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State/Territory Name: Louisiana

State Plan Amendment (SPA) #: 26-0005

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

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

August 19, 2026

Seth J. Gold

Medicaid Executive Director

State of Louisiana Department of Health

628 N. 4th Street

PO Box 91030

Baton Rouge, LA 79821-9030

Re: Louisiana State Plan Amendment (SPA) – 26-0005

Dear Medicaid Executive Director Gold:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 26-0005. This amendment proposes to amend the provisions governing substance use disorder (SUD) services to align with the updated American Society of Addiction Medicine (ASAM) 4th edition.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations under 42 CFR 440.130(d). This letter informs you that Louisiana's Medicaid SPA TN 26-0005 was approved on August 19, 2026, with an effective date of July 1, 2026.

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

If you have any questions, please contact Cecilia Williams at (410) 786-2539 or via email at Cecilia.Williams@cms.hhs.gov.

Sincerely,

Megan K. Buck

Director, Division of Program Operations

Enclosures

cc: Marjorie Jenkins
Najah Freeman
Keuna Franklin
Krystal Ceasor

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

1. TRANSMITTAL NUMBER
26-0005

2. STATE
LA

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL
SECURITY ACT

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

4. PROPOSED EFFECTIVE DATE
July 1, 2026

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR 440.130(d)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2026 \$0

b. FFY 2027 \$0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1-A, Item 13d, Pages 5-11a

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION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

Same (TN 18-0024)

9. SUBJECT OF AMENDMENT

The purpose of this SPA is to amend the provisions governing substance use disorder (SUD) services to align with the updated American Society of Addiction Medicine (ASAM) 4th edition.

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:

The Governor does not review State Plan material.

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME

Drew Maranto, designee for Bruce D. Greenstein

13. TITLE

Undersecretary

14. DATE SUBMITTED

June 11, 2026

15. RETURN TO

**Seth Gold
Medicaid Executive Director
Louisiana Department of Health
628 North 4th Street
P.O. Box 91030
Baton Rouge, LA 70821-9030**

FOR CMS USE ONLY

16. DATE RECEIVED

June 11, 2026

17. DATE APPROVED

August 19, 2026

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

July 1, 2026

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Megan K. Buck

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

CITATION	<u>Rehabilitation Services</u>
42 CFR 440.130(d)	

The Medicaid program provides coverage for substance use disorders (SUD) services. SUD services are services which are medically necessary to reduce the disability resulting from the illness and to restore the individual to his/her best possible functioning level in the community. Individuals who meet Medicaid eligibility and clinical criteria shall qualify to receive medically necessary SUD services.

Services provided to youth must include communication and coordination with the family and/or legal guardian and custodial agency for youth in state custody. Coordination with other youth-serving systems shall occur as needed to achieve the treatment goals. All coordination must be documented in the youth's medical record.

The agency or individual who has the decision making authority for a minor in state custody must approve the provision of services to the recipient, provided that written consent is obtained from the minor.

These services include a continuum of person-centered outpatient, intensive outpatient and residential services consistent with the individual's assessed treatment needs. The rehabilitation and recovery focus is designed to promote skills for coping with and managing substance use symptoms and behaviors. Services should address an individual's major lifestyle, attitudinal and behavioral problems that have the potential to undermine the goals of treatment.

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:

Youth who are in need of SUD services shall be served within the context of the family and not as an isolated unit.

Services shall be:

1. delivered in a culturally and linguistically competent manner;
2. respectful of the individual receiving services;
3. appropriate to individuals of diverse racial, ethnic, religious, sexual, gender identities, and other cultural and linguistic groups; and
4. appropriate for age, development, and education.

Evidence-based practices require prior approval and fidelity reviews on an ongoing basis as determined necessary by the Department.

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:

The following ASAM levels are covered for outpatient treatment:

ASAM Level 1.5 Outpatient Treatment

An outpatient program that offers comprehensive, coordinated, professionally directed and defined addiction assessment and treatment services that may vary in level of intensity and may be delivered in a wide variety of settings. Organized non-residential addiction treatment services are provided in regularly scheduled sessions of fewer than nine contact hours a week. Services may include individual, group, and family counseling, psychoeducation on recovery and wellness, and recovery-oriented check-ins (for those with one year of sustained remission from a SUD).

ASAM Level 2.1 Intensive Outpatient Treatment

Professionally directed assessment, diagnosis, treatment and recovery services provided in an organized non-residential treatment setting, including individual, group, family counseling and psychoeducation on recovery as well as monitoring of drug use, medication management, medical and psychiatric examinations, crisis mitigation coverage and orientation to community-based support groups. Services may be offered during the day, before or after work or school, in the evening or on a weekend, and the program shall provide 9 to 19 hours of structured programming per week for adults and 6 to 19 hours of structured programming per week for youth.

ASAM Level 2.7 Medically Managed Intensive Outpatient Treatment

An organized outpatient addiction treatment service that may be delivered in an office setting or health care or behavioral health services provider by trained clinicians who provide individual, group, and family counseling and psychoeducation on recovery as well as medically supervised evaluation, withdrawal management, medication initiation and referral services. The services are designed to treat the client's level of clinical severity to achieve safe and comfortable withdrawal from mood-altering chemicals and to effectively facilitate the client's entry into ongoing treatment and recovery. A minimum of 20 clinical hours per week of services are required at this level of care.

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:

The following ASAM levels are covered for residential treatment:

ASAM Level 3.1 Clinically Managed Low Intensity Residential Treatment

A residential program that offers a combination of low-intensity clinical and recovery-focused services for substance-related disorders, with at least five hours of services per week for youth and 9 to 19 hours for adults. Services may include individual, group and family therapy, medication management and education, and treatment directed toward applying recovery skills, preventing relapse, improving emotional functioning, promoting personal responsibility and reintegrating the client into the worlds of work, education, and family life.

ASAM Level 3.5 Clinically Managed Medium Intensity Residential Treatment – Adolescents

A residential program for adolescents that offers continuous observation, monitoring, and treatment by clinical staff designed to treat clients experiencing substance-related disorders who have clinically-relevant social and psychological problems, such as criminal activity, impaired functioning and disaffiliation from mainstream values, with the goal of promoting abstinence from substance use and antisocial behavior and affecting a global change in clients' lifestyles, attitudes and values. Clinical services include individual, group, and family counseling, and psychoeducation on recovery and wellness. The program must include an in-house education/vocational component, which is not covered or paid by Medicaid.

ASAM Level 3.5 Clinically Managed High Intensity Residential Treatment – Adult

A residential program for adults that offers continuous observation, monitoring, and treatment by clinical staff designed to treat clients experiencing substance-related disorders who have clinically-relevant social and psychological problems, such as criminal activity, impaired functioning and disaffiliation from mainstream values, with the goal of promoting abstinence from substance use and antisocial behavior and affecting a global change in clients' lifestyles, attitudes and values. Level 3.5 Adult programs provide at least 20 hours per week of structured clinical services. Clinical services include individual, group, and family counseling, and psychoeducation on recovery and wellness.

ASAM Level 3.7 Medically Managed Residential Treatment – Adult

A residential program for adults that provides a planned regimen of 24-hour professionally directed evaluation, observation, and medical monitoring of substance use and mental health treatment to clients with co-occurring psychiatric and substance disorders whose disorders are so severe that they require a residential level of care but do not need the full resources of an acute care hospital. The program provides 24 hours of structured treatment activities per week, including, but not limited to, psychiatric and substance use assessments, diagnosis, treatment and rehabilitation services. Level 3.7 programs provide at least 20 hours per week of structured clinical services. Clinical services include individual, group, and family counseling, and psychoeducation on recovery and wellness.

STATE OF LOUISIANA

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ASAM Level 3.7 WM Medically Managed Residential Withdrawal Management – Adult

Medically managed residential withdrawal management is an organized service delivered by medical and nursing professionals, which provide for 24-hour observation, monitoring and treatment delivered by medical and nursing professionals to clients whose withdrawal signs and symptoms are moderate to severe and thus require residential care, but do not need the full resources of an acute care hospital. Level 3.7 WM programs provide at least 20 hours per week of structured clinical services. Clinical services include individual, group, and family counseling, and psychoeducation on recovery and wellness.

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CITATION	<u>Rehabilitation Services</u>
42 CFR 440.130(d)	

Limitations:

These SUD services are provided as part of a comprehensive specialized psychiatric program available to all Medicaid eligible individuals with significant functional impairments resulting from an identified addiction diagnosis. Services must be medically necessary and must be recommended by a Licensed Mental Health Professional (LMHP) or physician, who is acting within the scope of his/her professional license and applicable state law, to promote the maximum reduction of symptoms and/or restoration of an individual to his/her best age-appropriate functional level according to an individualized treatment plan.

The activities included in the service must be intended to achieve identified treatment plan goals or objectives. The treatment plan should be developed in a person-centered manner with the active participation of the individual, family and providers and be based on the individual's condition and the standards of practice for the provision of rehabilitative services. The treatment plan should identify the medical or remedial services intended to reduce the identified condition as well as the anticipated outcomes of the individual. The treatment plan must specify the frequency, amount and duration of services. The treatment plan must be signed by the LMHP or physician responsible for developing the plan with the participant (or authorized representative) also signing to note concurrence with the treatment plan.

The plan will specify a timeline for re-evaluation of the plan that is at least every 90 days for Level 1.5 and every 30 days for all other ASAM levels. The reevaluation should involve the individual, family and providers and include a reevaluation of plan to determine whether services have contributed to meeting the stated goals. A new treatment plan should be developed if there is no measureable reduction of disability or restoration of functional level. The new plan should identify different rehabilitation strategies with revised goals and services. Providers must maintain medical records that include a copy of the treatment plan, the name of the individual, dates of services provided, nature, and content and units of rehabilitation services provided, and progress made toward functional improvement and goals in the treatment plan.

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CITATION **Rehabilitation Services**
42 CFR 440.130(d)

Exclusions

The following services shall be excluded:

1. Components that are not provided to, or directed exclusively toward the treatment of, the Medicaid eligible individual;
2. Services provided at a work site which are not directly related to treatment of the recipient's needs;
3. Any services or components of services of which the basic nature is to supplant housekeeping, homemaking, or basic services for the convenience of a person receiving covered services (including housekeeping, shopping, child care, and laundry services);
4. Services provided in an institution for mental disease (IMD), unless provided through the Code of Federal Regulations "allowed in lieu of", or a U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS) approved waiver; and
5. Room and board provided in a residential setting.

Unless otherwise specified, a unit of service is defined according to the Healthcare Common Procedure Coding System (HCPCS) approved code set.

Provider Qualifications

All services shall be delivered in accordance with federal and state laws and regulations, the provider manual, and other notices or directives issued by the Department. Agencies providing SUD services must be licensed by the Department to provide behavioral health services. Providers shall meet the provisions of the provider manual and the appropriate statutes.

Services are provided by licensed and unlicensed professional staff, who are at least 18 years of age with a high school or equivalent diploma, according to their areas of competence as determined by degree, required levels of experience as defined by state law and regulations and guidelines established by the professional licensing boards. Licensed staff must be in good standing in the state of Louisiana to practice within the scope of all applicable state laws, practice acts, and the practitioner's professional license. Anyone who is unlicensed providing addiction services must be registered with the Addictive Disorders Regulatory Authority (ADRA) and demonstrate competency in compliance with state law and applicable scope of practice regulations. Unlicensed staff who are master's-prepared behavioral health professionals that have not obtained full licensure privileges and are participating in ongoing professional supervision will not need to register with ADRA. State regulations require supervision of unlicensed professionals by a qualified professional supervisor (QPS).

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CITATION **Rehabilitation Services**
42 CFR 440.130(d)

A QPS includes the following professionals who are currently registered with their respective Louisiana board:

1. licensed psychologists;
2. licensed clinical social workers;
3. licensed professional counselors;
4. licensed addiction counselors;
5. licensed physicians; and
6. advanced practice registered nurses.

The following professionals may obtain QPS credentials:

1. a masters-prepared individual who is registered with the appropriate state board and under the supervision of a licensed psychologist;
2. licensed addiction counselors;
3. licensed professional counselor (LPC); and
4. licensed clinical social worker (LCSW).

The QPS can provide clinical/administrative oversight and supervision of staff.

Residential addiction treatment facilities shall be accredited by an approved accrediting body and maintain such accreditation. Denial, loss of or any negative change in accreditation status must be reported to the MCO, in writing, within the time limit established by the Department.

Addiction Services include an array of person-centered outpatient, intensive outpatient, residential, and inpatient services consistent with the individual's assessed treatment needs, with a rehabilitation and recovery focus designed to promote skills for coping with and managing substance use symptoms and behaviors.

Master's Prepared Behavioral Health Professional:

1. A master's-prepared behavioral health professional that has not obtained full licensure privileges and is participating in ongoing professional supervision.
2. When working in addiction treatment settings, the master's-prepared unlicensed professional (UP) must be supervised by a Licensed Mental Health Professional (LMHP).

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Services

1. Alcohol and/or drug assessment;
2. Alcohol and/or drug services – Individual Session;
3. Alcohol and/or drug services – Group Session; and
4. Alcohol and/or drug services – Family Counseling.

Certified Addiction Counselor (CAC)

1. Possesses a bachelor's degree from an accredited institution of higher education. The degree shall be in a human services or behavioral science discipline, or such other discipline or disciplines as the department may deem appropriate;
2. Has met all of requirements of Louisiana Addictive Disorders Regulatory Authority (ADRA); and
3. Has demonstrated professional competence by passing a written and oral exam and conducting a case presentation.

CAC Service Provision

1. Alcohol and/or drug assessment;
2. Alcohol and/or drug services – Individual Session;
3. Alcohol and/or drug services - Group Session; and
4. Alcohol and/or drug services - Family Counseling.

Registered Addiction Counselor (RAC)

1. Has met all of requirements of Louisiana Addictive Disorders Regulatory Authority (ADRA); and
2. Has demonstrated professional competence by passing a written and oral exam and conducting a case presentation.

RAC Service Provision

1. Alcohol and/or drug Assessment;
2. Alcohol and/or drug services – Individual Session;
3. Alcohol and/or drug services - Group Session; and
4. Alcohol and/or drug services - Family Counseling.