MEDICAID BULLETIN

TO: All Providers

SUBJECT: Medicaid Coverage of Opioid Treatment Programs and SCDHHS Efforts to Address the Opioid Crisis

In January 2019, the South Carolina Department of Health and Human Services (SCDHHS) will begin to enroll opioid treatment programs (OTPs) in the Medicaid provider network and begin to reimburse for medication-assisted treatment (MAT) provided in OTPs. The addition of this benefit will make the full spectrum of pharmacotherapies approved for the treatment of opioid use disorder (OUD) available to Medicaid members. Additional details regarding the enrollment procedures for OTPs will be provided this month.

Over recent years, the SCDHHS has engaged in a number of efforts to address the opioid crisis within South Carolina’s Medicaid population. These policy changes and benefit enhancements, coordinated through the South Carolina Opioid Emergency Response Team, have contributed to improvements in opioid prescribing, but also highlighted the need for continued focus on ensuring that treatment for OUD is available.

Initial efforts focused primarily on limiting excessive opioid prescribing. In 2016, SCDHHS, in partnership with the South Carolina Public Employee Benefit Authority (PEBA), instituted a requirement that prescribers consult with the prescription drug monitoring program (PDMP) before issuing a prescription for opioids. This helped to ensure that prescribers had a full account of historical opioid use when making prescribing decisions. Subsequently, SCDHHS implemented limitations on the initial supply of opioids when prescribed for acute indications.

SCDHHS has engaged in an aggressive campaign of provider education to address the inappropriate use of opioids, named Timely Information for Providers in South Carolina (tipSC). Working with physicians, pharmacists and other experts from the Medical University of South Carolina (MUSC), tipSC develops and disseminates targeted, practical information to help prescribers make safe prescribing decisions. To encourage participation, these educational programs offer continuing education credit for providers. These materials are available at https://msp.scdhhs.gov/tipsc/.

Since instituting these programs, the number of opioid prescriptions paid through the Medicaid program has decreased year-over-year. During this same period, however, the number of individuals diagnosed with OUD and those suffering its most devastating consequences, overdose and death,
have increased. To continue addressing these trends, SCDHHS has instituted a number of benefit enhancements related to OUD treatment:

**Managed Care “in lieu of” Allowance for Institutions for Mental Disease (IMD)**
Effective July 1, 2018, managed care organizations (MCOs) in the South Carolina Medicaid market have increased flexibilities to reimburse IMDs for providing treatment for OUD. While federal regulations prevent SCDHHS from requiring the use of IMDs, this allowance expands the network of providers available to treat OUD in those instances when inpatient care is necessary.

**Telemedicine in 301 Centers**
Since Jan. 1, 2018, SCDHHS has provided reimbursement to Act 301 Behavioral Health Centers (301 Centers) for the provision of MAT provided through telemedicine. This has allowed for this critical component of OUD treatment to be available in those parts of the state where 301 Centers do not have physicians to provide MAT.

**Initiation of MAT in Emergency Departments**
A pilot program, funded by SCDHHS, has created programs at three coastal hospitals to allow for initiation of MAT in emergency departments, when indicated. Working through clinicians at MUSC and in partnership with the South Carolina Department of Alcohol and Other Drug Abuse Services (DAODAS), this program brings the most evidence-based treatment to patients who present to an emergency department, which is often the first point of health care contact for individuals suffering from OUD. SCDHHS and MUSC plan to expand this program into other parts of the state in 2019.

**Support for the MAiN Model for Neonatal Abstinence Syndrome (NAS)**
The Managing Abstinence in Newborns (MAiN) program, developed at Greenville Health System, provides a model of delivering care for newborns of opioid-dependent mothers. This model strives to transition the treatment of NAS from neonatal intensive care units (NICUs) to pediatric nurseries, significantly shortening hospital stays.

SCDHHS remains committed to ensuring that the Medicaid benefit is designed to minimize the risk of opioid overuse and to ensure that Medicaid members suffering from OUD have access to the necessary care. Should you have any questions regarding South Carolina Medicaid’s efforts to address the opioid crisis, please contact the SCDHHS Division of Behavioral Health at (803) 898-2565.

Thank you for your continued support of the South Carolina Healthy Connections Medicaid program.

Joshua D. Baker