

Medication-assisted treatment and office-based addictions treatment questionnaire and attestation form

UnitedHealthcare Community Plan of New Jersey care providers



Please answer all questions as to whether you provide medication-assisted treatment (MAT) services. Email your completed questionnaire and attestation to uhccpnj@uhc.com. Please include the word **OBAT** in the subject line.

1. Do you provide MAT services? Yes No

2. What type of MAT medication(s) do you use to treat opioid addiction?

Buprenorphine (and buprenorphine products) Naltrexone Methadone

3. Do you employ a navigator*? Yes No

Office-based addictions treatment (OBAT) health care professional standards

The following information outlines OBAT health care professional standards:

- Prescribe approved MAT medications on site by qualified prescriber
- Follow standard best practice guidelines for prescribing MAT
- Physician, nurse or other qualified health care professional provides education consistent with the nature of the problem(s) and the patient's and/or family's needs related to substance use, MAT and associated health conditions
- Participate in training or consultation offered through the Centers of Excellence (COE), as needed
- Develop and maintain integrated care relationships
- Provide, or arrange for, substance use counseling, as needed
- Consistent with American Society of Addiction Medicine guidelines, offer counseling in conjunction with MAT or refer for counseling, which includes establishing a care provider network for referral to services not provided by the OBAT
- Assess and maintain risk management criteria, such as prescription monitoring program checks, random drug screening and client service plans for adherence
- Utilize multidisciplinary staff to provide MAT and counseling and care management
- Provide individualized care and use navigator support to help patients obtain needed support services, such as counseling, social services, recovery supports, patient and family education and/or referrals to premier providers or please add COE, as needed

Attestation

I understand that UnitedHealthcare may require documentation to verify that, if applicable, I meet the criteria pertaining to MAT services listed in the OBAT health care professional standards section above. I'll cooperate with a UnitedHealthcare documentation audit, if requested, to verify that I meet the required criteria.

I hereby attest that all of the information below is true and accurate to the best of my knowledge, and by signing this attestation, agree to provide MAT services.

I understand and agree that a fax or photocopy of this attestation is as effective as the original.

Your signature is required to complete this attestation.

Health care professional name:

Name (if different from the care provider named above):

Signature:

Date:

*A navigator is an RN, LPN or SW with a baccalaureate degree with 2 years lived experience, or an associate degree with 4 years lived experience, who helps patients get the services they need. These services can include support services, counseling, social services, recovery supports, patient and family education, and/or referrals to Premier Providers or Centers of Excellence (COE).