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State/Territory Name: Connecticut

State Plan Amendment (SPA) #: 25-0040

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Form CMS-179
- 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

January 29, 2026

Andrea Barton Reeves, J.D., Commissioner
Department of Social Services
55 Farmington Avenue
Hartford, CT 06105

Re: Connecticut State Plan Amendment (SPA) - 25-0040

Dear Commissioner Reeves:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 25-0040. This amendment transfers existing provisions regarding Medication-Assisted Treatment (MAT) into the new mandatory MAT benefit category pursuant to section 1006(b) of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act. In addition, this amendment permanently removed the end date.

We conducted our review of your submittal according to statutory requirements in Social Security Act Sections 1905(a)(29). This letter informs you that Connecticut's Medicaid SPA TN 25-0040 was approved on January 29, 2026, with an effective date of October 1, 2025.

Enclosed are copies of Form CMS-179 and the approved SPA pages to be incorporated into the Connecticut State Plan.

If you have any questions, please contact Marie DiMartino at (617) 565-9157 or via email at Marie.DiMartino@cms.hhs.gov.

Sincerely,



Wendy E. Hill Petras, Acting Director
Division of Program Operations

Enclosures

**State Plan under Title XIX of the Social Security Act
State/Territory: Connecticut**

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

Citation: 3.1-A Amount, Duration, and Scope of Services – Categorically Needy

x 1905(a)(29) MAT as described and limited in the Addendum to Attachment 3.1-A.

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TN: 25-0040
Supersedes TN: 21-0014

Approval Date: 1-29-2026
Effective Date: 10-1-2025

**State Plan under Title XIX of the Social Security Act
State/Territory: Connecticut
Amount, Duration and Scope of Services Provided to Categorically Needy Groups**

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

General Assurances

X MAT is covered under the 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.

X The state assures coverage of Naltrexone, Buprenorphine, and Methadone and all of the 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).

X The state assures that Methadone for MAT is provided by Opioid Treatment Programs that meet the requirements in 42 C.F.R. Part 8.

Service Package

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

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

Effective October 1, 2020, the state assures that MAT to treat OUD as defined at section 1905(ee)(1) of the Social Security Act (the Act) is covered exclusively under section 1905(a)(29) of the Act.

Individual, group, and family counseling/therapy to treat OUD; and psychotherapy services to treat OUD. Family therapy that involves the participation of a non-Medicaid eligible is for the direct benefit of the beneficiary. The service must actively involve the beneficiary in the sense of being tailored to the beneficiary's individual needs. There may be times when, based on clinical judgment, the beneficiary is not present during the delivery of the service, but remains the focus of the service.

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**State Plan under Title XIX of the Social Security Act
State/Territory: Connecticut
Amount, Duration and Scope of Services Provided to Categorically Needy Groups**

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

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

- Physicians: All services listed in section iii(a) above.
- Physician Assistants: All services listed in section iii(a) above.
- Nurse Practitioners: All services listed in section iii(a) above.
- Licensed Behavioral Health Practitioners, specifically Licensed Psychologists, Licensed Clinical Social Workers, Licensed Alcohol and Drug Counselors, Licensed Professional Counselors, and Licensed Marital and Family Therapists: All services listed in section iii(a) above.

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State Plan under Title XIX of the Social Security Act
State/Territory: Connecticut
Amount, Duration and Scope of Services Provided to Categorically Needy Groups

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

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.

- Physicians: Licensed by the state.
- Physician Assistants: Licensed by the state.
- Nurse Practitioners: Licensed by the state as an advanced practice registered nurse and certified as a nurse practitioner.
- State-Licensed Behavioral Health Practitioners, specifically Licensed Psychologists, Licensed Clinical Social Workers, Licensed Alcohol and Drug Counselors, Licensed Professional Counselors, and Licensed Marital and Family Therapists.

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State Plan under Title XIX of the Social Security Act
State/Territory: Connecticut
Amount, Duration and Scope of Services Provided to Categorically Needy Groups
Section 1905(a)(29) Medication Assisted Treatment (MAT)

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.

Limitations

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

The state maintains a Preferred Drug List (PDL) for specified doses, dosage forms, and brands for MAT drugs for OUD. Limitations for a MAT drug dose, dosage form, and/or brand that is not listed on the PDL is that prior authorization is required. All other limits to the state's coverage of prescribed outpatient drugs in section 12.a of Attachment 3.1-A also apply to MAT drugs.

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**State Plan under Title XIX of the Social Security Act
State/Territory: Connecticut**

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

Citation: 3.1-B Amount, Duration, and Scope of Services – Medically Needy

x 1905(a)(29) MAT as described and limited in the Addendum to Attachment 3.1-B.

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State Plan under Title XIX of the Social Security Act
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Amount, Duration and Scope of Services Provided to Medically Needy Groups
Section 1905(a)(29) Medication Assisted Treatment (MAT)

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Addendum Page 27 to Attachment 3.1-B

**State Plan under Title XIX of the Social Security Act
State/Territory: Connecticut
Amount, Duration and Scope of Services Provided to Medically Needy Groups
Section 1905(a)(29) Medication Assisted Treatment (MAT)**

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