



### **Network Notification**

**Notification Date:** July 31, 2017  
**To:** CareSource OH Medicaid Health Partners  
**From:** CareSource®  
**Subject:** PY-0020 - Drug Screening Payment Policy  
**Effective Date:** July 31, 2017

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***This notification is a revision to the [previous network notification](#) dated Mar. 20, 2017.***

In an effort to continually improve our internal processes, updates have been made to the Drug Screening Payment Policy to further clarify and streamline the way we do business with you.

At this time, quantity limitations are not in effect. However, as we continue to monitor our policies and procedures, we do expect further enhancements to the policy in the fourth quarter of 2017.

#### **SUMMARY**

Monitoring for controlled substances is performed to detect the use of prescription medications and illegal substances of concern for the purpose of medical treatment. Monitoring for controlled substances plays a key role particularly in the care of persons undergoing medical treatment with chronic pain therapy and substance use disorder (SUD). CareSource will reimburse charges for drug screening that are medically necessary for the management of members being treated with drugs that are potentially abusive or addictive such as opioids and related medications, or for members suspected of using illicit drugs solely or in combination with prescribed controlled substances. CareSource will also reimburse for qualitative/presumptive drug screening performed as part of routine, prenatal care for pregnant members.

#### **IMPACT**

Drug screenings will not require prior authorization. However, medical records must substantiate the medical necessity for each test ordered.

Clinical scenarios for drug screening have general and specific considerations for medical necessity criteria, to justify coverage according to this policy.

**Individualized Testing:** In all cases other than routine qualitative drug screening as part of prenatal care, medical necessity for submitted charges must be individualized and documented in the member's medical record and included in the treatment plan of care. CareSource does not provide coverage for drug testing for forensic, legal, employment, transportation, or school purposes.

**Non-Urine Testing:** CareSource will reimburse blood testing without a prior authorization in emergency department settings only, to evaluate acute overdose.

**Urine Testing:** Urine for clinical drug testing is the specimen of choice because of its high drug concentrations and well-established testing procedures. Nevertheless, urine is one of the easiest specimens to adulterate.

**Physician Orders:** A signed and dated physician order for the drug screening and/or testing is required.

**Out-of-network lab service providers:** Out-of-network non-participating providers are not covered for urine drug testing laboratory services. Out-of-network non-participating clinicians may use participating laboratories for drug testing services.

CareSource will not cover drug testing performed at non-participating laboratories. CareSource requires labs to directly bill CareSource.

Prior Authorization will not be required for confirmatory and duplicative testing. CareSource will not authorize or reimburse for routine nonspecific or wholesale orders for drug screening (qualitative), confirmation, and quantitative drugs of abuse testing.

Claims not meeting the necessary criteria as described in the policy document will be denied.

#### **NEXT STEPS**

To obtain more information, the full [Drug Screening Payment Policy](#) is available on the CareSource.com. You may refer to the specific policy for more information on:

- Individualized Testing, Non-Urine Testing, Urine Testing
- Physician Orders and Documentation Requirements
- Testing by Non-ordering providers
- Confirmatory and Duplicative Testing
- Drug Testing Laboratories
- Conditions of Coverage
- List of Codes

Thank you in advance for your cooperation in adhering to this new policy requirement.

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