





## Expanding Capacity for Withdrawal Management in Residential Drug and Alcohol Levels of Care and Crisis Response Centers

**This Bulletin is being issued as an addendum to the original.** The original content of Bulletin 18-06 still applies and is as follows:

All residential drug and alcohol treatment facilities (4B, 3B, 3C, 2B) will be required to have capacity to provide services to Community Behavioral Health (CBH) members receiving any of the three approved medications for OUD: buprenorphine, methadone, or naltrexone ER.

Such capacity can occur either through direct provision (i.e. naltrexone ER or buprenorphine can be given through a treating facility prescriber) or through coordination of care with external providers (through formal memorandum of understanding [MOU]) who can induce individuals on buprenorphine or methadone or who can provide ongoing prescriptions.

Facilities capable of directly prescribing agonist (buprenorphine or methadone) and non-agonist FDA-approved medications (naltrexone ER) will receive a Preferred Evidenced-based MAT Designation and will be eligible for an enhanced daily rate as of August 1, 2018. The enhanced rates will apply to all residential admissions regardless of diagnosis.

Facilities who are MAT compatible—defined by the ability to provide services to members receiving all forms of MAT through formal MOUs—will receive Evidence-Based MAT Designation and will be eligible for a smaller daily rate increase as of August 1, 2018. Providers who can provide MAT-compatible services through a combination of direct provision and MOUs will also be eligible for this rate. The enhanced rates will apply to all residential admissions regardless of diagnosis.

Beginning January 1, 2020, providers who have not achieved either designation will not have their CBH Provider Agreement renewed.

## This addendum is being issued to highlight the following:

All Residential Drug and Alcohol providers will be **required** to submit their application for MAT Designation by the end of business on **Friday, November 22, 2019**, to their **assigned Provider Relations Representative**. This will allow for all applications to be processed with an effective date of January 1, 2020. Moving forward, following November 22, 2019, any application submitted for MAT Designation will not be accepted and will be considered null and void by CBH.

Upon further review of provider readiness for implementation of this mandate, CBH has created an opportunity for residential providers to pursue an implementation date waiver. A request for postponement must be communicated by submitting a waiver to your assigned Provider Relations Representative prior to November 22, 2019. This waiver form will only be accepted from providers who are experiencing barriers to implementation that are related to State and Federal Regulatory statutes and should include the specific rationale and regulation prohibiting compliance, steps needed to remediate non-compliance, and timeline for implementation. The provider will receive a written response from CBH indicating the status of the waiver request as either approved, approved with modifications, or denied. If there are any operational factors impacting implementation, please communicate this information to your Provider Relations Representative.

## Please note the waiver form attached below this Bulletin on the CBH Bulletin webpage.

Questions regarding this Bulletin in its entirety can be directed to your assigned Provider Relations Representative.