



Vermont Department of Health, Division of Alcohol and Drug Abuse Programs (ADAP)  
and  
Department of Vermont Health Access (DVHA)

**Guidelines and Procedures**

Title Hub Protocol: Drug Toxicology Screening

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**Purpose- Drug Toxicology Screening**

Drug toxicology screening is a requirement of all Hub Programs and the frequency beyond the federal minimum of 8 toxicology screens annually should be driven by clinical need and patient stability. The costs associated with drug toxicology screening are paid for within the Hub bundled rate and should not be billed separately.

Listed below are the *three exceptions to Drug Toxicology Screening in which HUB providers* can utilize certified laboratories when a confirmation drug test is requested.

**Procedure- Exceptions when performing confirmation Drug Toxicology Screening outside the Opioid Treatment Program/HUB**

1. In the event that a drug screen result is contested by the patient, which could have a significant negative impact on the patient's treatment. (E.g. Loss of take home dosages, program discharge, etc.).
2. If there is reasonable clinical suspicion that a patient's pattern, or substance, of use is not adequately detectable in available testing. Examples might include: tracking a Benzodiazepine taper, requiring a nor buprenorphine ratio due to take home diversion concerns, etc.)
3. Peak and Trough levels for Methadone to determine rapid metabolizing of medication which would require a "split dosing" protocol.

In these cases the program physician could order confirmatory toxicology testing billable outside the Hub bundled rate. In the event this occurs the patients chart note will reflect the nature of the concern and/or clinical rationale and the note will be available and auditable in the patient record.