

October 18, 2016

*******IMPORTANT CHANGE*******

**NEW BUPRENORPHINE BILLING CODES BEING IMPLEMENTED
FOR THE HUBS EFFECTIVE DECEMBER 1st, 2016**

New HCPCS codes were issued in 2015 for Buprenorphine/Naloxone and Buprenorphine. The below listed HUB locations will be required to bill using these new codes effective 12/1/2016 in order to comply with proper billing practices. These new codes will need to replace the pre-existing code for Unclassified Drugs, J3490. You are still required to list the NDC's for the specific drug administered on the claim.

Below are the new 2016 HCPCS codes:

- J0571 Buprenorphine, oral, 1 mg
- J0572 Buprenorphine/naloxone, oral, less than or equal to 3 mg
- J0573 Buprenorphine/naloxone, oral, greater than 3 mg, but less than or equal to 6 mg
- J0574 Buprenorphine/naloxone, oral, greater than 6 mg, but less than or equal to 10 mg
- J0575 Buprenorphine/naloxone, oral, greater than 10 mg

Additional billing information is provided below:

1. Billing provider must be as follows:
Start date of service 12/1/2016:
HABIT OPCO (Brattleboro) NPI 1912155516
HABIT OPCO (West Lebanon) NPI 1023175072
BBHS/BAART (Newport/NEK/St. Johnsbury) NPI 1902944002
BBHS/BAART (Berlin/Central VT) NPI 1225115439
West Ridge Center/RRMC ADAP NPI 1467416206
Howard Center: (VTM ID# 1009456) (NPI 1134346687)
2. Providers are reminded; Suboxone when prescribed for opiate dependency (its only FDA approved indication) is designed to be dosed once daily. Daily doses should be made up of the fewest number of dosage units (now easier with 4 different film strengths). Films should never be divided as the child protection is then lost for the remainder of the dose.
3. "Suboxone" or "Buprenorphine" must be written in field 19 of the CMS – 1500 claim form or in the electronic claim notes field.



4. One of the diagnosis codes for the J0571 – J0575 must be F11.20, F11.21, F11.222, F11.229, F11.23, F11.24, F11.250, F11.251, F11.259, F11.281, F11.282, F11.288, and F11.29.
5. Use HCPCS code J0571 – J0575
6. From the Provider Manual:
 When entering an NDC on your claim form, please enter the following data elements in the following order: NDC, measurement qualifier code and unit quantity. Do not insert brackets, spaces or dashes. Claims formatted incorrectly will be denied.
 - **FL 24D:** HCPCS code
 - **FL 24D Shaded area:** 11 digit NDC number, Unit of Measurement Qualifier, and Unit Quantity
 - **FL 24G:** HCPCS Unit

COVERED NDC's	NDC DESCRIPTION	PRICE/UNIT
12496-1202-01	Suboxone 2mg-0.5mg SL Film	\$4.26
12496-1202-03	Suboxone 2mg-0.5mg SL Film	\$4.26
12496-1204-01	Suboxone 4mg-1mg SL Film	\$7.61
12496-1204-03	Suboxone 4mg-1mg SL Film	\$7.61
12496-1208-01	Suboxone 8mg-2mg SL Film	\$7.61
12496-1208-03	Suboxone 8mg-2mg SL Film	\$7.61
12496-1212-03	Suboxone 12mg-3mg SL Film	\$15.22
12496-1212-01	Suboxone 12mg-3mg SL Film	\$15.22
50383-0924-93	Buprenorphine HCL 2mg	\$3.47
00228-3156-03	Buprenorphine HCL 2mg	\$3.47
00378-0923-93	Buprenorphine HCL 2mg	\$3.47
50383-0924-93	Buprenorphine HCL 2mg	\$3.47
00054-0176-13	Buprenorphine HCL 2mg	\$3.47
00093-5378-56	Buprenorphine HCL 2mg	\$3.47
50383-0930-93	Buprenorphine HCL 8mg	\$1.99
00054-0177-13	Buprenorphine HCL 8mg	\$1.99
00093-5379-56	Buprenorphine HCL 8mg	\$1.99
00228-3153-03	Buprenorphine HCL 8mg	\$1.99
00378-0924-93	Buprenorphine HCL 8mg	\$1.99

- Prices subject to change. Rates listed here are the rates effective on 12/1/2016

7. One Unit = One Film Packet
8. FL 24D Shaded area:
 11 digit NDC number, for this program refer to chart of covered NDC's.
 Unit of Measurement Qualifier, for this program it will be "UN".



Unit Quantity, for this program it will be the number of film packets.

9. Suboxone and Buprenorphine will be priced based on the NDC, see #6.
10. Please bill per calendar month. "From" date should be either the first date of treatment or the first of the month or the first date of dosage change. "To" date should be either the last date of treatment or the last day of the month or the last date of that dosage. Providers should only bill the days the beneficiary is eligible.
11. Suboxone is limited to 16mg/day, without a Prior Authorization. If a patient requires more than 16mg/day, a Prior Authorization is required. Buprenorphine (Mono) will always require prior authorization. **Retro Prior Authorizations will not be granted.** Requests should be directed to Change Healthcare (Fax requests to 1-844-679-5366 and questions can be directed to the Clinical Call Center at 1-844-679-5363) during normal business hours.
12. Providers must verify the patient's eligibility and other insurance information using the patient's Medicaid UID number by accessing either of the automated eligibility verification systems. The **Green Mountain Care** Eligibility Verification System (EVS) provides beneficiary information to participating health care providers.
 - Voice Response System (VRS), (802) 878-7871, option 1; or
 - Transaction Services at <http://www.vtmedicaid.com/Interactive/login2.html>

If for any reason you are unable to use either method, or if you have other billing questions, you may call the HPE Provider Services Help Desk at (800) 925-1706 or (802) 878-7871. For additional information please see the Provider Manual on our website www.vtmedicaid.com, select downloads and then select manuals.

