Medicaid and the Opioid Crisis

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Presented to:
Medical Care Advisory Committee
March 20, 2018
Florida Medicaid Covers An Array of Services

- Acute care, medical care, preventative care, and emergency care services, including behavioral health services.

- Florida Medicaid:
  1. Covers pain management services
  2. Has established mechanisms to prevent substance abuse and addiction
  3. Provides substance abuse treatment for children and adults
Pain Management Services

• Chiropractic services
• Physical therapy
• Expanded benefits offered by health plans:
  – Over-the-counter supplies, including non-prescription strength pain relievers
  – Additional physical therapy services for adults
Strong Controls to Prevent Addiction

- Dosage, quantity, age limits, and clinical edits – ongoing
- Alert pharmacists when an opioid and a benzodiazepine are prescribed in combination (7/2017)
- Prevention of two or more long-acting opioids simultaneously (8/2017) except for patients diagnosed with cancer or sickle cell
- Require prescribers order a short-acting opioid prior to consideration of a long-acting opioid (8/2017)
- Limit opioid prescriptions for acute pain to a seven day supply to help prevent addiction (2/2018)
- Patients who are prescribed opioids for the first time will be limited to a maximum of 90 milligrams of morphine equivalent
Strong Controls to Prevent Addiction (Prior Authorization Form)

- Prior authorization (PA) form created to determine patients meet medical criteria prior to dispensing opioids (1/2018)
- Ensure other therapy options and the patients’ drug history have been reviewed and considered prior to dispensing opioids
- Recommend prescribers review the Prescribed Drug Monitoring Program database to ensure patients are not being prescribed or are obtaining opioids from other sources
- Clinicians to perform urine drug test prior to initiation of therapy with opioids
- PA form reminds prescribers to offer Naloxone to patients with an increased risk of opioid overdose
- Additionally, Methadone for pain treatment requires prior authorization
Opioid Treatment:
Medication Assisted Treatment

- Buprenorphine (tablet)
- Suboxone (film)
- Methadone
- Narcan and Naloxone
- Vivitrol injectable and Naltrexone tablets
Pain Management for Chronic Conditions

- As recommended by the Centers for Disease Control and Prevention and in accordance with Section 456.44, Florida Statutes, clinicians must set treatment goals with each patient and ensure patients are aware of the risks prior to initiating opioid therapy for chronic pain.
- The long acting overlapping system edit excludes sickle cell and cancer diagnosed recipients. This allows those patients to be on different strengths of the same medication or multiple different long acting opioids.
- Urine drug tests are required to ensure patients are in compliance with their treatment.
# Opioid Treatment: Behavioral Health Treatment Services

<table>
<thead>
<tr>
<th>Behavioral Health Services (Available for Adults)</th>
<th>Medicaid</th>
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<tbody>
<tr>
<td>Assessment/Treatment Plan Development Modifications</td>
<td>✔️</td>
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<tr>
<td>Assessment</td>
<td>✔️</td>
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<td>Treatment Plan Development</td>
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<td>Treatment Plan Review</td>
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## Therapy Services

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<thead>
<tr>
<th>Therapy Services</th>
<th>Medicaid</th>
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<tbody>
<tr>
<td>Group Therapy</td>
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<tr>
<td>Individual and Family Therapy</td>
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## Psychosocial Rehabilitation

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<thead>
<tr>
<th>Psychosocial Rehabilitation</th>
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<tbody>
<tr>
<td>Supportive Housing*</td>
<td>✔️</td>
</tr>
<tr>
<td>Recovery Support (Individual/Group)**</td>
<td>✔️</td>
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<tr>
<td>MH Clubhouse Services</td>
<td>✔️</td>
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<tr>
<td>Medical Services</td>
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## Case Management Services

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<tbody>
<tr>
<td>Case Management</td>
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## Crisis Management

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<th>Crisis Management</th>
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<tr>
<td>Crisis Stabilization***</td>
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<tr>
<td>Substance Abuse Inpatient Detoxification</td>
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<tr>
<td>Inpatient Hospital Services</td>
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</tbody>
</table>

* The Agency is seeking approval for a pilot to provide housing support services under the Medicaid MMA program.
** These services can be received through the Medicaid therapy benefit.
*** Florida Medicaid’s health plans have the flexibility to offer this service as an in lieu of service when medically appropriate.
Behavioral Health Treatment Services

- Assessment services are to gather information to be used in making a diagnosis and developing a plan of care.
- Individual, group, and family therapy services provide insight-oriented, cognitive behavioral, or supportive interventions to recipients and their families.
- Psychosocial rehabilitation is a support service designed to help recipients learn skills for independent living and life management.
Behavioral Health Treatment Services Continued

• Mental health targeted case management assists recipients in gaining access to medical, social, and other services, including:
  – Recipients with opioid use disorder who have a co-occurring mental illness.

• Recipients in need of detoxification services in an inpatient hospital setting may receive up to 45 days per year.
Opioid Treatment: Health Plans Have Treatment Flexibility

- Offer health behavior programs and expanded benefits not provided by the traditional fee-for-service delivery system Medicaid.
- Provide services in alternative settings or services that are provided instead of services traditionally covered by Medicaid. This is referred to as “In Lieu of Services”.

A recipient needs detoxification services

Traditional fee-for-service delivery system Medicaid provides detox services in an hospital inpatient setting

Health plan can offer detox services in an addictions receiving facility
Opioid Provider Alert Series

• The Agency will release a series of provider alerts to inform about actions taken and services available for recipients diagnosed with opioid use disorder.
• The Agency released its first alert on February 13th and will continue to send on a routine basis.
Opioid Treatment:
Federal Guidance for Additional Treatment Options

• Federal CMS released guidance on how to pursue a section 1115 waiver to assist with addressing the opioid crisis including:
  – Reimbursement for residential detoxification admissions in institutions for mental disease longer than 15 days in a month.
• Current policy allows for admissions lasting 15 days or fewer.
Questions?