

## **Table of Contents**

**State/Territory Name: Indiana**

**State Plan Amendment (SPA) #: 23-0003**

This file contains the following documents in the order listed:

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

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June 15, 2023

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

Re: Indiana State Plan Amendment (SPA) 23-0003

Dear Ms. Taylor:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0003. This amendment modifies the coverage of opioid treatment services and the reimbursement of opioid treatment services to align with Medicare.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 Code of Federal Regulation (CFR) 8. This letter is to inform you that Indiana Medicaid SPA 23-0003 was approved on June 15, 2023, with an effective date of July 1, 2023.

If you have any questions, please contact Mai Le-Yuen at 312.353.2853 or via email at [mai.le-yuen@cms.hhs.gov](mailto:mai.le-yuen@cms.hhs.gov).

Sincerely,

A large black rectangular box redacts the signature of James G. Scott.

James G. Scott, Director  
Division of Program Operations

Enclosures

cc: Madison May Gruthusen, FSSA  
Keith McConomy, FSSA

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

1. TRANSMITTAL NUMBER

2 3 — 0 0 0 3

2. STATE

I N

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX  XXI

TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

July 1, 2023

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR § 8

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2023 \$ 320,000  
b. FFY 2024 \$ 320,000

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1-A Addendum Page 9c.1  
Attachment 4.19B Page 5c

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Attachment 3.1-A Addendum Page 9c.1  
Attachment 4.19B Page 5c

9. SUBJECT OF AMENDMENT

This State Plan Amendment will modify the reimbursement and coverage of OTP services. This SPA will replace the per diem reimbursement bundles utilized, and instead will reimburse OTP providers according to Medicare's OTP code set.

10. 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:

11. SIGNATURE OF STATE

[Redacted Signature]

15. RETURN TO

Allison Taylor  
Medicaid Director  
Indiana Office of Medicaid Policy and Planning  
402 West Washington Street, Room W374  
Indianapolis, IN 46204  
ATTN: Madison May-Gruthusen, Federal Relations Lead

12. TYPED NAME  
Allison Taylor

13. TITLE  
Medicaid Director

14. DATE SUBMITTED  
03/30/23

**FOR CMS USE ONLY**

16. DATE RECEIVED

March 30, 2023

17. DATE APPROVED

June 15, 2023

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

July 1, 2023

19. SIG

[Redacted Signature]

20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

**MRO SERVICES WILL CONTINUE ON PAGE 9d****Opioid Treatment Services**

Opioid treatment services refers to rehabilitative services for an individual to administer opioid treatment medication and to alleviate the adverse medical, psychological, or physical effects incident to opioid addiction. Opioid treatment services consist of the following Medicaid service components:

- U.S. Food and Drug Administration (FDA)-approved opioid agonist and antagonist medication-assisted treatment (MAT) medication
- Dispensing and administration of MAT medications
- Substance use disorder counseling
- Toxicology testing
- Individual and group therapy
- Intake Activities
- Periodic Assessments

Other services not defined as OTP services in this section may be covered by an opioid treatment program provider if deemed appropriate by the Office of Medicaid Policy and Planning (OMPP) and complying within coverage specifications listed in 3.1-A Addendum: Page 2.1, Item 5.a; Page 3, Item 6.d; and Page 7, Item 12.a. Any individual providing opioid treatment services that is not licensed by the State must instead be credentialed in addictions counseling by a nationally recognized credentialing body approved by the Division of Mental Health and Addiction. All opioid treatment services furnished by these credentialed individuals must be recommended by a physician or other licensed practitioner of the healing arts.

Counseling services provided by an OTP may be rendered via audio-visual and audio-only telehealth.

**Limitations:**

- Services must be rendered in an Opioid Treatment Program that has been certified under 42 C.F.R. 8 (regarding the process and standards by which SAMHSA determines that an opioid treatment program is qualified to provide opioid treatment under the Federal opioid treatment standards), and approved by the Family and Social Services Administration's Division of Mental Health and Addiction.

**MRO SERVICES WILL CONTINUE ON PAGE 9d**

Item 9D. Rehabilitation

2. Opioid Treatment Services

Opioid treatment services provided by an Opioid Treatment Program (OTP) on or after July 1, 2023 shall be reimbursed according to this section.

Payment for opioid treatment services will be based on 100% of Medicare payment rates. Services considered opioid treatment services are: U.S. Food and Drug Administration (FDA)-approved opioid agonist and antagonist medication-assisted treatment (MAT) medication, the dispensing and administration of MAT medications, toxicology testing, individual and group therapy, intake activities, and periodic assessments.

Payment for these services is to be reimbursed via an applicable weekly reimbursement bundle utilized by Medicare or may be separately reimbursable when not all service components of the weekly bundle have been administered. Additionally, other services not defined as OTP services may be reimbursable by an opioid treatment program provider if deemed appropriate by the Office of Medicaid Policy and Planning (OMPP).

The state will review the rate annually and rebase as necessary to assure the rate is economic and efficient and in accordance with Medicare payment. Providers will maintain data relating to the provision of covered opioid treatment services, including the date of service, beneficiary information, and the nature and volume of services. The state will monitor the provision of covered opioid treatment services to ensure that beneficiaries receive the quantity and intensity of services required to meet their opioid treatment service needs.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of opioid treatment services.