

Considerations informing HCA's drug testing clinical policy

The following guidance applies to urinalysis drug screening for individuals with Apple Health (Medicaid) coverage receiving medications for substance use disorder (SUD) or formal substance use disorder treatment. This guidance does not apply to urinalysis drug screening for individuals participating in a court ordered or diversion program.

Monitoring for the use of drugs for the single purpose of assessing compliance with a court order is not considered part of the medical or behavioral health Apple Health benefit. This guidance does not apply to workplace drug testing.

All drug tests done as part of medication management for the treatment of substance use disorders must meet criteria for medical necessity as defined in <u>WAC 182-500-0070</u>. To receive treatment from a Department of Health (DOH) credentialed substance use disorder treatment agency, Apple Health reimbursement is limited to medically necessary drug screens and urinalysis testing.

Drug screens must meet medical necessity criteria and:

- Be ordered by a prescribing provider as part of a medical evaluation; or
- Be necessary to assess suitability for medical tests or treatment.

Drug screens and urinalysis confirmation testing that occur because of compliance requirements in pre-trial, probation, and diversion programs in the criminal justice system are not reimbursed by Apple Health unless there are additional clinical indicators supporting medical necessary criteria. For court or compliance required drug screening or urinalysis testing, other non-Apple Health funding must be used (i.e. county behavioral health taxes, client participation fees, substance abuse block grants, criminal justice treatment account dollars, etc.).

Rationale for not covering specific tests

Testing for multiple drug classes

Given statewide prescription monitoring program reports and seizure information, there is no support for immunoassay or mass spectrometry testing more than 7 individual drug classes at once.

Ethyl Glucuronide

High ethyl glucuronide levels are reflective of recent alcohol use. Low cut off levels may be falsely negative for lower levels of alcohol use. There are also several substances that can lead to false positive ethyl glucuronide tests. This limits reliable and accurate conclusions from the results to be applied toward patient care. If persistent evidence of alcohol use exists despite the person being treated for an alcohol use disorder, an increase in treatment intensity should be considered.

March 2025 Page 1

Quantitative testing

Because hydration status, diurnal variability, metabolic rate, and time since last ingestion can affect drug levels and those of their metabolites, quantitative testing is not reliably predictive in reflecting patterns of use.

Buprenorphine/norbuprenorphine ratios

There is no agreed upon threshold, validated across large sample sizes or diverse populations, for what an appropriate norbuprenorphine to buprenorphine ratio should be to rule out diversion. Apple Health is required to use medical necessity to guide coverage decisions. Testing for the presence or absence of a drug or its metabolite to assure compliance with a therapeutic intervention may be considered medically necessary. Testing drug levels to determine whether diversion or urine adulteration is occurring are not medical interventions and are not considered medically necessary.

People often experience multiple concurrent substance use disorders. It is expected that the frequency and utilization of both point of care and confirmatory tests will be higher in the initial stages of treatment and taper off over time. Urine drug testing reflects a moment in time and is not by itself diagnostic of a substance use disorder. If during treatment, urine drug testing suggests continued use and the individual's functional status is not improving, a higher level of care or the delivery of higher intensity services may be necessary.

Confirmatory tests done in response to a negative presumptive screen require documentation of clinical signs or symptoms suggesting active use to document medical necessity.

Related billing and encounter guides

- Physician's Billing Guide
- Substance Use Disorder (SUD) Billing Guide
- Integrated Managed Care (IMC) Service Encounter Reporting (SERI)

Additional considerations

This guidance does not apply to people enrolled in a therapeutic court and ordered to participate in chemical dependency treatment. Tests for these individuals are ordered by and are paid for by the criminal court system. This guidance does not cover workplace drug testing.

