-2020</u>	

H. Resources

1. <https://www.aetnabetterhealth.com/Louisiana/>
2. **Specialized Behavioral Health Fee Schedule:**
https://www.lamedicaid.com/provweb1/fee_schedules/feeschedulesindex.htm

[aetnabetterhealth.com/Louisiana](https://www.aetnabetterhealth.com/Louisiana)

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