

**Government Business Division
Policies and Procedures**

Section (Primary Department/Provider Solutions) Healthy Blue – Louisiana Managed Care Plan Provider Solutions	SUBJECT (Document Title) Non-Par Opioid Prescribers Policy		
Effective Date TBD11/08/2019	Date of Last Review	Date of Last Revision	Dept. Approval Date 03/05/2020
Department Approval/Signature :			

Policy applies to health plans operating in the following State(s). Applicable products noted below.

Products	<input type="checkbox"/> Arkansas	<input type="checkbox"/> Indiana	<input type="checkbox"/> Nevada	<input type="checkbox"/> Tennessee
<input checked="" type="checkbox"/> Medicaid	<input type="checkbox"/> California	<input type="checkbox"/> Iowa	<input type="checkbox"/> New Jersey	<input type="checkbox"/> Texas
<input type="checkbox"/> Medicare/SNP	<input type="checkbox"/> Colorado	<input type="checkbox"/> Kentucky	<input type="checkbox"/> New York – Empire	<input type="checkbox"/> Virginia
<input type="checkbox"/> MMP/Duals	<input type="checkbox"/> District of Columbia	<input checked="" type="checkbox"/> Louisiana	<input type="checkbox"/> New York (WNY)	<input type="checkbox"/> Washington
	<input type="checkbox"/> Florida	<input type="checkbox"/> Maryland	<input type="checkbox"/> North Carolina	<input type="checkbox"/> Wisconsin
	<input type="checkbox"/> Georgia	<input type="checkbox"/> Minnesota	<input type="checkbox"/> South Carolina	<input type="checkbox"/> West Virginia

POLICY:

Background:

- The opioid epidemic is prevalent in Louisiana with adverse impacts on the health and wellbeing of Louisiana citizens, including Healthy Blue members.
- Healthy Blue recognizes the adverse impacts of opioid addiction and misuse on its members and their families.
- This new policy is purposefully designed to curb the inappropriate use of opioids.

Policy Statement

- On the effective date, namely **[TBD]**, opioid prescriptions that are issued by Non-Participating (Non-Par) Prescribers shall not be honored and/or paid by Healthy Blue.
- However, this policy shall not be applicable to medications that are used for Medically Assisted Treatment (MAT). In the context of this policy drugs for MAT include: Methadone, Naltrexone, and Buprenorphine. (<https://www.samhsa.gov/medication-assisted-treatment>)
- Exceptions to this policy include the following: emergency services, post-operative treatment, services by non-par providers with Single Case Agreements (SCAs) for services, along with prescriptions from non-par providers for opioid prescriptions when the “DX code” on the RX submitted by the pharmacist is for cancer, palliative care, sickle cell disease, or 2nd & 3rd degree burns.
- Configuration shall be operationalized to preclude claim rejection for exceptions listed above, including hospital-based providers.

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<u>Section (Primary Department/Provider Solutions)</u>	<u>SUBJECT (Document Title)</u>
<u>Healthy Blue – Louisiana Managed Care Plan Provider Solutions</u>	<u>Non-Par Opioid Prescribers Policy</u>

DEFINITIONS:

Alternative Pain Management refers to a broad range of non-opioid based interventions.

Non-Participating (Non-Par) Prescribers include any health care providers who are not credentialed by Healthy Blue and not currently enrolled in the Healthy Blue Provider Network.

PROCEDURE:

1. Thirty (30) days before the effective date, all Non-Par Opioid Prescribers shall be:
 - A.) Notified in writing about the elimination of their ability to issue prescriptions to Healthy Blue members, and
 - B.) Invited in writing to join the Healthy Blue Provider Network.
2. This advanced written notice to each provider shall be issued no later than thirty (30) days prior to this policy's "effective date" for the implementation.
3. A representative of the Provider Network team shall follow up with Non-Par Providers that have expressed an interest in participation in the network no later than ten (10) days following indication from the non-par provider that there is interest.
 - A.) Network Management Consultants' follow up with Non-Par Providers shall consist of telephone consultations and office visits as necessary to facilitate admission into the Healthy Blue Provider Network, including credentialing, et al.
 - B.) The Network Management Consultant who is assigned to the Non-Part Provider shall assist the Non-Par Provider in becoming a credentialed and enrolled provider in the Healthy Blue Provider Network.
 - C.) Ongoing follow up by the Network Management Consultants with Non-Par Providers shall be initiated to support these providers to become members of the Healthy Blue Provider Network.
4. The Healthy Blue Plan shall identify all members now receiving opioid prescriptions from Non-Par providers no later than 15 days prior to issuance of the advanced written notice to the Non-Par Prescribers.
5. This member list will be sent to the Case Management Supervisor for member-specific follow up in accordance with the Healthy Blue Continuity of Care Policy and Procedure and/or any other relevant care management policy.
6. The Healthy Blue Case Management Team shall contact each affected member about this

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Section (<u>Primary Department Provider</u> <u>Solutions</u>)	<u>SUBJECT (Document Title)</u> <u>Non-Par Opioid Prescribers Policy</u>
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policy and assist the member with identifying a new Healthy Blue Prescriber, including (when clinically appropriate) developing a treatment plan for alternative (non-opioid based) pain relief strategies, in accord with the Healthy Blues Plan's Continuity of Care – La.

A.) Members who cannot be reached by telephone shall receive a written notice of this policy change and invitation to contact the Case Management Team for continuity of care follow up.

REFERENCES:

1. LOUISIANA MANAGED CARE CONTRACT, SECTIONS ON CONTINUITY OF CARE
2. HEALTHY BLUE CONTINUITY OF CARE POLICY - LA.

RESPONSIBLE DEPARTMENTS:

1. PROVIDER SOLUTIONS
2. OPERATIONS (CREDENTIALING)
3. HEALTH CARE MANAGEMENT

Primary Department:

PROVIDER RELATIONSSOLUTIONS

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Secondary Department(s):

HEALTH CARE MANAGEMENT
OPERATIONS (CREDENTIALING)

EXCEPTIONS:

Exceptions to this policy include the following: emergency services, post-operative treatment, services by non-par providers with Single Case Agreements (SCAs) for services, along with prescriptions from non-par providers for opioid prescriptions when the "DX code" on the RX submitted by the pharmacist is for cancer, palliative care, sickle cell diseasecrisis, or 2nd & 3rd degree burns.

REVISION HISTORY:

Review Date	Changes
<u>11/08/2019</u>	• <u>New P&P</u>
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