



Last Updated: 07/13/2022

United States Department of Health and Human Services updated practice guidelines for the prescribing of buprenorphine.

This bulletin is to alert the provider community about the recent practice guideline issued by the United States Department of Health and Human Services (HHS) announcing enhanced flexibilities around eligibility to prescribe buprenorphine to up to thirty (30) patients for treatment of opioid use disorder (OUD), **effective April 28, 2021.**

In order to expand access to buprenorphine for OUD treatment, the April 28, 2021 Practice Guidelines for the Administration of Buprenorphine for Treating Opioid Use Disorder (OUD), under 21 U.S.C. 823(f)(2)(B)(i)-(ii), provides eligible physicians, physician assistants, nurse practitioners, clinical nurse specialists, certified registered nurse anesthetists, and certified nurse midwives, (hereinafter collectively referred to as “practitioners”) an exemption from certain statutory requirements that allows them to treat up to thirty (30) patients for OUD using buprenorphine **without having to meet any training-related certifications and without certifying their capacity to provide counseling and ancillary services.**

Practitioners seeking to leverage these flexibilities must still meet the following conditions:

- Practitioners must be state licensed and obtain (and maintain) a valid Drug Enforcement Agency (DEA) registration under 21 U.S.C. 823(f).
- Practitioners must submit a Notice of Intent (NOI) in accordance with current procedures in order to receive a waiver, specifying a patient limit of 30 (allowing them to circumvent training, counseling or other ancillary services requirements otherwise applied under 21 U.S.C. 823(g)(2)(B)(i)-(ii)).
- Practitioners utilizing this exemption are limited to treating no more than 30 patients at any one time. Time spent practicing under this exemption will not qualify the practitioner for a higher patient limit under 21 U.S.C. 823(g)(2)(b)(iii).
- Physicians assistants, nurse practitioners, clinical nurse specialists, certified registered nurse anesthetists, and certified nurse midwives are required to be supervised by, or work in collaboration with, a DEA registered physician if required by State law. Note in Virginia, the Board of Medicine and Nursing has authority to issue a nurse practitioner that meets certain requirements in §54.1-2957 a new license that includes a designation indicating that the nurse practitioner is authorized to practice without a practice agreement.

Guidelines can be referenced here:

<https://www.federalregister.gov/documents/2021/04/28/2021-08961/practice-guidelines-for-the-administration-of-buprenorphine-for-treating-opioid-use-disorder>. In conjunction with these guidelines, HHS also offered recommendations around training, education, and psychosocial treatment to practitioners who treat patients under this exemption, found in the HHS Buprenorphine Quick Start Guide. Practitioners are also encouraged to provide access to psychosocial services, such as counseling or other ancillary services, or refer as appropriate to licensed behavioral health



MEDICAID BULLETIN

practitioners in their communities.

Practitioners not wishing to practice under the exemption may continue to seek a waiver per established protocols for the customary NOI. More information about how to treat more than 30 patients may be found here:

<https://www.samhsa.gov/medication-assisted-treatment/become-buprenorphine-waivered-practitioner>.

PROVIDER CONTACT INFORMATION & RESOURCES	
Virginia Medicaid Web Portal Automated Response System (ARS) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	www.viriniamedicaid.dmas.virginia.gov
Medicall (Audio Response System) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	1-800-884-9730 or 1-800-772-9996
KEPRO Service authorization information for fee-for-service members.	https://dmas.kepro.com/
Provider Appeals DMAS is launching an appeal portal in late May 2021. You can use this portal to file appeals and track the status of your appeals. Visit the website listed for appeal resources and to register for the portal.	https://www.dmas.virginia.gov/#/appealsresources
Managed Care Programs Medallion 4.0, Commonwealth Coordinated Care Plus (CCC Plus), and Program of All-Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan may utilize different guidelines than those described for Medicaid fee-for-service individuals.	
Medallion 4.0	http://www.dmas.virginia.gov/#/med4
CCC Plus	http://www.dmas.virginia.gov/#/cccplus
PACE	http://www.dmas.virginia.gov/#/longtermprograms
Magellan Behavioral Health Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.	www.MagellanHealth.com/Provider For credentialing and behavioral health service information, visit: www.magellanofvirginia.com , email: VAProviderQuestions@MagellanHealth.com , or Call: 1-800-424-4046



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MEDICAID BULLETIN

<p>Provider HELPLINE Monday-Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.</p>	<p>1-804-786-6273 1-800-552-8627</p>
<p>Aetna Better Health of Virginia</p>	<p>www.aetnabetterhealth.com/Virginia 1-800-279-1878</p>
<p>Anthem HealthKeepers Plus</p>	<p>www.anthem.com/vamedicaid 1-800-901-0020</p>
<p>Magellan Complete Care of Virginia</p>	<p>www.MCCofVA.com 1-800-424-4518 (TTY 711) or 1-800-643-2273</p>
<p>Optima Family Care</p>	<p>1-800-881-2166 www.optimahealth.com/medicaid</p>
<p>United Healthcare</p>	<p>www.Uhccommunityplan.com/VA and www.myuhc.com/communityplan 1-844-752-9434, TTY 711</p>
<p>Virginia Premier</p>	<p>1-800-727-7536 (TTY: 711), www.virginiapremier.com</p>