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Title: Medicaid Substance Use Disorder Coverage

Introduced by: Domenic Federico, MD, for the Kent County Delegation

Original Author: Jayne Courts, MD, Sandy Dettmann, MD, Cara Poland, MD, and Joshua Suderman, MD

Referred to: Reference Committee A

House Action: **APPROVE**

Whereas, the Centers for Disease Control and Prevention (CDC) has declared an opioid misuse epidemic in the United States, and

Whereas, the need for medical management and treatment of substance use disorders (SUD), including opioid misuse and alcohol misuse, far exceeds the current availability of Addiction Medicine specialty physicians, and

Whereas, on January 1, 2016, Medicaid began allowing physicians and non-physician practitioners providing medical management of substance use disorders (SUD) to use an Opioid Use Disorder code for relevant office visits, thus providing payment coverage for these services (known as Office-Based Opioid Treatment, or OBOT), and

Whereas, Medicaid currently covers payment for naltrexone (Vivitrol, a monthly injectable medication) for the treatment of both Alcohol Use Disorder and Opioid Use Disorder, and

Whereas, Medicaid does not cover payments for office visits related to the medical management of other substance use disorders, including Alcohol Use Disorder, and

Whereas, access to medical treatment for SUD for persons with Medicaid coverage is already very limited, and

Whereas, the limited payment coverage for medical management of SUD to OBOT serves as a deterrent to primary care physicians who might consider improving access by providing SUD services for their patients, and

Whereas, the appropriate billing and coding processes for medical management and treatment of SUD is unclear for both addiction medicine specialty physicians and primary care physicians, leading to poor payment coverage for these services, again limiting access; therefore be it

RESOLVED: That the Michigan Delegation to the American Medical Association (AMA) ask our AMA to work with the Centers for Medicare and Medicaid Services (CMS) to provide expanded Medicaid payment coverage for the medical management and treatment of all substance use disorders; and be it further

RESOLVED: That the Michigan Delegation to the American Medical Association (AMA) ask our AMA to work with the Centers for Medicare and Medicaid Services to establish clear billing and coding processes regarding the medical management and treatment of all substance use disorders.

Relevant AMA Policy:**Parity for Mental Illness, Alcoholism, and Related Disorders in Medical Benefits Programs H-185.974**

Our AMA supports parity of coverage for mental illness, alcoholism, substance use, and eating disorders.

Advocating for Reform in Payment of Mental Health and Substance Use Disorder Services H-345.980

Our AMA advocates that funding levels for public sector mental health and substance use disorder services not be decreased in the face of governmental budgetary pressures, especially because private sector payment systems are not in place to provide accessibility and affordability for mental health and substance use disorder services to our citizens.

Substance Use and Substance Use Disorders D-95.984

- (1) will continue to seek and participate in partnerships designed to foster awareness and to promote screening, diagnosis, and appropriate treatment of substance misuse and substance use disorders;
- (2) will renew efforts to: (a) have substance use disorders addressed across the continuum of medical education; (b) provide tools to assist physicians in screening, diagnosing, intervening, and/or referring patients with substance use disorders so that they have access to treatment; (c) develop partnerships with other organizations to promote national policies to prevent and treat these illnesses, particularly in adolescents and young adults; and (d) assist physicians in becoming valuable resources for the general public, in order to reduce the stigma and enhance knowledge about substance use disorders and to communicate the fact that substance use disorder is a treatable disease; and
- (3) will support appropriate federal and state legislation that would enhance the prevention, diagnosis, and treatment of substance use disorders.