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State/Territory Name: Indiana

State Plan Amendment (SPA) #: 21-0001

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

June 28, 2021

Allison Taylor, Medicaid Director
Family and Social Services Administration
402 W. Washington, Room W374
Indianapolis, IN 46204

Re: Indiana State Plan Amendment (SPA) 21-0001

Dear Ms. Taylor:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 21-0001. This amendment proposes to add medication-assisted treatment (MAT) as a mandatory benefit in the Medicaid state plan. This letter is to inform you that Indiana's Medicaid SPA Transmittal Number 21-0001 is approved effective October 1, 2020 until September 30, 2025, pursuant to 1905(a)(29) of the Social Security Act and Section 1006(b) of the SUPPORT Act.

Section 1006(b) of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act ("SUPPORT Act"), signed into law on October 24, 2018, amended section 1902(a)(10)(A) of the Social Security Act (the Act) to require state Medicaid plans to include coverage of MAT for all individuals eligible to enroll in the state plan or waiver of the state plan. Section 1006(b) also added a new paragraph 1905(a)(29) to the Act to include the new required benefit in the definition of "medical assistance" and to specify that the new required benefit will be in effect for the period beginning October 1, 2020, and ending September 30, 2025.

Section 1006(b) of the SUPPORT Act also added section 1905(ee)(1) to the Act to define MAT, for purposes of the new required coverage, as:

. . . all drugs approved under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355), including methadone, and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262) to treat opioid use disorders; and[,] . . . with respect to the provision of such drugs and biological products, counseling services and behavioral therapy.

Pursuant to section 1135(b)(5) and/or 1135(b)(1)(C) of the Act, due to the COVID-19 public health emergency (PHE), CMS issued an approval letter on March 15, 2021 allowing Indiana to modify the SPA submission requirements at 42 C.F.R. 430.20, to allow the state to submit a SPA implementing section 1905(a)(29) of the Act by March 31, 2021 that would take effect on

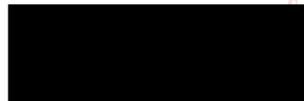
Page 2 – Allison Taylor

October 1, 2020.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Act and implementing regulations.

If you have any questions, please contact Mai Le-Yuen at 312.353.2853 or via email at Mai.Le-Yuen@cms.hhs.gov.

Sincerely,

 Digitally signed by James
G. Scott -S
Date: 2021.06.28 12:51:50
05'00'

James G. Scott, Director
Division of Program Operations

cc: Sara Albertson, FSSA

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 21-001	2. STATE Indiana
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
FOR: HEALTH CARE FINANCING ADMINISTRATION	4. PROPOSED EFFECTIVE DATE: October 1, 2020	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: Social Security Act § 1902(a)(10)(A) and 1905(a)(29); Section 1006(b) of the SUPPORT Act;	7. FEDERAL BUDGET IMPACT (thousands): b. FFY 2020 \$ 0 FFY 2021 \$ 0
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Supplement 4 to Attachment 3.19-A Pag1-11 Attachment 4.19-B Page 1g-1h	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Remove Attachment 3.1-A page 12, item covered under 1905(a) 13d New New
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10. SUBJECT OF AMENDMENT:

This State Plan amendment brings Indiana Medicaid into compliance with the SUPPORT Act Section 1006(b) regarding mandatory MAT benefits.

11. GOVERNOR'S REVIEW (Check One):

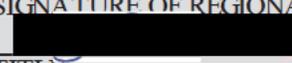
GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

Indiana's Medicaid State Plan does not require the Governor's review. See Section 7.4 of the State Plan

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: Allison Taylor Medicaid Director Indiana Office of Medicaid Policy and Planning 402 West Washington Street, Room W374 Indianapolis, IN 46204 ATTN: Sara Albertson, Federal Relations Lead
13. TYPED NAME: Allison Taylor	
14. TITLE: Medicaid Director	
15. DATE SUBMITTED: March 31, 2021	

FOR REGIONAL OFFICE USE ONLY	
17. DATE RECEIVED: March 31, 2021	18. DATE APPROVED: June 28, 2021

PLAN APPROVED – ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: October 1, 2020	20. SIGNATURE OF REGIONAL OFFICIAL:  Digitally signed by James G. Scott -S Date: 2021.06.28 12:52:38 -05'00'
21. TYPED NAME: James G. Scott	22. TITLE: Director, Division of Program Operations

23. REMARKS:

State of Indiana**1905(a)(29) Medication-Assisted Treatment (MAT)****Unbundled Prescribed Drugs and Biologicals**

The reimbursement for unbundled prescribed drugs and biologicals used to treat opioid use disorder will be reimbursed using the same methodology as described for Pharmacy Services located in Attachment 4.19-B, pages 1d and 1e, for drugs that are dispensed or administered.

Application of the RBRVS reimbursement methodology for services provided by non-physician practitioners (NPPs)

The effective date for all rates, the applicable fee schedules as well as a link to their electronic publication can be found on page 1b-1c of Attachment 4.19-B of the State Plan. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Medicaid services listed above. Services for both ABP and non-ABP beneficiaries utilize the same rates unless otherwise noted in the plan. All applicable procedure code listings and/or rates are published on the State's website at www.indianamedicaid.com.

Application of the RBRVS reimbursement methodology for services provided by other licensed practitioners

The effective date for all rates, the applicable fee schedules as well as a link to their electronic publication can be found on page 1c of Attachment 4.19-B of the State Plan. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Medicaid services listed above. Services for both ABP and non-ABP beneficiaries utilize the same rates unless otherwise noted in the plan. All applicable procedure code listings and/or rates are published on the State's website at www.indianamedicaid.com.

Community Mental Health Centers

The effective date for all rates, the applicable fee schedules as well as a link to their electronic publication can be found on page 5a of Attachment 4.19-B of the State Plan. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Medicaid services listed above. Services for both ABP and non-ABP beneficiaries utilize the same rates unless otherwise noted in the plan. All applicable procedure code listings and/or rates are published on the State's website at www.indianamedicaid.com.

Upper Payment Limit Demonstration

The effective date for all rates, the applicable fee schedules as well as a link to their electronic publication can be found on page 2 of Attachment 4.19-B of the State Plan. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Medicaid services listed above. Services for both ABP and non-ABP beneficiaries utilize the same rates unless otherwise noted in the plan. All applicable procedure code listings and/or rates are published on the State's website at www.indianamedicaid.com.

Outpatient Hospital Services

The effective date for all rates, the applicable fee schedules as well as a link to their electronic publication can be found on page 2 of Attachment 4.19-B of the State Plan. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Medicaid services listed above. Services for both ABP and non-ABP beneficiaries utilize the same rates unless otherwise noted in the plan. All applicable procedure code listings and/or rates are published on the State's website at www.indianamedicaid.com.

Opioid Treatment Services

The effective date for all rates, the applicable fee schedules as well as a link to their electronic publication can be found on page 5c of Attachment 4.19-B of the State Plan. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Medicaid services listed above. Services for both ABP and non-ABP beneficiaries utilize the same rates unless otherwise noted in the plan. All applicable procedure code listings and/or rates are published on the State's website at www.indianamedicaid.com.

Intensive Outpatient Treatment (IOT)

The effective date for all rates, the applicable fee schedules as well as a link to their electronic publication can be found on page 5d of Attachment 4.19-B of the State Plan. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Medicaid services listed above. Services for both ABP and non-ABP beneficiaries utilize the same rates unless otherwise noted in the plan. All applicable procedure code listings and/or rates are published on the State's website at www.indianamedicaid.com.

State of Indiana

1905(a)(29) Medication-Assisted Treatment (MAT)

Citation: 3.1(a)(1) Amount, Duration, and Scope of Services: Categorically Needy
(Continued)

1905(a)(29) _____ MAT as described and limited in Supplement _____ to Attachment 3.1-A.

ATTACHMENT 3.1-A identifies the medical and remedial services provided to the categorically needy.

State of Indiana

1905(a)(29) Medication-Assisted Treatment (MAT)

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the Categorically Needy (continued)

- i. General Assurance
 - a. **MAT is covered under the Indiana Medicaid State Plan for all Medicaid beneficiaries who meet the medical necessity criteria for receipt of the service for the period beginning October 1, 2020 and ending September 30, 2025.**

- ii. Assurances
 - a. **The state assures coverage of Naltrexone, Buprenorphine, and Methadone and all forms of these drugs for MAT that are approved under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355) and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262).**
 - b. **The state assures that Methadone for MAT is provided by Opioid Treatment Programs that meet the requirements in 42 C.F.R. Part 8.**
 - c. **The state assures coverage for all formulations of MAT drugs and biologicals for OUD that are approved under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355) and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262).**

iii. Service Package

The state covers the following counseling services and behavioral health therapies as part of MAT.

- a) Please set forth each service and components of each service (if applicable), along with a description of each service and component service.

From October 1, 2020, through September 30, 2025, the state assures that MAT to treat OUD as defined in section 1905(ee)(1) of the Social Security Act (the Act) is covered exclusively under section 1905(a)(29) of the Act.

- **Behavioral Health Individual/Group Counseling and Therapy:** The services covered as individual, or group behavioral health counseling and therapy consist of a series of time-limited, structured, face-to-face sessions that work toward the goals identified in the individualized integrated care plan.
 - **Medication Training and Support:** The services covered as individual medication training and support involve face-to-face contact with the member for the purpose of monitoring medication compliance, providing education and training about medications, monitoring medication side effects, and providing other nursing or medical assessments.
 - **Crisis Intervention:** The services covered as crisis intervention services are short-term emergency behavioral health services, available twenty-four (24) hours per day, seven (7) days per week. These services include crisis assessment, planning, and counseling specific to the crisis, intervention at the site of the crisis when clinically appropriate, and pre-hospital assessment. The goal of crisis services is to resolve the crisis and transition the member to routine care through stabilization of the acute crisis and linkage to necessary services.
 - **Cognitive Behavioral Therapy:** The service covered as Cognitive Behavioral Therapy (CBT) is based on the individualized integrated care plan. CBT encourages patients to learn healthy coping mechanisms that are tailored to meet their needs. Services may be provided for members of all ages with a opioid-related disorder conditions that will not prevent the member from benefiting from this level of care.
 - **Motivational Interviewing:** The service covered as Motivational Interviewing is based on the individualized integrated care plan. Motivational Interviewing focuses on using the motivational process to facilitate change within a patient. Services may be provided for members of all ages with an opioid-related disorder conditions that will not prevent the member from benefiting from this level of care.
 - **Drug (opioid use disorder) Counseling:** The services covered as individual or group drug counseling are services where addiction professionals and clinicians provide counseling intervention that work toward goals identified in the individualized integrated care plan.
 - **Peer Recovery Services:** Peer recovery services are individual, face-to-face services that provide structured, scheduled activities that promote socialization, recovery, self-advocacy, development of natural supports, and maintenance of community living skills. Services must be provided by individuals who meet the training and competency standards for certified recovery specialists, as defined by the state.
- Psychiatric Services:** Psychiatric services such as assessments, diagnostic evaluations, psychotherapy, psychological and neuropsychological testing,

and other interventions are available to members of all ages with an opioid-related disorder. Services must be provided by individuals who meet the training and licensure requirements, as defined by the state.

- b) Please include each practitioner and provider entity that furnishes each service and component service.

Behavioral Health Individual/Group Counseling and Therapy:

The following providers can render this service as defined under state law:

- Licensed Psychologist
- Licensed Physician (MD/DO)
- Licensed Independent Practice School Psychologist
- Health Service Provider in Psychology (HSPP)
- Licensed Clinical Social Worker (LCSW)
- Licensed Marriage and Family Therapist (LMFT)
- Licensed Clinical Addiction Counselor (LCAC)
- Licensed Mental Health Counselor (LMHC)
- *Providers who require supervision as defined under state Law:*
 - Qualified Behavioral Health Professional (QBHP)
 - Other Behavioral Health Professional (OBHP)

Medication Training & Support

The following providers can render this service as defined under state law:

- Licensed Psychologist
- Licensed Physician (MD/DO)
- Licensed Independent Practice School Psychologist
- Health Service Provider in Psychology (HSPP)
- Licensed Clinical Social Worker (LCSW)
- Licensed Marriage and Family Therapist (LMFT)
- Licensed Clinical Addiction Counselor (LCAC)
- Licensed Mental Health Counselor (LMHC)
- *Providers who require supervision as defined under state law:*
 - Qualified Behavioral Health Professional (QBHP)
 - Other Behavioral Health Professional (OBHP)

Crisis Intervention Services

The following providers can render this service as defined under state law:

- Licensed Psychologist
- Licensed Physician (MD/DO)
- Licensed Independent Practice School Psychologist

- Health Service Provider in Psychology (HSPP)
- Licensed Clinical Social Worker (LCSW)
- Licensed Marriage and Family Therapist (LMFT)
- Licensed Clinical Addiction Counselor (LCAC)
- Licensed Mental Health Counselor (LMHC)
- *Providers who require supervision as defined under state law:*
 - Qualified Behavioral Health Professional (QBHP)
 - Other Behavioral Health Professional (OBHP)

Cognitive Behavioral Therapy

The following providers can render this service as defined under state law:

- Licensed Psychologist
- Licensed Physician (MD/DO)
- Licensed Independent Practice School Psychologist
- Health Service Provider in Psychology (HSPP)
- *Providers who require supervision as defined under state law:*
 - Licensed Clinical Social Worker (LCSW)
 - Licensed Marriage and Family Therapist (LMFT)
 - Licensed Clinical Addiction Counselor (LCAC)
 - Licensed Mental Health Counselor (LMHC)
 - Qualified Behavioral Health Professional (QBHP)
 - Other Behavioral Health Professional (OBHP)

Motivational Interviewing

The following providers can render this service as defined under state law:

- Licensed Psychologist
- Licensed Physician (MD/DO)
- Licensed Independent Practice School Psychologist
- Health Service Provider in Psychology (HSPP)
- Licensed Clinical Social Worker (LCSW)
- Licensed Marriage and Family Therapist (LMFT)
- Licensed Clinical Addiction Counselor (LCAC)

- Licensed Mental Health Counselor (LMHC)
- *Providers who require supervision as defined under state law:*
 - Qualified Behavioral Health Professional (QBHP)
 - Other Behavioral Health Professional (OBHP)

Drug (opioid use disorder) Counseling

The following providers can render this service as defined under state law:

- Licensed Psychologist
- Licensed Physician (MD/DO)
- Licensed Independent Practice School Psychologist
- Health Service Provider in Psychology (HSPP)
- Licensed Clinical Social Worker (LCSW)
- Licensed Marriage and Family Therapist (LMFT)
- Licensed Clinical Addiction Counselor (LCAC)
- Licensed Mental Health Counselor (LMHC)
- *Providers who require supervision as defined under state law:*
 - Qualified Behavioral Health Professional (QBHP)
 - Other Behavioral Health Professional (OBHP)

Peer Recovery Services

The following providers can render this service as defined under state law:

- Licensed Psychologist
- Licensed Physician (MD/DO)
- Licensed Independent Practice School Psychologist
- Health Service Provider in Psychology (HSPP)
- Licensed Clinical Social Worker (LCSW)
- Licensed Marriage and Family Therapist (LMFT)
- Licensed Clinical Addiction Counselor (LCAC)
- Licensed Mental Health Counselor (LMHC)
- *Providers who require supervision as defined under state law:*
 - Qualified Behavioral Health Professional (QBHP)
 - Other Behavioral Health Professional (OBHP)

Psychiatric Services

The following providers can render this service as defined under state law:

- Licensed Psychologist
- Licensed Physician (MD/DO)
- Licensed Independent Practice School Psychologist

- Health Service Provider in Psychology (HSPP)
- Licensed Clinical Social Worker (LCSW)
- Licensed Marriage and Family Therapist (LMFT)
- Licensed Clinical Addiction Counselor (LCAC)
- Licensed Mental Health Counselor (LMHC)
- *Providers who require supervision as defined under state law:*
 - Qualified Behavioral Health Professional (QBHP)
 - Other Behavioral Health Professional (OBHP)

Provider Entities:

- Community Mental Health Center (CMHC)
- Opioid Treatment Program (OTP)
- Medicaid Rehabilitation Option (MRO) Clubhouse

- c) Please include a brief summary of the qualifications for each practitioner or provider entity that the state requires. Include any licensure, certification, registration, education, experience, training and supervisory arrangements that the state requires.

Providers:

- Behavioral Health professionals who are Licensed Psychologists treating OUD must meet all necessary requirements as defined under state law.
- Behavioral Health professionals who are Licensed Physicians (MD/DO) treating OUD must meet all necessary requirements as defined under state law.
- Behavioral Health professionals who are Licensed Clinical Social Workers (LCSW) treating OUD must meet all necessary requirements as defined under state law.
- Behavioral Health professionals who are Licensed Marriage and Family Therapists (LMFT) treating OUD must meet all necessary requirements as defined under state law.
- Behavioral Health professionals who are Licensed Clinical Addiction Counselors (LCAC) treating OUD must meet all necessary requirements as defined under state law.

- Behavioral Health professionals who are Licensed Mental Health Counselors (LMHC) treating OUD must meet all necessary requirements as defined under state law.
- Behavioral Health professionals who are Qualified Behavioral Health Professionals (QBHP) treating OUD must meet all necessary requirements as defined under state law: A "qualified behavioral health professional" (QBHP) means any of the following persons:
 - (1) An individual who has had at least two (2) years of clinical experience treating persons with mental illness under the supervision of a licensed professional, as defined above, with such experience occurring after the completion of a master's degree or doctoral degree, or both, in any of the following disciplines:

- (a) In psychiatric or mental health -nursing from an accredited university, plus a license as a registered nurse in Indiana
 - (b) In pastoral counseling from an accredited university.
 - (c) In rehabilitation counseling from an accredited university.
 - (2) An individual who is under the supervision of a licensed professional; as defined above, is eligible for and working towards licensure, and has completed a master's or doctoral degree, or both., in any of the following disciplines:
 - (a) In social work from a university accredited by the Council on Social Work Education.
 - (b) In psychology from an accredited university.
 - (c) In mental health counseling from an accredited university.
 - (d) In marital and family therapy from an accredited university.
 - (3) A licensed independent practice school psychologist under the supervision of a licensed professional, as defined under state law.
 - (4) An authorized healthcare provider (AHCP). defined as follows:
 - (a) a physician assistant with the authority to prescribe, dispense and administer drugs and medical devices or services under an agreement with a supervising physician and subject to the requirements defined under state law.
 - (b) a nurse practitioner or a clinical nurse specialist, with prescriptive authority and performing duties within the scope of that. person's license and under the supervision or under a supervisory agreement with, a licensed physician pursuant to the definition under state law.
- Behavioral Health professionals who are Other Behavioral Health Professionals (OBHP) treating OUD must meet all necessary requirements as defined under state law: Other behavioral health professional (OBHP) means any of the following persons:
 - (1) An individual with an associate or bachelor's degree, or equivalent behavioral health experience, meeting minimum competency standards set forth by a behavioral health service provider and supervised by either a licensed professional or a QBHP.
 - (2) A licensed addiction counselor supervised by either a licensed professional as defined under state law, or a QBHP, as defined under state law.

Provider Entities:

- Community Mental Health Center (CMHC): (as defined under state law)
 - FSSA’s Division of Mental Health and Addiction (DMHA) certified Community Mental Health Centers (CMHCs) are permitted by Indiana’s state Medicaid agency (OMPP) to be approved to by DMHA provide opioid addiction treatment services according to the standards and expectations as defined under state law.
 - Provider agency has acquired a National Accreditation by an entity approved by DMHA.
 - Provider agency is an enrolled Medicaid provider that offers a full continuum of care.
 - Provider agency must maintain documentation in accordance with the Medicaid requirements defined under state Law.
 - Provider agency must meet all behavioral health provider agency criteria, as defined under state law.”
- Opioid Treatment Program (OTP): 42 CFR 8.11-12
- Medicaid Rehabilitation Option (MRO) Clubhouse: (as defined under state Law)
 - The clubhouse certification will be issued by the Indiana Family and Social Services (FSSA) Division of Mental Health and Addiction (DMHA). The rendering clubhouse provider must be accredited by Clubhouse International and operate in conformity with the International Standards for Clubhouse Programs.

State of Indiana

1905(a)(29) Medication-Assisted Treatment (MAT)

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the Categorically Needy (continued)

iv. Utilization Controls

The state has drug utilization controls in place. (Check each of the following that apply)

- Generic first policy
- Preferred drug lists
- Clinical criteria
- Quantity limits

The state does not have drug utilization controls in place.

v. Limitations

Describe the state’s limitations on amount, duration, and scope of MAT drugs, biologicals, and counseling and behavioral therapies related to MAT.

MAT Drugs & Biologicals

The state has applied appropriate utilization management and day supply limits on MAT drugs. Limitations are dependent on drug product and vary based on formulation. All limitations are evidence based and certain class limitations are reviewed by the state’s Drug Utilization Review Board.

Counseling & Behavioral Therapies

- **Behavioral Health Individual/Group Counseling and Therapy is limited to twenty (20) units per member, per provider, per calendar year. Additional units may be authorized with prior authorization and are based on medical necessity.**
- **Crisis Intervention Services are limited to interventions focused on an individual and must be rendered in the outpatient behavioral health setting.**
- **Drug (opioid use disorder) Counseling is limited to three (3) hours per day. Additional units may be authorized with prior authorization and are based on medical necessity.**

- **Peer Recovery Services are available without prior authorization for up to 365 hours (1,460 units) per calendar year. Additional units may be authorized with prior authorization and are based on medical necessity.**
- **Psychiatric interventions are available without prior authorization for an aggregated 20 units per beneficiary, per provider, per rolling 12-month period. Additional units for psychiatric interventions may be authorized with prior authorization based on medical necessity.**
- **Psychiatric diagnostic evaluations are available without prior authorization for one visit per beneficiary, per provider, per rolling 12-month period. Additional visits for psychiatric diagnostic evaluations may be authorized with prior authorization and are based on medical necessity.**
- **Prior authorization is required for all psychological and neuropsychological testing and is provided based on medical necessity.**
- **Psychiatric services are available without prior authorization for 30 visits per calendar year. Additional visits for psychiatric services may be authorized with prior authorization based on medical necessity.**

PRA Disclosure Statement - This information is being collected to assist the Centers for Medicare & Medicaid Services in implementing section 1006(b) of the SUPPORT for Patients and Communities Act (P.L. 115-271) enacted on October 24, 2018. Section 1006(b) requires state Medicaid plans to provide coverage of Medication-Assisted Treatment (MAT) for all Medicaid enrollees as a mandatory Medicaid State Plan benefit for the period beginning October 1, 2020, and ending September 30, 2025. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0938-1148 (CMS-10398 # 60). Public burden for all of the collection of information requirements under this control number is estimated to take about 80 hours per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.