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State/Territory Name: Louisiana

State Plan Amendment (SPA) #: 19-0030

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved Page

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
601 East 12th Street, Suite 0300  
Kansas City, Missouri 64106-2898



Medicaid and CHIP Operations Group

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March 6, 2020

Ms. Erin Campbell, Acting Medicaid Director  
State of Louisiana  
Department of Health  
628 N 4th Street  
P.O. Box 91030  
Baton Rouge, LA 70821-9030

RE: TN LA 19-0030

Dear Ms. Campbell:

We have reviewed the State's proposed amendment to the Louisiana State Plan submitted under Transmittal Number (TN) 19-0030 dated December 16, 2019. This state plan amendment is to adopt provisions governing medication-assisted opioid use disorder (OUD) treatment in opioid treatment programs, for Medicaid-eligible recipients ages 18 and over, diagnosed with OUD.

Based on the information submitted, we approved the amendment on February 28, 2020, for incorporation into the official Louisiana State Plan with an effective date of January 20, 2020. A copy of the CMS-179 and approved plan pages are enclosed with this letter.

If you have any questions regarding this matter, you may contact Tobias Griffin at (214) 767-4425, or by email at [tobias.griffin@cms.hhs.gov](mailto:tobias.griffin@cms.hhs.gov).

Sincerely,

A black rectangular box redacting the signature of James G. Scott.

James G. Scott, Director  
Division of Program Operations

Enclosure

cc: Billy Bob Farrell, Branch Manager  
Karen Barnes, LA Department of Health

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER <b>19-0030</b>	2. STATE <b>Louisiana</b>
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
4. PROPOSED EFFECTIVE DATE <b>January 20, 2020</b>	

TO: REGIONAL ADMINISTRATOR  
CENTERS FOR MEDICARE & MEDICAID SERVICES  
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  <b><del>Section 1006(b) of the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (Support Act) 42 CFR 440.130(d)</del></b>	7. FEDERAL BUDGET IMPACT a. FFY <b>2020</b> \$ <del>7,884,114</del> \$0 b. FFY <b>2021</b> \$ <del>12,249,862</del> \$0
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  <b>Attachment 3.1-A, Item 13d, Pages <del>11b and 11c</del> 11b-11g Attachment 4.19-B Item 13d, Page <del>4b(1)</del></b>	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) <b>None – new pages None – new page</b>
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10. SUBJECT OF AMENDMENT: **The purpose of this SPA is to adopt provisions governing medication-assisted opioid use disorder (OUD) treatment in opioid treatment programs, for Medicaid-eligible recipients ages 18 and over, diagnosed with OUD.**


11. GOVERNOR'S REVIEW (Check One)  
 GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED      The Governor does not review State Plan material.  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL 	16. RETURN TO <b>Jen Steele, Medicaid Director State of Louisiana Department of Health 628 North 4<sup>th</sup> Street P.O. Box 91030 Baton Rouge, LA 70821-9030</b>
13. TYPED NAME <b>Cindy Rives, designee for Rebekah E. Gee MD, MPH</b>	
14. TITLE <b>Secretary</b>	
15. DATE SUBMITTED <b>December 16, 2019</b>	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED <b>December 16, 2019</b>	18. DATE APPROVED <b>February 28, 2020</b>
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL <b>January 20, 2020</b>	20. SIGNATURE OF REGIONAL OFFICIAL 
21. TYPED NAME <b>James G. Scott</b>	22. TITLE <b>Director Division of Program Operations</b>

23. REMARKS **The State requests pen and ink changes to boxes 6, 7, 8 and 9.**

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED  
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED  
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

### **Treatment of Opioid Use Disorder in Opioid Treatment Programs**

#### **Citation**

42 CFR 440.130(d)

Effective January 20, 2020, the Medicaid Program provides coverage for medically necessary medication-assisted treatment (MAT) delivered in opioid treatment programs, including but not limited to, methadone treatment, to all Medicaid-eligible adults and children with opioid use disorder (OUD).

#### **Covered Services**

The following services provided by opioid treatment programs shall be reimbursed under the Medicaid program:

- A. The administration and dispensing of medications; and
- B. Treatment phases 1 through 4:
  1. Initial treatment phase lasts from three to seven days. During this phase, the provider conducts orientation, provides individual counseling and develops the initial treatment plan for treatment of critical health or social issues.
  2. Early stabilization begins on the third to seventh day following initial treatment through 90 days in duration, whereas the provider:
    - a. Conducts weekly monitoring of the recipient's response to medication;
    - b. Provides at least four individual counseling sessions;
    - c. Revises the treatment plan within 30 days to include input by all disciplines, the recipient and significant others; and
    - d. Conducts random monthly drug screen tests.
  3. Maintenance treatment follows the end of early stabilization and lasts for an indefinite period of time. The provider shall:
    - a. Perform random monthly drug screen tests until the client has negative drug screen tests for 90 consecutive days as well as random testing for alcohol when indicated;

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- b. Thereafter, monthly testing to clients who are allowed six days of take-home doses, as well as random testing for alcohol when indicated;
  - c. Continuous evaluation by the nurse of the client's use of medication and treatment from the program and from other sources;
  - d. Documented reviews of the treatment plan every 90 days in the first two years of treatment by the treatment team; and
  - e. Documentation of response to treatment in a progress note at least every 30 days.
4. Medically supervised withdrawal from synthetic narcotic with continuing care (only when withdrawal is requested by the recipient). The provider shall:
- a. Decrease the dose of the synthetic narcotic to accomplish gradual, but complete withdrawal, as medically tolerated by recipient;
  - b. Provide counseling of the type and quantity based on medical necessity; and
  - c. Conduct discharge planning as appropriate.

The component services provided by the opioid treatment program must be recommended by a physician or LMHP, within the scope of his or her practice under state law.

**Provider Qualifications**

Services must be provided by an agency licensed by the Louisiana Department of Health as a behavioral health service provider – opioid treatment program. Opioid treatment programs must be accredited by an LDH approved accrediting body, certified by Substance Abuse and Mental Health Services Administration (SAMHSA) and hold a current and unrestricted Drug Enforcement Administration (DEA) registration. Providers will be subject to all applicable state and federal regulations and all opioid treatment program enabling legislation.

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**Staffing Requirements**

Individuals providing services must be licensed in accordance with state laws and regulations, in addition to operating within their scope of practice license.

The provider's opioid treatment program shall have the following staff:

**Medical Director**

The Medical Director shall be a licensed physician with a current, valid unrestricted license to practice in the state of Louisiana and provide the following services:

1. Decrease the dose to accomplish gradual, but complete withdrawal, only when requested by the recipient;
2. Provide medically approved and medically supervised assistance for withdrawal, only when requested by the recipient;
3. Participate in the documentation of reviews of treatment plan every 90 days in the first two years of treatment;
4. Order take home doses; and
5. Participate in discharge planning.

**Pharmacist or Dispensing Physician**

Pharmacist or Dispensing Physician shall have a current, valid unrestricted license to practice in the state of Louisiana and provide the following services:

1. Dispense all medications;
2. Work collaboratively with the Medical Director to decrease the dose to accomplish gradual, but complete withdrawal, only when requested by the recipient;
3. Contribute to the development of the initial treatment plan;
4. Contribute to the documentation for the treatment plan review every 90 days in the first two years of treatment; and
5. Document response to treatment in progress notes at least every 30 days.

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**Physician or APRN**

Physician or APRN shall have a current, valid unrestricted license to practice in the state of Louisiana and provide the following services:

1. Administer medications;
2. Monitor the client's response to medications;
3. Evaluate of client's use of medication and treatment from the program and other sources;
4. Contribute to the development of the initial treatment plan;
5. Contribute to the documentation regarding the response to treatment for treatment plan reviews;
6. Contribute to the documentation for the treatment plan review every 90 days in the first two years of treatment;
7. Conduct drug screens; and
8. Participate in discharge planning.

**Nursing Staff**

Nursing staff shall have a current, valid and unrestricted nursing license in the State of Louisiana and provide the following services:

1. Administer medications;
2. Monitor the client's response to medications;
3. Evaluate of client's use of medication and treatment from the program and other sources;
4. Document response to treatment in progress notes at least every 30 days;
5. Contribute to documentation for the treatment plan review every 90 days in the first two years of treatment;
6. Conduct drug screens; and
7. Participate in discharge planning.

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**Licensed Mental Health Professionals**

Licensed Mental Health Professionals (LMHPs) as defined below shall have a current, valid and unrestricted license in the State of Louisiana. LMHPs include the following individuals licensed to practice independently:

1. Medical Psychologists;
2. Licensed Psychologists;
3. Licensed Clinical Social Workers (LCSWs);
4. Licensed Professional Counselors (LPCs);
5. Licensed Marriage and Family Therapists (LMFTs);
6. Licensed Addiction Counselors (LACs); and
7. Advanced Practice Registered Nurses (APRN) (must be a nurse practitioner specialist in Adult Psychiatric & Mental Health, and Family Psychiatric & Mental Health or a Certified Nurse Specialist in Psychosocial, Gerontological Psychiatric Mental Health, Adult Psychiatric and Mental Health, and Child-Adolescent Mental Health and may practice to the extent that services are within the APRN's scope of practice).

Licensed Mental Health Professionals provide the following services:

1. Conduct orientation;
2. Develop the initial plan for treatment;
3. Revise treatment to include input by all disciplines, recipients and significant others;
4. Provide individual counseling;
5. Contribute to the development as well as document the initial treatment plan;
6. Document response to treatment in progress notes at least every 30 days;
7. Contribute to the development as well as document reviews of treatment plan every 90 days in the first two years of treatment by the treatment team; and
8. Conduct in discharge planning as appropriate.



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**Unlicensed Professionals**

Unlicensed professionals (UPs) of addiction services must meet at least one of the following qualifications:

1. Masters Prepared Behavioral Health Professional that has not obtained full licensure privileges and is participating in ongoing professional supervision;
2. Certified Addiction Counselor (CAC) registered with the Addictive Disorders Regulatory Authority (ADRA);
3. Registered Addiction Counselor (RAC) registered with ADRA; or
4. Counselor-in-training (CIT) registered with ADRA.

Unlicensed professionals perform the following services under the supervision of a physician or LMHP:

1. Participate in conducting orientation;
2. Participate in discharge planning as appropriate; and
3. Provide support to the treatment team where applicable, while only providing assistance allowable under the auspices of and pursuant to the scope of the individual's license.