



**Connecticut Medical Assistance Program**  
Policy Transmittal 2014-21

Provider Bulletin 2014-59  
September 2014

Roderick L. Bremby, Commissioner

Effective Date: Ongoing  
Contact: Paul Piccione @ 860-424-5160

**TO: Methadone Clinics**

**RE: Urine Drug Screens Ordered by Methadone Clinics**

The purpose of this policy transmittal is to remind methadone clinic providers that their weekly reimbursement rate includes payment for on-site laboratory testing. Section 17b-262-822(b)(3) of the Regulations of Connecticut State Agencies states: *“A weekly rate payment for chemical maintenance treatment shall be paid when opiate agonist medication and medication management services are provided to a client. Intake evaluation, initial physical examination; on-site drug abuse testing and monitoring; and individual, group and family counseling are services that are also included in the weekly rate, if medically necessary.”*

Urine drug screening is an important component of Medication Assisted Treatment for Opiate Addiction programs both at the time of admission and throughout treatment. It is the expectation of the Department that methadone providers follow all federal and state regulations or statutes for monitoring their clients' compliance with treatment and their use of substances of abuse. Treatment planning needs to be individualized to meet the beneficiary's needs and urine drug screens can be an important factor in determining need and in protecting beneficiary safety. The Department understands that good clinical care entails an initial drug screening and random urinalyses performed based on clinical need, stage of treatment, and/or suspicion of illicit drug use.

Typically urine drug samples can be screened on-site using a 'quick-test'. In those instances where the results of the on-site testing are atypical or there is suspicion that the results are invalid or tainted, urine samples may be tested by an independent laboratory. In addition, the Department will not pay separately for sample validity tests since these are typically included in the quick tests. Providers should only be ordering urine drug analysis by an independent laboratory when it is medically necessary.

Examples of medically necessary testing include confirmatory testing when a drug of abuse has been detected by a screen and is ordered by appropriately licensed medical staff or non-routine quantification testing for methadone levels. Special medical circumstances may also necessitate laboratory testing. The Department will not pay separately for test of adulterants since these are typically included in quick tests.

**Order:** When it is necessary to request further analysis by an independent laboratory, there must be a physician's, advanced practice registered nurse's or a physician assistant's order in the client's medical record indicating the date, the specific test(s) to be performed and the justification for the testing. Standing orders are not permitted.

**Documentation:** In addition to documentation of the justification for the testing ordered, each beneficiary's medical record must include documentation that the results of all testing have been reviewed by the appropriate medical personnel and how this review impacted the treatment plan.

**Posting Instructions:** Policy transmittals can be downloaded from the Connecticut Medical Assistance Program Web site at [www.ctdssmap.com](http://www.ctdssmap.com)

**Distribution:** This policy transmittal is being distributed to holders of the Connecticut Medical Assistance Program Provider Manual by HP Enterprise Services.

**Responsible Unit:** DSS, Division of Health Services, Integrated Care Unit, Paul M. Piccione, at (860) 424-5160.

**Date Issued:** September 2014.