

Table of Contents

State/Territory Name: Ohio

State Plan Amendment (SPA) #: 22-0027

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Summary Page
- 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

November 14, 2022

Maureen M. Corcoran, Director
Ohio Department of Medicaid
P.O. Box 182709
50 West Town Street, Suite 400
Columbus, Ohio 43218

Re: Ohio State Plan Amendment (SPA) Transmittal Number 22-0027

Dear Ms. Corcoran:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number 22-0027. This amendment proposes to remove telehealth references from the state plan since the coverage provisions and payment rates for services delivered via telehealth are the same as services delivered face-to-face.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that Ohio Medicaid SPA 22-0027 was approved on November 10, 2022, with an effective date of July 1, 2022.

If you have any questions, please contact Christine Davidson at (312) 886-3642 or via email at christine.davidson@cms.hhs.gov.

Sincerely,

A solid black rectangular box redacting the signature of Ruth A. Hughes.

Ruth A. Hughes, Acting Director
Division of Program Operations

Enclosure

cc: Rebecca Jackson, ODM
Gregory Niehoff, ODM
Tiffany Williams, ODM
Deborah Benson, CMCS
Brandon Smith, CMCS

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

1. TRANSMITTAL NUMBER

2 2 — 0 2 7

2. STATE

OH

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

7/1/2022

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR 410.78

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2022 \$ 0
b. FFY 2023 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1-A Item 4-d Page 1 of 1
Attachment 3.1-A Item 13-d-1 Page 3 of 28
Attachment 3.1-A item 13-d-1 Page 5 of 28

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Attachment 3.1-A Item 4-d Page 1 of 1 (TN 11-013)
Attachment 3.1-A Item 13-d-1 Page 3 of 28 (TN 17-008)
Attachment 3.1-A item 13-d-1 Page 5 of 28 (TN 19-021)
Attachment 3.1-A Item 26 Page 1 (TN 19-019) Delete
Attachment 4.19-B Item 26 Page 1 (TN 19-019) Delete

9. SUBJECT OF AMENDMENT

Removal of Telehealth Language

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 State Medicaid Director is the Governor's designee

11. SIGNATURE OF STATE AGENCY OFFICIAL

[Redacted Signature]

12. TYPED NAME

MAUREEN M. CORCORAN

13. TITLE

STATE MEDICAID DIRECTOR

14. DATE SUBMITTED

September 2, 2022

15. RETURN TO

Greg Niehoff
Ohio Department of Medicaid
P.O. BOX 182709
Columbus, Ohio 43218

FOR CMS USE ONLY

16. DATE RECEIVED

September 2, 2022

17. DATE APPROVED

11/10/2022

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

July 1, 2022

19. SIGNATURE OF

[Redacted Signature]

20. TYPED NAME OF APPROVING OFFICIAL

Ruth A. Hughes

21. TITLE OF APPROVING OFFICIAL

Acting Director, Division of Program Operations

22. REMARKS

4. d. Tobacco cessation counseling services for pregnant women.

1) Tobacco cessation counseling services provided (by):

- (i) By or under supervision of a physician;
- (ii) By any other health care professional who is legally authorized to furnish such services under State law and who is authorized to provide Medicaid coverable services *other* than tobacco cessation services;* or
- (iii) Any other health care professional legally authorized to provide tobacco cessation services under State law *and* who is specifically *designated* by the Secretary in regulations. (None are designated at this time; this item is reserved for future use.)

*describe if there are any limits on who can provide these counseling services

2) Tobacco cessation counseling services benefit package for pregnant women

Provided: No limitations With limitations*

*Any benefit package that consists of less than four (4) counseling sessions per quit attempt, with a minimum of two (2) quit attempts per 12 month period (eight (8) per year) should be explained below.

Please describe any limitations:

13. Other diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan.

d. Rehabilitative services

1. Mental Health Rehabilitative services

Therapeutic Behavioral Services (TBS)

Therapeutic Behavioral Services are goal-directed supports and solution-focused interventions intended to achieve identified goals or objectives as set forth in the individual's treatment plan. Solution-focused interventions, emotional and behavioral management, and problem behavior analysis includes the implementation of interventions using evidence-based techniques, drawn from cognitive-behavioral therapy and/or other psychotherapeutic interventions that ameliorate targeted symptoms and/or recover the person's capacity to cope with or prevent symptom manifestation. The combination and intensity of services will be based on an individualized assessment of medical necessity for each beneficiary. TBS is an individual or group intervention with the individual, family/caregiver and/or other collateral supports. TBS can occur in a variety of settings including community locations where the beneficiary lives, works, attends school, engages in services (e.g., provider office sites) and/or socializes; or in an office. The intent of TBS is to restore an individual's functional level as possible and as necessary for integration of the individual as an active and productive member of their community and family with minimal ongoing professional intervention. Activities included must be intended to achieve the identified goals or objectives as set forth in the Medicaid-eligible individual's treatment plan. This includes consultation with a licensed practitioner to assist with the individual's needs and service planning for Medicaid behavioral health services, and referral and linkage to other Medicaid behavioral health services to avoid more restrictive levels of treatment.

Components include:

- A. Treatment Planning - Participating in and utilizing strengths-based treatments/planning which may include assisting the individual and family members or other collaterals with identifying strengths and needs, resources, natural supports and developing goals and objectives to utilize personal strengths, resources, and natural supports to address functional deficits associated with their mental illness. This only includes developing the treatment plan for the Medicaid behavioral health services provided to the individual;
- B. Identification of strategies or treatment options - Assisting the individual and family members or other collaterals to identify strategies or treatment options associated with the individual's mental illness, with the goal of minimizing the negative effects of mental illness symptoms or emotional disturbances or associated behavioral health stressors which interfere with the individual's daily living, financial management, housing, academic and/or employment progress, personal recovery or resilience, family and/or interpersonal relationships, and community integration;

13. Other diagnostic, screening, preventive, and rehabilitative services, i.e., other than those provided elsewhere in the plan.

d. Rehabilitative services

1. Mental Health Rehabilitative services

Registered nurses may perform any component to the extent they are operating under the scope of their license and performing nursing services. Nursing assessments and group medication education performed under component G must be performed by a registered nurse. Individuals providing services must have training in the general training requirements required by the State Medicaid agency, including cultural competence and trauma-informed care.

Supervisor qualifications:

Unlicensed TBS providers must receive regularly-scheduled clinical supervision when rendering TBS. Licensed TBS providers whose scope of practice requires supervision must also receive regularly-scheduled clinical supervision when rendering TBS. The following licensed practitioners may provide supervision to both unlicensed and licensed TBS providers as appropriate and when operating within their scope of practice: a medical doctor or doctor of osteopathic medicine, registered nurse, Master of Science in nursing, clinical nurse specialist, certified nurse practitioner, licensed independent social worker, licensed social worker, licensed professional counselor, licensed professional clinical counselor, licensed independent marriage and family therapist, licensed marriage and family therapist, Board-licensed school psychologist, or psychologist. Supervisors must also be aware of and sensitive to the cultural needs of the population of focus and how to best meet those needs, and be capable of training staff regarding these issues.

Psychosocial Rehabilitation (PSR)

PSR assists individuals with implementing interventions outlined in a treatment plan to compensate for or eliminate functional deficits and interpersonal and/or behavioral health barriers associated with an individual's behavioral health diagnosis. The combination and intensity of services will be based on an individualized assessment of medical necessity for each beneficiary. PSR is an intervention with the individual. PSR includes restoration, rehabilitation and support of daily functioning to improve self-management of the negative effects of psychiatric or emotional symptoms that interfere with a person's daily functioning. PSR supports the individual with restoration and implementation of daily functioning and daily routines critical to remaining successfully in home, school, work, and community. PSR includes rehabilitation and support to restore skills to function in a natural community environment.

Practitioner qualifications for PSR specialist:

Any of the activities above may be performed by a PSR specialist must be at least 18 years old and have a high school diploma with applicable experience in mental health. These practitioners also include Licensed Practical Nurses (LPNs) to the extent they are operating within the scope of their license. LPNs certified in the prior-approved Evidence-Based Practice of Assertive Community Treatment may also perform the PSR activities above. Individuals providing services must be trained in the general training requirements