

# **Recovery Pathways, LLC**

## **Medicaid/Healthy Michigan Plan Notice**

*NOTE: This notice applies only to individuals receiving buprenorphine/naloxone (Suboxone) treatment.*

Attention Medicaid/Healthy Michigan Plan Patients:

I understand that prior authorizations are never guaranteed to be approved. I understand that Medicaid/Healthy MI Plan (MDCH) does not support Buprenorphine for continuous treatment. I agree that Medicaid/Healthy MI Plan does not support Buprenorphine for lifetime, recurrent or episodic treatment nor for the treatment of pain. I understand that Medicaid/Healthy MI Plan requires weaning from Buprenorphine within the supported treatment period.

I understand that Medicaid/Healthy MI Plan requires a prior authorization (PA) for all Buprenorphine prescriptions. PA's are only granted for up to six months at a time and for a total period of one year. I understand that prior authorizations may take up to seven days for a decision to be granted. I should have an alternative plan to pay for the Buprenorphine if the prior authorization takes more than a few days.

It is my responsibility to keep track of the six month and year expiration date of my PA.

I understand that my PA is filed under the doctor I start treatment with and that only prescriptions written by that provider are covered under my prior authorization. If I see another provider for prescription on one time basis I will have to pay cash for the entirety of that prescription.

I understand that if I have had previous Buprenorphine treatment elsewhere within the past two years my prior authorization may take longer than seven days and that there is no guarantee for approval.

I understand that the office is required to submit an appropriate drug screen for prior authorization resubmission. The state monitors the prescriptions that I fill and if I fill any other opiate or benzodiazepine my PA may be denied.

I understand that Medicaid/Healthy MI Plan requires a wean for the final six months of treatment with the goal to be successfully weaned off Buprenorphine by one year. It is my responsibility to continuously discuss the wean plan with the physician.

The office is not responsible for the State guidelines but we must follow them. Recovery Pathways, LLC cannot change the approval process nor the length of time required for approval. Finally, I understand that failure of the treatment program or termination due to three no shows will result in my prior authorization being cancelled.

---

Patient Signature

---

Date

---

Witness Signature

---

Date