

Support HB18-1007 with Strike-Below Amendment L.(

Payment Reform Issues Related to Substance Use Disorder

Representatives Kennedy & Singer • Senators Lambert & Jahn

When a person with substance use disorder finally reaches the point where he or she is ready to seek treatment and begin the long road to recovery, the last thing we should do is allow bureaucratic processes to stand in their way. Various insurance and Medicaid coverage issues are making it harder for people to get the treatment they need.

Terms & Acronyms

Substance Use Disorder (SUD) – A condition in which the recurrent use of alcohol and/or drugs causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities.

Prior Authorization Request (PAR) – Many drugs will only be covered by a commercial or public payer after the prescribing provider seeks prior authorization.

Medication-Assisted Treatment (MAT) – The combination of psychotherapy with one of three drugs used to help an SUD patient recover. The drugs include:

- Methadone – A partial opioid agonist administered in a clinic.
- Buprenorphine – A partial opioid agonist typically taken orally at home. One brand-name, Suboxone, offers a combination of buprenorphine and naloxone.
- Naltrexone – A full opioid antagonist. One brand name, Vivitrol, is administered as a long-acting intramuscular injection.

Other drugs mentioned in the bill

- Naloxone – An overdose reversal drug. One brand name, Narcan, is provide in a ready-to-use form as a nasal spray.

As amended by L.001, House Bill 1007 does the following:

- Streamlines the PAR process for MAT for commercially insured patients
 - Specifies that MAT always qualifies as an urgent PAR requiring a response in one business day
 - Mandates coverage of a short-term supply of a drug for treatment of opioid dependence. These drugs mitigate withdrawal symptoms so an addict doesn't go back to heroin while waiting for his/her treatment to be approved.
- Streamlines the PAR process for MAT for Medicaid patients
 - Colorado's Behavior Health Organizations (BHO's) all have their own PAR processes that sometimes take several days. The bill initiates a stakeholder process to establish new rules for standardized timelines.
- Creates a new way for SUD patients to access long-acting injectable naltrexone by allowing pharmacists to administer the drug and be compensated for their labor. To ensure the patient is also receiving the psychotherapy that must be part of MAT, a pharmacist must have entered into a collaborative practice agreement with a physician.
- Requires the state Medicaid program to cover a ready-to-use overdose reversal drug without a PAR requirement.
- Ensures that contracts between insurance carriers and providers aren't incentivizing the overprescribing of pain medications.

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