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# State/Territory Name: Nebraska

# State Plan Amendment (SPA) #: 20-0002

This file contains the following documents in the order listed:

Approval Letter
CMS Form 179
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 3, 2020

Jeremy Brunsen, DHA, Interim Director Division of Medicaid and Long Term Care Nebraska Department of Health and Human Services 301 Centennial Mall South Lincoln, NE 68509

Dear Mr. Brunsen:

On March 31, 2020, the Centers for Medicare & Medicaid Services (CMS) received Nebraska's State Plan Amendment (SPA) transmittal #20-0002, which adds new Opioid Treatment Program services. The SPA amends the rehabilitative services benefit to add initial assessment, physical examination, ongoing assessment, therapy and treatment planning, care coordination, and medication administration services. The SPA also updates the provider qualifications for relevant services.

Based upon the information received, we are now ready to approve SPA #20-0002 as of October 30, 2020, with an effective date of January 1, 2020, as requested by the State.

Enclosed is a copy of the CMS-179 form, as well as the approved page for incorporation into the Nebraska State Plan.

If you have any questions regarding this amendment, please contact Michala Walker at (816) 426-5925 or Michala.walker@cms.hhs.gov.

Sincerely,

Digitally signed by James G. Scott -S Date: 2020.11.03 14:46:05 -06'00'

James G. Scott, Director Division of Program Operations

Enclosures

	FORM APPROVED OMB NO. 0938-0193	
1. TRANSMITTAL NUMBER:	2. STATE	
NE 20-0002	Nebraska	
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)		
4. PROPOSED EFFECTIVE DATE		
January 1, 2020		
CONSIDERED AS NEW PLAN	AMENDMENT	
	ch amendment)	
a. FFY 2020 \$6	594,068 968,355	
9. PAGE NUMBER OF THE SUPE OR ATTACHMENT (If Applicabl pages)	RSEDED PLAN SECTION	
Att. 4.19-B, Item 9, Page 1 "Att. 4	19-B, Item 13d, page 1t	
16. RETURN TO:		
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Director, Division of	f Program Operations	
	NE 20-0002     3. PROGRAM IDENTIFICATION: T     SOCIAL SECURITY ACT (MED)     4. PROPOSED EFFECTIVE DATE     January 1, 2020     CONSIDERED AS NEW PLAN     NDMENT (Separate Transmittal for ear     7. FEDERAL BUDGET IMPACT:     a. FFY 2020     b. FFY 2021     9. PAGE NUMBER OF THE SUPER     OR ATTACHMENT (If Applicable     pages)     Att. 4.19-B, Item 9, Page 1     *Att. 4.19-B, Item 9, Page 1 </td	

ATTACHMENT 3.1-A Item 13d, Page 10 Applies to both Categorically and Medically Needy

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

### State Nebraska

## LIMITATIONS - REHABILITATIVE SERVICES

## Opioid Treatment Program (OTP)

### **Service Description:**

- Initial assessment: Completion of an Adult Substance Use Assessment by a licensed clinician (described in Table A below) that indicates individual has an opioid use disorder of sufficient severity that this level of care is necessary. If a prior Substance Use Disorder (SUD) Assessment is determined to be clinically relevant and includes a current diagnosis, level of care recommendation, and a discharge plan, it can serve as the admission assessment. A substance use assessment can be conducted through use of any number of evidence-based screening and assessment tools approved by Substance Abuse and Mental Health Services Administration (SAMHSA).
- 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) within the first 24 hours of a person's admission to the program.
- Ongoing assessment services: A substance 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).
- Dispensing 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. This information is to be communicated to the licensed medical staff supervising the dispensing of any opioid replacement treatment medication. The prescribed drugs shall only be administered and dispensed by licensed professional authorized by law.
- 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. The treatment plan will include discharge criteria.
- Therapy services: Include therapy to address the symptoms of addiction and related impaired functioning. 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 in Table A below).
- Care coordination: Is a collaborative process that assesses, plans, implements,

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## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Nebraska

LIMITATIONS - REHABILITATIVE SERVICES

coordinates, and evaluates the options and services required to meet the client's needs and includes referrals to outside resources when the needed services are not offered by the OTP.

 Supervised withdrawal management from opioid analgesics including methadone and buprenorphine, as needed by an individual receiving services. Supervised withdrawal management includes at a minimum: dose tapering, and assessments of withdrawal symptoms using standardized scales.

**Provider Requirements:** Services must be rendered in an OTP that complies with applicable state laws and regulations, and that has been accredited by SAMHSA approved accreditation bodies and certified under 42 C.F.R. 8 (regarding the process and standards by which SAMHSA determines that an opioid treatment program is qualified to provide opioid treatment under the Federal opioid treatment standards).

**Provider Qualifications:** The program must be staffed as specified in the Federal regulations established for this service by the SAMHSA. All treatment facilities much have a program sponsor who is a qualified physician responsible to assuring adherence to all requirements and to ensuring all services identified and the required services are available. There must also be a medical director who assumes responsibility for administering all medical services performed by the OTP.

Title of Professional	Level of Education/ Degree /Experience Required	License or Certification Required	Supervision	Service Components Provided
Physician	Doctor of Medicine or Osteopathy	Licensed by NE Board of Medical Examiners.	None	Physical examination, prescribing and dispensing of
Physician Assistant (PA)	Successful completion of an approved program for the education of physician assistants.	Successful completion of the proficiency examination.	Physician	opioid agonists, medication administration, ordering and
Advance Practice	Master's or doctoral degree and national	APRN license as a Certified	Integrated Practice	interpreting tests including

#### Table A: Staff Qualifications for Opioid Treatment Program (OTP)

TN No. <u>NE 20-0002</u> Supersedes TN No. <u>New Page</u>

Approval Date <u>10/30/2020</u>

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### LIMITATIONS - REHABILITATIVE SERVICES

Title of Professional	Level of Education/ Degree /Experience Required	License or Certification Required	Supervision	Service Components Provided
Registered Nurse (APRN)	board certification to qualify for licensure.	Nurse Midwife, Certified Registered Nurse Anesthetist, Clinical Nurse Specialist, or Nurse Practitioner	Agreement (IPA) with physician	drug screenings and toxicology tests, supervised withdrawal management from opioid analgesics, health education, and treatment planning as a member of the interdisciplinary team.
Registered Nurse (RN)	Two to four years of education at a college or university and passed the NCLEX-RN in order to qualify for licensure.	Successful completion of the NCLEX-RN.		Nursing Assessment, medication administration, and treatment planning as a member of the interdisciplinary team.
Licensed Practical Nurse (LPN)	Licensure follows nine months to one year of education and successful completion of the National Council Licensure Examination Practical	Successful completion of the NCLEX-RN.		Medication administration, and treatment planning as a member of the interdisciplinary team.

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#### LIMITATIONS - REHABILITATIVE SERVICES

Title of Professional	Level of Education/ Degree /Experience Required	License or Certification Required	Supervision	Service Components Provided
Licensed Independent Mental Health Practitioner	Nurse (NCLEX-PN). Have a Master's or doctorate degree from an accredited educational program, successfully passed	Licensed by Nebraska Department of Health and Human		Substance Use Disorder Assessment, Initial Diagnostic
	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.	Services.		Interview for co-morbid mental illness, counseling and therapy services within the clinician's scope of practice, and treatment planning as a member of the interdisciplinary team.
Licensed Psychologist	Have a doctoral degree from a program of graduate study in professional Psychology; two years of supervised professional experience; one-year of postdoctoral experience.	Licensed by Nebraska Department of Health and Human Services.		*
Provisionally Licensed	Have a doctoral degree from a		Nebraska Licensed	

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Title of Professional	Level of Education/ Degree /Experience Required	License or Certification Required	Supervision	Service Components Provided
Psychologist	program of graduate study in professional Psychology; two years of supervised professional experience.		Psychologist	
Licensed Mental Health Practitioner	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.	Licensed by Nebraska Department of Health and Human Services.		
Provisionally Licensed Mental Health Practitioner	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.		Needs to obtain 3,000 hours of supervised experience in mental health practice in Nebraska. Must be supervised by a fully licensed	

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## LIMITATIONS - REHABILITATIVE SERVICES

Title of Professional	Level of Education/ Degree /Experience Required	License or Certification Required	Supervision	Service Components Provided
			practitioner.	
Licensed Drug and Alcohol Counselor	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.	Licensed by Nebraska Department of Health and Human Services.		
Provisionally Licensed Drug and Alcohol Counselor	High school diploma, 270 hours of coursework related to the knowledge and skills of alcohol and drug counseling, 300 hours of supervised practical training.		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.	

**Limitations:** Maintenance treatment admission exceptions: If clinically appropriate, the program physician may waive the requirement of a 1-year history of addiction, for:

• Patients released from penal institutions with a documented history of opioid use

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State Nebraska

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disorder (within 6 months after release); and

- Pregnant patients (program physician must certify pregnancy); and
- Previously treated patients (up to 2 years after discharge).

#### 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 community support services. The agency's Mental Health and Substance Use fee schedule rate for Peer Support will be set as of July 1, 2017 and is effective for services provided on or after that date. All rates are published on the agency's website at <u>http://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx</u>. 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.

#### OPIOD TREATMENT PROGRAM (OTP)

When services are reimbursed per a fee schedule, except as otherwise noted in the plan, statedeveloped 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 <u>http://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx</u>. From the landing page, scroll down to the fee schedule for the specific program and year.

TN # <u>NE 20-0002</u> Supersedes TN No. <u>NE 16-0009</u>

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