Table of Contents

State/Territory Name: Nebraska

State Plan Amendment (SPA) #: 21-0003

This file contains the following documents in the order listed:

1) Approval Letter
2) CMS Form 179
3) Approved SPA Pages
August 16, 2021

Kevin Bagley
Director
Division of Medicaid & Long-Term Care
Nebraska Department of Health & Human Services
301 Centennial Mall South
Lincoln, NE 68509

Re: Nebraska State Plan Amendment (SPA) 21-0003 MAT

Dear Mr. Bagley:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) NE-21-0003. 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 Nebraska Medicaid SPA Transmittal Number 21-0003 is approved 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) of the Act, due to the COVID-19 public health emergency (PHE), CMS issued an approval letter on March 17, 2021 allowing Nebraska 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 Tyson Christensen at (816) 426-6440 or via email at tyson.christensen@cms.hhs.gov.

Sincerely,

James G. Scott, Director
Division of Program Operations

Enclosures

cc: Todd Baustert
    Catherine Gekas-Steeby
    Crystal Georgiana
# TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL

**FOR:** HEALTH CARE FINANCING ADMINISTRATION

<table>
<thead>
<tr>
<th>1. TRANSMITTAL NUMBER:</th>
<th>NE 21-0003</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. STATE</td>
<td>Nebraska</td>
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<tr>
<td>3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)</td>
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<tr>
<td>4. PROPOSED EFFECTIVE DATE</td>
<td>October 1, 2020</td>
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<td>5. TYPE OF PLAN MATERIAL (Check One):</td>
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<tr>
<td>□ NEW STATE PLAN</td>
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<td>□ AMENDMENT TO BE CONSIDERED AS NEW PLAN</td>
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<tr>
<td>☑ AMENDMENT</td>
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</table>

**COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)**

<table>
<thead>
<tr>
<th>6. FEDERAL STATUTE/REGULATION CITATION:</th>
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</tr>
</thead>
<tbody>
<tr>
<td>SSA 1905(a)(29) and 1905(e)(1)</td>
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</table>

**8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:**

- Att. 3.1-A, Item 13d, Page 10
- Supplement 5 to Att. 3.1-A, Pages 1-8 (new)
- Supplement 6 to Att. 3.1-B, Pages 1-8 (new)
- Supplement 2 to Att. 4.19-B, Page 1 (new)

**9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):**

Att. 3.1-A, Item 13d, Page 10

**10. SUBJECT OF AMENDMENT:**

SUPPORT Act 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:
  Governor has waived review

**12. SIGNATURE OF STATE AGENCY OFFICIAL:**

- [Signature]

**13. TYPED NAME:**

Kevin Bagley

**14. TITLE:**

Director, Division of Medicaid and Long-Term Care

**15. DATE SUBMITTED:**

March 30, 2021

**16. RETURN TO:**

Dawn Kastens
Division of Medicaid & Long-Term Care
Nebraska Department of Health & Human Services
301 Centennial Mall South
Lincoln, NE 68509

**17. DATE RECEIVED:**

March 30, 2021

**18. DATE APPROVED:**

August 16, 2021

**19. EFFECTIVE DATE OF APPROVED MATERIAL:**

October 1, 2020

**20. SIGNATURE OF REGIONAL OFFICIAL:**

- [Signature]

**21. TYPED NAME:**

James G. Scott

**22. TITLE:**

Director, Division of Program Operations

**23. REMARKS:**

*Pen and ink change concurred with the state on 06/24/2021*
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State Nebraska
METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES

PEER SUPPORT

Peer Support shall be reimbursed on a direct service by service basis and billed in 15 minute increments.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Peer Support services. The agency’s Mental Health and Substance Use fee schedule rate for Peer Support will be set as of July 1, 2020 and is effective for services provided on or after that date. All rates are published on the agency’s website at http://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx. From the landing page, scroll down to the fee schedule for the specific program and year.

This rate will be the same for quasi-governmental and private providers of community support service.

OPIOID TREATMENT PROGRAM (OTP)

When services are reimbursed per a fee schedule, except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. The agency’s OTP rates on the Mental Health and Substance Use fee schedule will be set as of January 1, 2020, and will be effective for services provided on or after that date. All rates are published on the agency’s website at http://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx. From the landing page, scroll down to the fee schedule for the specific program and year.

Effective for dates 10/1/2020 to 09/30/2025, services in this program are reimbursed per Supplement 2 to Attachment 4.19-B, page 1.

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TN # NE 21-0003  Approval Date 8-16-2021
Supersedes TN No. NE 20-0013  Effective Date 10-1-2020
State of Nebraska

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

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

1905(a)(29) Medication-Assisted Treatment (MAT) as described and limited in Supplement 5 to Attachment 3.1-A.

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

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.

c. The state assures coverage for all formulations of MAT drugs and biologicals for OUD 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).

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.

From October 1, 2020, through September 30, 2025, 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.
State of Nebraska

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

Nebraska covers the following services to address the symptoms of addiction and related impaired functioning as part of medication-assisted treatment:

- Initial assessment: Completion of an Adult Opioid Use Disorder Assessment by a licensed clinician (described below) that indicates individual has an opioid use disorder of sufficient severity that this level of care is necessary.
- Physical examination: A physical health assessment which includes medical history and a physical examination and toxicology screen. This must be completed by a physician, physician assistant (PA), or advance practice registered nurse (APRN).
- Ongoing assessment services: A opioid use disorder assessment must be completed periodically to determine OTP level of care. Assessments must be completed by a licensed practitioner (described in Table A below).
- Prescribing and administration of opioid agonist medication: A physician, physician assistant (PA), or advance practice registered nurse (APRN) must determine and document in writing the initial dose and schedule to be followed for each individual.
- Treatment planning: Initial assessments will function as the initial treatment plan with development of a comprehensive treatment plan to be completed within 30 days. Treatment plans must be reviewed every 90 days or more often if the individual experiences a significant change in clinical presentation.
- Therapy services: Include therapy to address the symptoms of addiction and related impaired functioning. Covered therapy services include: individual therapy, group therapy, and family therapy. Family Therapy service 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
State of Nebraska

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

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. If it is determined that treatment for a co-morbid mental health condition is needed by the initial diagnostic interview, therapy will be delivered by a licensed practitioner (described below).

- Care coordination: Is a collaborative process that assesses, plans, implements, coordinates, and evaluates the options and services required to meet the client’s needs and includes referrals to appropriate outside resources when the needed services are not provided by the OTP.
- Sustained Recovery: Non-residential, outpatient sustained recovery from opioid analgesics including methadone and buprenorphine, as needed by the individual receiving services. Sustained recovery services include supervision of dosing and administration of MAT, toxicology result interpretation and counseling.

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

- The following practitioners conduct physical examinations:
  - Physician
  - Physician assistants (PAs)
  - Advance practice registered nurses (APRNs)

- The following practitioners conduct initial assessments:
  - Licensed Independent Mental Health Practitioner (LIMHP)
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
  - Provisionally licensed Mental Health Practitioners
  - Licensed Drug and Alcohol Counselors (LDAC)
  - Provisionally licensed Drug and Alcohol Counselors (under the supervision of a fully licensed therapist)

- The following practitioners conduct ongoing assessments:
  - LIMHP
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
State of Nebraska

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

- Provisionally licensed Mental Health Practitioners
- LDAC
- Provisionally licensed Drug and Alcohol Counselors (under the supervision of a fully licensed therapist)

- The following practitioners prescribe and/or administer opioid agonist medication:
  - Physicians (prescribe and administer opioid agonist medication)
  - PAs (prescribe and administer opioid agonist medication)
  - APRNs (prescribe and administer opioid agonist medication)
  - Registered nurses (RNs) (administer opioid agonist medication under the supervision of a physician)
  - Licensed Practical Nurses (LPNs) (administer opioid agonist medication under the supervision of a physician)

- The following practitioners are involved in treatment planning:
  - Physicians
  - PAs
  - APRNs
  - RNs
  - LPNs
  - LIMHP
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
  - Provisionally licensed Mental Health Practitioners
  - LDAC
  - Provisionally licensed Drug and Alcohol Counselors

- The following practitioners provide therapy services:
  - LIMHP
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
  - Provisionally licensed Mental Health Practitioners
  - LDAC
  - Provisionally licensed Drug and Alcohol Counselors
State of Nebraska

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

- The following practitioners are involved in care coordination:
  - Physicians
  - PAs
  - APRNs
  - RNs
  - LPNs
  - LIMHP
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
  - Provisionally licensed Mental Health Practitioners
  - LDAC
  - Provisionally licensed Drug and Alcohol Counselors

- The following practitioners provide sustained recovery services:
  - Physicians
  - PAs
  - APRNs
  - LIMHPs
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
  - Provisionally licensed Mental Health Practitioners
  - LDACs
  - Provisionally licensed Drug and Alcohol Counselors

Opioid Treatment Programs (OTPs) provide all services listed above.

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.

See Table A below for the qualifications for each practitioner.
State of Nebraska

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

OTPs must:
- Comply with applicable state laws and regulations;
- Be accredited by SAMHSA-approved accreditation bodies;
- Be certified under 42 C.F.R. Part 8;
- Be licensed by DHHS Division of Public Health; and
- Be an active enrolled provider with Nebraska Medicaid.

OTPs must be staffed as specified in the Federal regulations established for MAT by SAMHSA and must have a program sponsor who is a qualified physician responsible for assuring adherence to all requirements and ensuring all services identified and the required services are available. OTPs must also have a medical director who assumes responsibility for administering all medical services performed by the OTP.
### Table A: Staff Qualifications for Opioid Treatment Program (OTP)

<table>
<thead>
<tr>
<th>Title of Professional</th>
<th>Level of Education/Degree/Experience Required</th>
<th>License or Certification Required</th>
<th>Supervision</th>
<th>Applicable Service Components Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician</td>
<td>Doctor of Medicine or Osteopathy</td>
<td>Licensed by NE Board of Medical Examiners.</td>
<td>None</td>
<td>Physical examination, prescribing of opioid agonists, medication administration, sustained recovery from opioid analgesics, care coordination, and treatment planning as a member of the interdisciplinary team.</td>
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<tr>
<td>Physician Assistant (PA)</td>
<td>Successful completion of an approved program for the education of physician assistants.</td>
<td>Successful completion of the proficiency examination.</td>
<td>Physician</td>
<td></td>
</tr>
<tr>
<td>Advance Practice Registered Nurse (APRN)</td>
<td>Master's or doctoral degree and national board certification to qualify for licensure.</td>
<td>APRN license as a Certified Nurse Midwife, Certified Registered Nurse Anesthetist, Clinical Nurse Specialist, or Nurse Practitioner</td>
<td>Integrated Practice Agreement (IPA) with physician</td>
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<tr>
<td>Registered Nurse (RN)</td>
<td>Two to four years of education at a college or university and passed the National Council Licensure Examination Registered Nurse (NCLEX-RN) in order to qualify for licensure.</td>
<td>Successful completion of the NCLEX-RN.</td>
<td>Medication administration (under supervision of a physician), care coordination, and treatment planning as a member of the interdisciplinary team.</td>
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<tr>
<td>Title of Professional</td>
<td>Level of Education/Degree/Experience Required</td>
<td>License or Certification Required</td>
<td>Supervision</td>
<td>Applicable Service Components Provided</td>
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<tr>
<td>Licensed Practical Nurse (LPN)</td>
<td>Licensure follows nine months to one year of education and successful completion of the National Council Licensure Examination Practical Nurse (NCLEX-PN).</td>
<td>Successful completion of the NCLEX-PN.</td>
<td>Medication administration (under supervision of a physician), care coordination, and treatment planning as a member of the interdisciplinary team.</td>
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<tr>
<td>Licensed Independent Mental Health Practitioner</td>
<td>Have a Master’s or doctorate degree from an accredited educational program, successfully passed the relevant professional national board licensing examination, 3,000 hours of post graduate supervised experience, and included at least 1,500 hours (or more) of experience with clients diagnosed under the major mental illness or disorder category.</td>
<td>Licensed by Nebraska Department of Health and Human Services</td>
<td>Initial assessment and ongoing assessment services, therapy services (individual, group and family) within the clinician’s scope of practice, care coordination, sustained recovery, and treatment planning as a member of the interdisciplinary team.</td>
<td></td>
</tr>
<tr>
<td>Licensed Psychologist</td>
<td>Have a doctoral degree from a program of graduate study in professional Psychology; two years</td>
<td>Licensed by Nebraska Department of Health and Human Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Title of Professional</td>
<td>Level of Education/ Degree/Experience Required</td>
<td>License or Certification Required</td>
<td>Supervision</td>
<td>Applicable Service Components Provided</td>
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<tr>
<td>Provisionally Licensed Psychologist</td>
<td>Have a doctoral degree from a program of graduate study in professional Psychology; two years of supervised professional experience</td>
<td></td>
<td>Nebraska Licensed Psychologist</td>
<td></td>
</tr>
<tr>
<td>Licensed Mental Health Practitioner</td>
<td>Master's or doctorate degree of which the course work and training leading to the degree was primarily therapeutic mental health in content as defined in licensure requirements, and included a practicum or internship; 3,000 hours of supervised experience.</td>
<td>Licensed by Nebraska Department of Health and Human Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provisionally Licensed Mental Health Practitioner</td>
<td>Master's or doctorate degree of which the course work and training leading to the degree was primarily therapeutic mental health in content as</td>
<td>Needs to obtain 3,000 hours of supervised experience in mental health practice in Nebraska. Must be supervised by</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Title of Professional</td>
<td>Level of Education/Degree/Experience Required</td>
<td>License or Certification Required</td>
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<tr>
<td>Licensed Drug and Alcohol Counselor</td>
<td>High school diploma, 270 hours of coursework related to the knowledge and skills of alcohol and drug counseling, 300 hours of supervised practical training and 6000 hours of clinical work experience</td>
<td>Licensed by Nebraska Department of Health and Human Services</td>
<td>a fully licensed practitioner.</td>
<td></td>
</tr>
<tr>
<td>Provisionally Licensed Drug and Alcohol Counselor</td>
<td>High school diploma, 270 hours of coursework related to the knowledge and skills of alcohol and drug counseling, 300 hours of supervised practical training</td>
<td></td>
<td>Needs to obtain 6000 hours of supervised clinical work experience providing alcohol and drug counseling services in Nebraska. Must be supervised by a fully licensed practitioner</td>
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</table>
State of Nebraska

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.

   None

PRA Disclosure Statement - This information is being collected to assist the Centers for Medicare & Medicaid Services in implementing section 1006(b) of the SUPPORT for Patients and Communities Act (P.L. 115-271) enacted on October 24, 2018. Section 1006(b) requires state Medicaid plans to provide coverage of Medication-Assisted Treatment (MAT) for all Medicaid enrollees as a mandatory Medicaid state plan benefit for the period beginning October 1, 2020, and ending September 30, 2025. 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 # 60). Public burden for all of the collection of information requirements under this control number is estimated to take about 80 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 of Nebraska

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

Citation: 3.1(b)(1) Amount, Duration, and Scope of Services: Medically Needy (Continued)

1915(a)(29) Medication-Assisted Treatment (MAT) as described and limited in Supplement 6 to Attachment 3.1-B.

ATTACHMENT 3.1-B identifies the medical and remedial services provided to the medically needy.
State of Nebraska

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

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the Medically 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.
   c. The state assures coverage for all formulations of MAT drugs and biologicals for OUD 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).

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.

   From October 1, 2020, through September 30, 2025, 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.
State of Nebraska

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

Nebraska covers the following services to address the symptoms of addiction and related impaired functioning as part of medication-assisted treatment:

- **Initial assessment:** Completion of an Adult Opioid Use Disorder Assessment by a licensed clinician (described below) that indicates individual has an opioid use disorder of sufficient severity that this level of care is necessary.
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- **Therapy services:** Include therapy to address the symptoms of addiction and related impaired functioning. Covered therapy services include: individual therapy, group therapy, and family therapy. Family Therapy service 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
State of Nebraska

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

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. If it is determined that treatment for a co-morbid mental health condition is needed by the initial diagnostic interview, therapy will be delivered by a licensed practitioner (described below).

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  - Provisionally licensed Mental Health Practitioners
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  - Provisionally licensed Drug and Alcohol Counselors (under the supervision of a fully licensed therapist)

- The following practitioners conduct ongoing assessments:
  - LIMHP
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TN: NE 21-0003 Approval Date: 8-16-20
Supersedes TN: New Effective Date: 10-1-2020
State of Nebraska

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

- Provisionally licensed Mental Health Practitioners
- LDAC
- Provisionally licensed Drug and Alcohol Counselors (under the supervision of a fully licensed therapist)

- The following practitioners prescribe and/or administer opioid agonist medication:
  - Physicians (prescribe and administer opioid agonist medication)
  - PAs (prescribe and administer opioid agonist medication)
  - APRNs (prescribe and administer opioid agonist medication)
  - Registered nurses (RNs) (administer opioid agonist medication under the supervision of a physician)
  - Licensed Practical Nurses (LPNs) (administer opioid agonist medication under the supervision of a physician)

- The following practitioners are involved in treatment planning:
  - Physicians
  - PAs
  - APRNs
  - RNs
  - LPNs
  - LIMHP
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
  - Provisionally licensed Mental Health Practitioners
  - LDAC
  - Provisionally licensed Drug and Alcohol Counselors

- The following practitioners provide therapy services:
  - LIMHP
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
  - Provisionally licensed Mental Health Practitioners
  - LDAC
  - Provisionally licensed Drug and Alcohol Counselors
1905(a)(29) Medication-Assisted Treatment (MAT)

- The following practitioners are involved in care coordination:
  - Physicians
  - PAs
  - APRNs
  - RNs
  - LPNs
  - LIMHP
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
  - Provisionally licensed Mental Health Practitioners
  - LDAC
  - Provisionally licensed Drug and Alcohol Counselors

- The following practitioners provide sustained recovery services:
  - Physicians
  - PAs
  - APRNs
  - LIMHPs
  - Licensed Psychologists
  - Provisionally licensed Psychologists
  - Licensed Mental Health Practitioners
  - Provisionally licensed Mental Health Practitioners
  - LDACs
  - Provisionally licensed Drug and Alcohol Counselors

Opioid Treatment Programs (OTPs) provide all services listed above.

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.

See Table A below for the qualifications for each practitioner.
State of Nebraska

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

OTPs must:

- Comply with applicable state laws and regulations;
- Be accredited by SAMHSA-approved accreditation bodies;
- Be certified under 42 C.F.R. Part 8;
- Be licensed by DHHS Division of Public Health; and
- Be an active enrolled provider with Nebraska Medicaid.

OTPs must be staffed as specified in the Federal regulations established for MAT by SAMHSA and must have a program sponsor who is a qualified physician responsible for assuring adherence to all requirements and ensuring all services identified and the required services are available. OTPs must also have a medical director who assumes responsibility for administering all medical services performed by the OTP.
### Table A: Staff Qualifications for Opioid Treatment Program (OTP)

<table>
<thead>
<tr>
<th>Title of Professional</th>
<th>Level of Education / Experience Required</th>
<th>License or Certification Required</th>
<th>Supervision</th>
<th>Applicable Service Components Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician</td>
<td>Doctor of Medicine or Osteopathy</td>
<td>Licensed by NE Board of Medical Examiners.</td>
<td>None</td>
<td>Physical examination, prescribing of opioid agonists, medication administration, sustained recovery from opioid analgesics, care coordination, and treatment planning as a member of the interdisciplinary team.</td>
</tr>
<tr>
<td>Physician Assistant (PA)</td>
<td>Successful completion of an approved program for the education of physician assistants.</td>
<td>Successful completion of the proficiency examination.</td>
<td>Physician</td>
<td></td>
</tr>
<tr>
<td>Advance Practice Registered Nurse (APRN)</td>
<td>Master's or doctoral degree and national board certification to qualify for licensure.</td>
<td>APRN license as a Certified Nurse Midwife, Certified Registered Nurse Anesthetist, Clinical Nurse Specialist, or Nurse Practitioner</td>
<td>Integrated Practice Agreement (IPA) with physician</td>
<td></td>
</tr>
<tr>
<td>Registered Nurse (RN)</td>
<td>Two to four years of education at a college or university and passed the National Council Licensure Examination Registered Nurse (NCLEX-RN) in order to qualify for licensure.</td>
<td>Successful completion of the NCLEX-RN.</td>
<td></td>
<td>Medication administration (under supervision of a physician), care coordination, and treatment planning as a member of the interdisciplinary team.</td>
</tr>
<tr>
<td>Title of Professional</td>
<td>Level of Education/Degree/Experience Required</td>
<td>License or Certification Required</td>
<td>Supervision</td>
<td>Applicable Service Components Provided</td>
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<tr>
<td>Licensed Practical Nurse (LPN)</td>
<td>Licensure follows nine months to one year of education and successful completion of the National Council Licensure Examination Practical Nurse (NCLEX-PN).</td>
<td>Successful completion of the NCLEX-PN.</td>
<td>Medication administration (under supervision of a physician), care coordination, and treatment planning as a member of the interdisciplinary team.</td>
<td></td>
</tr>
<tr>
<td>Licensed Independent Mental Health Practitioner</td>
<td>Have a Master’s or doctorate degree from an accredited educational program, successfully passed the relevant professional national board licensing examination, 3,000 hours of post graduate supervised experience, and included at least 1,500 hours (or more) of experience with clients diagnosed under the major mental illness or disorder category.</td>
<td>Licensed by Nebraska Department of Health and Human Services</td>
<td>Initial assessment and ongoing assessment services, therapy services (individual, group and family) within the clinician’s scope of practice, care coordination, sustained recovery, and treatment planning as a member of the interdisciplinary team.</td>
<td></td>
</tr>
<tr>
<td>Licensed Psychologist</td>
<td>Have a doctoral degree from a program of graduate study in professional Psychology; two years</td>
<td>Licensed by Nebraska Department of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Title of Professional</td>
<td>Level of Education/ Degree/Experience Required</td>
<td>License or Certification Required</td>
<td>Supervision</td>
<td>Applicable Service Components Provided</td>
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<tr>
<td>Provisionally Licensed Psychologist</td>
<td>Have a doctoral degree from a program of graduate study in professional Psychology; two years of supervised professional experience</td>
<td></td>
<td>Nebraska Licensed Psychologist</td>
<td></td>
</tr>
<tr>
<td>Licensed Mental Health Practitioner</td>
<td>Master's or doctorate degree of which the course work and training leading to the degree was primarily therapeutic mental health in content as defined in licensure requirements, and included a practicum or internship; 3,000 hours of supervised experience.</td>
<td>Licensed by Nebraska Department of Health and Human Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provisionally Licensed Mental Health Practitioner</td>
<td>Master's or doctorate degree of which the course work and training leading to the degree was primarily therapeutic mental health in content as</td>
<td></td>
<td>Needs to obtain 3,000 hours of supervised experience in mental health practice in Nebraska.</td>
<td></td>
</tr>
<tr>
<td>Title of Professional</td>
<td>Level of Education/ Degree /Experience Required</td>
<td>License or Certification Required</td>
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<tr>
<td>Licensed Drug and Alcohol Counselor</td>
<td>defined in licensure requirements, and included a practicum or internship.</td>
<td>Licensed by Nebraska Department of Health and Human Services</td>
<td>Must be supervised by a fully licensed practitioner.</td>
<td></td>
</tr>
<tr>
<td>Provisionally Licensed Drug and Alcohol Counselor</td>
<td>High school diploma, 270 hours of coursework related to the knowledge and skills of alcohol and drug counseling, 300 hours of supervised practical training and 6000 hours of clinical work experience</td>
<td>Needs to obtain 6,000 hours of supervised clinical work experience providing alcohol and drug counseling services in Nebraska. Must be supervised by a fully licensed practitioner</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
State of Nebraska

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

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the Medically 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.

None

PRA Disclosure Statement - This information is being collected to assist the Centers for Medicare & Medicaid Services in implementing section 1006(b) of the SUPPORT for Patients and Communities Act (P.L. 115-271) enacted on October 24, 2018. Section 1006(b) requires state Medicaid plans to provide coverage of Medication-Assisted Treatment (MAT) for all Medicaid enrollees as a mandatory Medicaid state plan benefit for the period beginning October 1, 2020, and ending September 30, 2025. 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 # 60). Public burden for all of the collection of information requirements under this control number is estimated to take about 80 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: NE 21-0003  Approval Date: 8-16-2021
Supersedes TN: New  Effective Date: 10-1-2020
State of Nebraska

Opioid Treatment Program

Methods and Standards for Establishing Payment Rates

Effective for dates from service from 10/1/2020 to 09/30/2025, all rates, including those for 1905(a)(29) MAT for OUD services as authorized on Supplement 5 to Att. 3.1-A and Supplement 6 to Att. 3.1-B are published on the agency’s website at http://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx. From the landing page, scroll down to the fee schedule for the specific program and year. When services are reimbursed per a fee schedule, except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. The agency’s OTP rates on the Mental Health and Substance Use fee schedule were set as of January 1, 2020, and are effective for services provided on or after that date.

The reimbursement for unbundled prescribed drugs and biologicals used to treat opioid use disorder will be reimbursed using the same methodology as described for prescribed drugs located in Attachment 4.19-B, section 12a for drugs that are dispensed or administered.

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