

Effective Date: 09/01/2019

Medication Assisted Treatment (MAT)

The Massachusetts Laborers' Health and Welfare Fund's (The Fund) understands that Medication-Assisted Treatment offers an evidence-based treatment practice in treating addiction. The Fund's Program places emphasis on the treatment portion of MAT. Coverage will not be allowed for Medication *as* treatment.

POLICY: coverage of MAT utilizing buprenorphine/naloxone (suboxone) or Methadone is subject to rules regarding prior authorization, and clearly defined maximum daily dosages. Buprenorphine-Naloxone or Methadone may be prescribed as part of a comprehensive treatment plan that includes counseling and participation in social support programs.

Prior Authorization Criteria

Studies have shown the importance of removing barriers to access treatment; therefore, The Fund will cover up to 60 days of BUPRENORPHIN-NALOXONE or METHADONE treatment with no prior authorization. *

Coverage of Buprenorphine-Naloxone is limited to a maximum daily dosage of 24mg/6mg. Dosages higher than 24 mg/6 mg daily have not been demonstrated to provide a clinical advantage.

Prior to the member receiving additional fills beyond the initial 60 days, authorization will need to be obtained from the Member Assistance Program (MAP).

The following criteria will need to be met for continued authorization:

- Prescribing Physician must have an approved DEA waiver, and
- Provider indicates that the member's treatment plan includes all of the following:
 - Regular counseling visits as outlined in schedule below, and
 - Psychosocial support, and
 - Regular Random Toxicology screening that includes buprenorphine, norbuprenorphine, and a full range of opiates and benzodiazepines, and
 - Remaining medication counts and/or other appropriate tools to identify diversion or misuse
 - Continued monitoring for prescribing of the minimum dose of medication needed to address target signs, symptoms, desired benefits, and laboratory indices while minimizing side effects.

*Applies to First 60 day *lifetime* fills only. Authorization will be required for additional fills

- **Provider submits documentation of one of the following:**
 - A specified titration schedule, or
 - Previous titration trial within the past year with date, documented dose, and member response, or
 - Rationale for not attempting to titrate
- **Member must be in contact with the MAP Program prior to authorization.**
- **Authorizations will be permitted for 1 – 30 day supply of buprenorphine/naloxone or Methadone only.**
- **A new authorization must be obtained for each 30 day supply. Each authorization request must meet ALL above criteria.**

Required Counseling Visits

Counseling is a required component of an opioid treatment program (OTP) under the Substance Abuse and Mental Health Services (SAMHSA) guidelines.

The Fund's program requires the member to adhere to and submit documentation of the following counseling schedule:

Authorizations 1-3:

Patient must have documented weekly visits with a licensed counselor with documented experience in Alcohol and Drug Abuse.

Authorizations 4-9:

Patient must have documented bi-weekly visits with a licensed counselor with documented experience in Alcohol and Drug abuse, as well as participation with Peer Recovery Support. This requirement will remain for patients taking a dose greater than 8mg/2mg per day.

Authorizations 10+:

Patient must have documented monthly visits with a licensed counselor with documented experience in Alcohol and Drug Abuse, as well as ongoing participation with Peer Recovery Support.

The Fund will provide members with access to a Peer Recovery Specialist to serve as a guide to initiate, achieve and sustain long-term recovery from addiction. Recovery coaches provide empathetic support as well as connections in navigating recovery resources.