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State/Territory Name: Delaware

State Plan Amendment (SPA) #: 21-0005

This file contains the following documents in the order listed:

1) Approval Letter
2) CMS 179 Form/Summary Form (with 179-like data)
3) Approved SPA Pages
November 3, 2021

Stephen Groff
Director
Division of Medicaid Medical Assistance
P.O. Box 906
New Castle, DE, 19720

Re: Delaware State Plan Amendment (SPA) 21-0005

Dear Mr. Groff:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) DE-21-0005. 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 Delaware’s Medicaid SPA Transmittal Number DE-21-0005 was approved on November 3, 2021, 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 SUPPORT for Patients and Communities Act (SUPPORT Act), signed into law on October 24, 2018, amended section 1902(a)(10)(A) of the Act to require state Medicaid plans to include coverage of MAT for all eligible to enroll in the state plan or waiver of 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 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 Delaware 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 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 Talbatha Myatt at 215-861-4259 or via email at Talbatha.Myatt@cms.hhs.gov.

Sincerely,

James G. Scott, Director
Division of Program Operations

cc: Nicole Cunningham, State Plan Coordinator
    Kimberly Xavier, Chief, Policy & Planning
TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES

1. TRANSMITTAL NUMBER 21 005
2. STATE Delaware
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)
4. PROPOSED EFFECTIVE DATE October 1, 2024 October 1, 2020
5. TYPE OF PLAN MATERIAL (Check One)
   - NEW STATE PLAN
   - AMENDMENT TO BE CONSIDERED AS NEW PLAN
   - AMENDMENT

6. FEDERAL STATUTE/REGULATION CITATION
   Title XIX Medicaid State Plan
7. FEDERAL BUDGET IMPACT
   a. FFY_2021 $ 0
   b. FFY_2122 $ 0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
   Attachment 3.I-A Page 2A, Attachment 4-19-B Page 18
9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
   Attachment 3.I-A Page 2A, Attachment 4-19-B Page 18
10. SUBJECT OF AMENDMENT
    MAT
11. GOVERNOR’S REVIEW (Check One)
    - GOVERNOR’S OFFICE REPORTED NO COMMENT
    - COMMENTS OF GOVERNOR’S OFFICE ENCLOSED
    - NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
    - OTHER, AS SPECIFIED:
12. SIGNATURE OF STATE AGENCY OFFICIAL
13. TYPED NAME
    Stephen M. Groff
14. TITLE
    Director
15. DATE SUBMITTED
16. RETURN TO
    Stephen M. Groff, Director, DMMA, P.O. Box 906 New Castle, DE19720

FOR REGIONAL OFFICE USE ONLY
17. DATE RECEIVED 03/30/2021
18. DATE APPROVED 11/03/2021
19. EFFECTIVE DATE OF APPROVED MATERIAL 10/01/2020
20. SIGNATURE OF REGIONAL OFFICIAL
21. TYPED NAME
    James G. Scott
22. TITLE
    Director
    Division of Program Operations
23. REMARKS
    10/15/2021- Delaware requested CMS to make a pen & ink change to box #4 to reflect 10/1/2020 as the proposed effective date.
State of Delaware

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

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

(Continued)

1905(a)(29) X MAT as described and limited in Supplement to Attachment 3.1-A Page 2A.

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

\[\text{Enclosure \_\_}\]

Supplement to Attachment 3.1-A
Page 2A
State of Delaware

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

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, and ending September 30, 2025.

ii. Assurances

a. 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).

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.

- The state assures coverage of all current and future formulations of drugs prescribed or administered for MAT that are approved for the treatment of OUD under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355) and all current and future formulations of biological.

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.

1) Assessment and clinical treatment plan development – The purpose of the assessment is to provide sufficient information for problem identification.

2) Skill development for coping with and managing symptoms and behaviors associated with opioid use disorders (OUD) such as the participant
State of Delaware

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

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

perspective and lack of impulse control or signs and symptoms of withdrawal.

3) Counseling to address a beneficiary’s major lifestyle, attitudinal, and behavioral problems. Counseling includes highly structured psychosocial therapy to address issues that have the potential to undermine the goals of treatment.

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

All providers listed below may provide any service and its related components with the exception that recovery coaches cannot perform assessments.

- Licensed Clinical Social Workers (LCSWs)
- Licensed Professional Counselors of Mental Health (LPCMH)
- Licensed Marriage and Family Therapists (LMFTs), nurse practitioners (NPs)
- Advanced practice nurses (APNs)
- Medical doctors (MD and DO)
- Licensed Chemical Dependency Professionals (LCDPs)
- Psychologists
- Certified Recovery Coach
- Credentialed Behavioral Health Technician
- Registered Nurses
- Licensed Practical Nurses
- Certified alcohol and drug counselor (CADC)
- Internationally certified alcohol and drug counselor (ICADC)
- Certified co-occurring disorders professional (CCDP)
- Internationally certified co-occurring disorders professional (ICCDP)
- Internationally certified co-occurring disorders professional diplomat (ICCDP-D)
State of Delaware

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

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

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.

- Certified Recovery Coach – Credentialed by DHSS or its designee. State regulations require supervision by QHP meeting the supervisory standards established by DHSS or its designee. A QHP includes the following professionals who are currently registered with their respective Delaware board LCSWs, LPCMHs, and LMFTs, APNs, NPs, CADCS, LCDPs, medical doctors (MD and DO), and psychologists. Clinical Supervisors includes individuals who have a Bachelor’s degree in chemical dependency, psychology, social work counseling, nursing or a related field and have either: 1) Five (5) years of related clinical experience or 2) full certification as a CADCs, ICADCs, CCDPs, ICCDPs, and ICCDP-Ds. All Clinical Supervisors must meet these requirements by January 1, 2018. The QHP or Clinical Supervisor provides clinical/administrative oversight and supervision of Certified Recovery Coaches and Credentialed Behavioral Health Technicians staff in a manner consistent with their scope of practice.

- Credentialed Behavioral Health Technician - Credentialed by DHSS or its designee. State regulations require supervision by QHP meeting the supervisory standards established by DHSS or its designee. A QHP includes the following professionals who are currently registered with their respective Delaware board LCSWs, LPCMHs, and LMFTs, APNs, NPs, CADCS, LCDPs, medical doctors (MD and DO), and psychologists. Clinical Supervisors includes individuals who have a Bachelor’s degree in chemical dependency, psychology, social work counseling, nursing or a related field and have either: 1) Five (5) years of related clinical experience or 2) full certification as a CADCs, ICADCs, CCDPs, ICCDPs, and ICCDP-Ds. All Clinical Supervisors must meet these requirements by January 1, 2018. The QHP or Clinical Supervisor provides clinical/administrative oversight and supervision of Certified Recovery
Coaches and Credentialed Behavioral Health Technicians staff in a manner consistent with their scope of practice.

- Certified alcohol and drug counselor (CADC) - Certified and Credentialed under Delaware state regulation.
- Internationally certified alcohol and drug counselor (ICADC) - Certified and Credentialed under Delaware state regulation.
- Certified co-occurring disorders professional (CCDP) - Certified and Credentialed under Delaware state regulation.
- Internationally certified co-occurring disorders professional (ICCDP) - Certified and Credentialed under Delaware state regulation.
- Internationally certified co-occurring disorders professional diplomate (ICCDP-D) - Certified and Credentialed under Delaware state regulation.
State of Delaware

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

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

_____X__ Generic first policy
_____X__ Preferred drug lists
____X__ Clinical criteria
_____X__ 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.
Payments for Medication Assisted Treatment

Effective October 1, 2020, the Medicaid agency will continue to pay qualified providers for evaluation and management (E/M) or HCPCS Code as applicable when Medication Assisted Treatment (MAT) is part of a visit.

Delaware will pay Psychologists at 100% of the Medicare physician rates. If a Medicare fee exists for a defined covered procedure code, then Delaware Medicaid will pay other Licensed professionals listed in Attachment 3.1-A Page 6r and Attachment 3.1-A Page 6s at 75% of the Medicaid physician rates as outlined under Attachment: 4.19-B, item 5.

Unbundled prescribed drugs for MAT shall be reimbursed using the same methodology as described in Attachment 4.19-B for covered outpatient drug reimbursement and in the table on Attachment 4.19-B Page 14a for prescribed drugs that are dispensed or administered.