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State/Territory Name Indiana

State Plan Amendment (SPA) #: 25-0007

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 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

October 10, 2025

E. Mitchell Roob Jr.
Interim Medicaid Director
Indiana Office of Medicaid Policy and Planning
402 West Washington Street, Room W374
Indianapolis, IN 46204

Re: Indiana State Plan Amendment IN-25-0007

Dear Director Roob:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number 25-0007. This State Plan Amendment modifies the end date for Medication Assisted Treatment (MAT) and makes coverage and reimbursement of MAT services permanent.

We conducted our review of your submittal according to statutory requirements in Title XIX implementing regulation 1905(a)(29) of the Social Security Act.

This letter is to inform you that Indiana Medicaid SPA 25-0007 was approved on October 9, 2025, with an effective date of September 1, 2025.

If you have any questions, please contact Rhonda Gray at (410) 786-6140 or via email at Rhonda.Gray@cms.hhs.gov.

Sincerely,

Nicole McKnight
On Behalf of Courtney Miller, MCOG Director

Enclosures

cc: Lindsey Lux
LaRisha Ratliff

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

1. TRANSMITTAL NUMBER

2 5 — 0 0 0 7

2. STATE

IN3. 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

September 1, 2025

5. FEDERAL STATUTE/REGULATION CITATION

~~1905(r)(1)(B)(v) of the Social Security Act—~~
1905(a)(29) of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2025 \$ 0b. FFY 2026 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

~~Supplement 4 to Attachment 3.1-A Page 2~~

Attachment 3.1-A - Page 13 (NEW)

Supplement 4 To Attachment 3.1-A - Pages 1-11

Supplement 4 to Attachment 3.1A - Pages 12 - 13 (NEW)

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION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

Supplement 4 to Attachment 3.1-A Page 2

Supplement 4 to Attachment 3.1-A, Pages 1-11

9. SUBJECT OF AMENDMENT

The state plan amendment proposes to modify the end date for ~~Medication-Assisted Treatment~~ in our Medicaid State Plan.
Medication

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 AGENCY OFFICIAL

12. TYPED NAME

E. Mitchell Roob, Jr.

13. TITLE

Interim Medicaid Director

14. DATE SUBMITTED

August 25th, 2025

15. RETURN TO

E. Mitchell Roob

Medicaid Director

Indiana Office of Medicaid Policy and Planning

402 West Washington Street, Room W374

Indianapolis, IN 46204

Attn: Brooke Cripe, Government Relations Analyst

FOR CMS USE ONLY

16. DATE RECEIVED

August 25, 2025

17. DATE APPROVED

October 10, 2025

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

September 1, 2025

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Nicole McKnight

21. TITLE OF APPROVING OFFICIAL

On Behalf of Courtney Miller, MCOG Director

22. REMARKS

*Box 5, 7, and 8: State authorized pen and ink change on 09/30/2025

State authorized pen and ink change to Box 9 on 10/09/25

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

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

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

[Please check the box below to indicate if this benefit is provided for the categorically needy (3.1-A) or medically needy only (3.1-B)]

☒ 1905(a)(29) MAT as described and limited in Supplement 4 to Attachment 3.1-A.

PRA Disclosure Statement - This use of this form is mandatory and the information is being collected to assist the Centers for Medicare & Medicaid Services in implementing section §1905(a)(29) of the Social Security Act. 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 #68). Public burden for all of the collection of information requirements under this control number is estimated to take about 25 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.

TN: 25-0007
Supersedes TN: NEW

Approval Date: October 9, 2025
Effective Date: September 1, 2025

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

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

General Assurances**[Select all three checkboxes below.]**

☒ 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.

☒ 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).

☒ 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 describe in the text fields as indicated below.]**

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

- 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

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TN: 25-0007Supersedes TN: 21-0001Approval Date: October 9, 2025Effective Date: September 1, 2025

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

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

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-toface 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.

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

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

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.

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

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

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)

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

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

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)
- 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)

Motivational Interviewing

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

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

- 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)

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

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

- 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

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

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.

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:
 - 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:

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- In psychiatric or mental health -nursing from an accredited university, plus a license as a registered nurse in Indiana
 - In pastoral counseling from an accredited university.
 - 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

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

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)

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State Plan under Title XIX of the Social Security Act
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Section 1905(a)(29) Medication Assisted Treatment (MAT)

- 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.

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State/Territory: Indiana**

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

Utilization Controls

[Select all applicable checkboxes below.]

☒ 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.]

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

PRA Disclosure Statement - This use of this form is mandatory and the information is being collected to assist the Centers for Medicare & Medicaid Services in implementing section §1905(a)(29) of the Social Security Act. 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 #68). Public burden for all of the collection of information requirements under this control number is estimated to take about 25 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.

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

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

- 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

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