

## Press Release

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### **Starting today, Michigan eliminates prior authorization for medications used to treat opioid use disorders**

LANSING, Mich. – Starting today, the Michigan Department of Health and Human Services (MDHHS) Medical Services Administration has removed prior authorization requirements for medications used to treat opioid use disorder, including buprenorphine.

“The removal of prior authorization for these medications in the Medicaid program will help increase access to treatment for people with opioid use disorders,” said Dr. Joneigh Khaldun, chief medical executive and chief deputy for health for MDHHS. “By eliminating this requirement, medical providers will be empowered to help people begin treatment when they are ready and increase their chances of a successful recovery.”

Prior authorization is a requirement that physicians must obtain approval from a patient’s health care insurer before prescribing a specific medication or to perform a particular operation.

After an in-depth analysis of the prior authorization program, existing literature and lessons learned in other states, MDHHS believes that prior authorization creates substantially more barriers to accessing care for opioid use disorders than protections from misuse of substances.

Medication-assisted treatment, combined with counseling or behavioral therapy, is the gold standard for treating individuals with opioid use disorder, leading to significantly better outcomes. Prior authorization has been removed in 21 states with no data indicating an increased rate of drug diversion.

MDHHS will conduct an evaluation and complete quarterly monitoring of drug utilization claims to assess changes in how the medications are used to treat patients and ensure that the change does not result in any negative impacts.

More information is available in a [Frequently Asked Questions document](#).

For more information on the opioid epidemic and efforts being made by the state to address this issue, visit [Michigan.gov/Opioids](http://Michigan.gov/Opioids).

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- [Prior Authorization NR.pdf](#)