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HOUSE BILL NO. 2558

AMENDMENT IN THE NATURE OF A SUBSTITUTE

(Proposed by the Senate Committee on Education and Health
on February 7, 2019)

(Patron Prior to Substitute—Delegate Pillion)

A BILL to amend the Code of Virginia by adding a section numbered 54.1-2910.3:1, relating to Medicaid recipients; treatment involving opioids; payment.

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding a section numbered 54.1-2910.3:1 as follows:

§ 54.1-2910.3:1. Medicaid recipients; treatment involving prescription of opioids; payment.

A. No provider licensed pursuant to this chapter shall request or require a patient who is a recipient of medical assistance services pursuant to the state plan for medical assistance and who is a recipient of health care services involving (i) the prescription of an opioid for the management of pain or (ii) the prescription of buprenorphine-containing products, methadone, or other opioid replacements approved for the treatment of opioid addiction by the U.S. Food and Drug Administration for medication-assisted treatment of opioid addiction to pay costs associated with the provision of such service out-of-pocket. The prohibition on payment of costs shall not apply to a recipient's cost-sharing amounts required by the state plan for medical assistance.

B. Every provider who does not accept payment from the Department of Medical Assistance Services for health care services who intends to provide health care services described in subsection A to a patient who is a recipient of medical assistance services pursuant to the state plan for medical assistance shall, prior to providing such health care services, provide written notice to such patient that (i) the Commonwealth's program of medical assistance services covers the health care services described in subsection A and the Department of Medical Assistance Services will pay for such health care services if such health care services are determined to meet the Department of Medical Assistance Service's medical necessity criteria and (ii) the provider does not participate in the Commonwealth's program of medical assistance and will not accept payment from the Department of Medical Assistance Services for such health care services. Such notice and the patient's acknowledgment of such notice shall be documented in the patient's medical record.