NC Department of Health and Human Services

Provider Questions and Answers



Opioid Treatment Under the 21st Century Cures Act:

A guide for Opioid Treatment Providers (OTPs) and Office-Based Opioid Treatment Practices (OBOTs)

What funding is available for opioid use disorder treatment under the 21st Century Cures Act?

The 21st Century Cures Act provides funding to states to help combat the opioid epidemic. A primary aim of these grants is to increase access to opioid treatment and reduce the unmet need for treatment. North Carolina secured a grant and is distributing funding to support opioid use disorder treatment. Any provider that is licensed to offer Medication Assisted Treatment (MAT) can apply to receive this funding when they provide services to qualified individuals.

I am an Opioid Treatment Provider (OTP) or Office-Based Opioid Treatment Practice (OBOT). What does this grant mean for me?

The funding from this grant can be used to reimburse you for providing opioid treatment services to people that do not have private insurance or Medicaid to pay for treatment. Payment will be authorized by the Local Management Entities/Managed Care Organizations (LME/MCOs) that already administer other behavioral health and substance use funding in NC. It is not necessary to be a Medicaid provider to be reimbursed for opioid treatment services; however, you will need to be a contracted provider with the LME/MCO that serves the patient you are treating.

How do I become eligible to be reimbursed for providing services under this grant?

1. Have a contract with one or more LME/MCOs.

Which LME/MCO you contract with will depend on which LME/MCO serves the county or counties in which your patients reside. If you only anticipate seeing consumers from one LME/MCO's catchment area, you only need to contract with that LME/MCO. If you anticipate seeing consumers from the catchment areas of multiple LME/MCOs, you will need to contract separately with each of the relevant LME/MCOs. More information about LME/MCO catchment areas is available at https://www.ncdhhs.gov/providers/lme-mco-directory.

Under the terms of the grant, LME/MCOs are required to expand service availability in areas of unmet need by contracting with providers who can be appropriately credentialed and remain in good standing to provide these services. These funds are **not** restricted to non-profit agencies. If you experience any difficulties in contracting with an LME/MCO, please contact any member of the Addictions and Management Operations team in the Division of Mental Health, Developmental Disabilities and Substance Abuse Services at 919.733.4670.

- 2. Be credentialed and in good standing with regulatory requirements for opioid treatment providers. Providers must be licensed to provide MAT. OTPs must be licensed by the Division of Health Service Regulation, approved by the Drug Enforcement Agency, the Division of Mental Health, Developmental Disabilities and Substance Abuse Services' Drug Control Unit, the State Opioid Treatment Authority and the Substance Abuse and Mental Health Services Administration (SAMHSA), as well as accredited by an approved accrediting body (e.g., the Joint Commission or CARF). OBOT physicians must have received appropriate training to prescribe buprenorphine for Medication Assisted Treatment (MAT).
- 3. If you are not a Medicaid provider (i.e., you are only billing Opioid STR/Cures funding), the LME/MCO can add you into NC Tracks through the Provider Upload File.

 The LME/MCO can tell you what information they need to process this action.
- 4. Collect and submit data through NC TOPPS.
 You need to agree to provide other data elements required by the Opioid STR/Cures grant if not collected through NC TOPPS.

Once I am an enrolled provider, how do I get services authorized for payment for providing MAT to patients with an opioid use disorder?

Each LME/MCO operates a Provider Portal for input of consumer information for service authorizations. The consumer must be clinically eligible for the service to be provided. The benefit eligibility criteria are Adults who are ages 18 and over with a primary opioid use disorder covered under the ASOUD Benefit Plan and who:

- would benefit from assessment, initiation, engagement, treatment, continuity of treatment services, and/or supports for relapse prevention and recovery stability;
- are not currently in treatment for an Opioid Use Disorder; and
- do not have benefits coverage under Medicaid or private insurance.

Covered services under this grant include, but are not limited to, individual, group and family therapies, intensive outpatient services, medication administration and recovery supports. Contact the LME/MCO in your service area for a complete list of eligible services.

LME/MCOs are expected to authorize services promptly. If you are experiencing any difficulties in service authorization, please contact any member of the Addictions and Management Operations team in the Division of Mental Health, Developmental Disabilities and Substance Abuse Services at 919-733-4670.

How can I bill Medicaid for MAT for an individual who is enrolled in Medicaid?

- Have a contract with an LME/MCO as described above.
- Enroll directly through NCTracks Provider Enrollment at https://www.nctracks.nc.gov/content/public/providers/provider-enrollment.html
- Submit an authorization through the LME/MCO provider portal as described above.