

**STATE OF RHODE ISLAND
EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES**

**2/26/21 PUBLIC NOTICE OF PROPOSED AMENDMENT TO RHODE ISLAND
MEDICAID STATE PLAN**

In accordance Rhode Island General Laws 42-35, notice is hereby given that the Executive Office of Health and Human Services (EOHHS) proposes to make the following amendment to the Rhode Island State Plan under Title XIX of the Social Security Act:

Medication-Assisted Treatment

Section 1006(b) of the SUPPORT Act requires states to begin implementing Medication-Assisted Treatment (MAT) as a mandatory Medicaid state plan benefit for categorically needy populations for the 5-year period beginning October 1, 2020. Under the definition of the new mandatory benefit at section 1905(ee)(1) of the Act, states are required to cover 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 (OUD). CMS interprets the statute to require coverage of all forms of the drugs and biologicals that the FDA has approved or licensed for treatment of OUD. States are also required to cover counseling services and behavioral therapies associated with provision of the required drug and biological coverage.

EOHHS is proposing to submit an amendment to the Medicaid State Plan to add MAT as a mandatory service, per CMS guidance. These services were already Medicaid-covered services in Rhode Island, so this SPA is strictly for documentation purposes and there will be no fiscal impact. The proposed effective date of this amendment is October 1, 2020.

This proposed amendment is accessible on the EOHHS website (www.eohhs.ri.gov) or available in hard copy upon request (401-462-6348 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by March 28, 2021 to Melody Lawrence, Executive Office of Health and Human Services, 3 West Rd, Cranston, RI, 02920, or Melody.Lawrence@ohhs.ri.gov.

In accordance with the Rhode Island General Laws 42-35-3, an oral hearing will be granted on the proposed State Plan Amendment if requested by twenty-five (25) persons, an agency, or by an association having at least twenty-five (25) members. A request for an oral hearing must be made within thirty (30) days of this notice.

The Executive Office of Health and Human Services does not discriminate against individuals based on race, color, national origin, sex, gender identity or expression, sexual orientation, religious belief, political belief, or handicap in acceptance for or provision of services or employment in its programs or activities.

Enclosure ____

Supplement to Attachment 3.1-A

Page ____

State of Rhode Island

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

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

1905(a)(29) _____MAT as described and limited in Supplement _____ to Attachment 3.1-A.

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

State of _____ Rhode Island _____

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.

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.
 1. The Opioid Treatment Program (OTP) contains the following component services:
 - Comprehensive Care Management
 - Care Coordination
 - Health Promotion
 - Support with transitions of care
 - Individual and Family Support
 - Substance use counseling

- Individual and group therapy
- Periodic assessments

2. The OTP Health Home has been designed to complement the direct services that members receive for their behavioral health and chronic medical conditions and include component services such as medication management, intensive outpatient therapy, and/or primary care/specialty care visits with their primary care or specialty medical care provider. The role of the OTP Health Home team is to ensure coordination among all providers and to address members’ unique needs, especially in times of crisis or high acuity and to facilitate smooth transitions of care for the member, the member’s family, with the member’s signed release of information and the members’ other supports.
3. OTP Center of Excellence: OTP COEs are an enhanced version of the OTP Health Home provider type that demonstrate additional clinical and administrative capacity and are eligible to receive additional state payments. If an OTP Health Home provider would like to be authorized to receive reimbursement for COE services, the OTP Health Home provider must submit an application to the state. The state assesses each application according to the COE certification standards. Within a 6-month period of stabilization on medication and in a treatment regimen, patients are transitioned to Drug Abuse Treatment Act (DATA)-waivered physicians in the community for continuing care, including medication management, with ongoing clinical and recovery support services provided by the COE as appropriate. The COE certification standards include requirements for providing technical assistance and training to community-based DATA-waivered physicians with the goal of expanding MAT into mainstream primary care settings, as well as expedited referrals to SUD treatment and access to ongoing treatment, recovery, and supports for primary care providers and their patients.

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

Practitioner	Service
Certified Advanced Alcohol and Drug Counselor (Masters level), Certified Alcohol and Drug Counselor, Provisional Alcohol and Drug Counselor who are licensed by the RI Board of Licensing for Chemical Dependency Professionals	Outpatient Therapy Substance Use counseling Behavioral Health counseling

<p>Within the OTP Health Home framework, three collaborative positions are shared across all participating programs to ensure consistency in implementation at each site and fidelity:</p> <ul style="list-style-type: none"> • Administrative Coordinator • Health Information Technology Coordinator • Training Coordinator 	<p>Support with care coordination</p>
<p>The COE staffing requirements, as described in the COE Certification Standards, include DATA-waivered physicians, nurses (registered nurse or licensed practical nurse), Master’s-level clinician (clinician to patient ratio not to exceed 1:100), pharmacist, and a combination of licensed chemical dependency professionals, case managers, and/or peer recovery coaches. Staffing per COE team and applicable services is as follows:</p>	
<ul style="list-style-type: none"> • Waivered physician 	<ul style="list-style-type: none"> • Medication Management Administration of Medication Prescribing
<ul style="list-style-type: none"> • Nurses (registered and/or licensed practical nurses) • Master’s-level clinician (ratio no greater than 1:100) 	<ul style="list-style-type: none"> • Assessment, initial and ongoing
<ul style="list-style-type: none"> • A proposed combination of licensed chemical dependency professionals, case managers, and/or peer recovery coaches. Applicants must discuss staffing in the proposal and address relevancy to anticipated population as well as staff to patient ratios. 	<ul style="list-style-type: none"> • Care coordination, case management, intensive outreach and engagement activities, Health Promotion, Support with transitions of care, Individual and Family Support
<ul style="list-style-type: none"> • COEs that are licensed OTPs also must include a pharmacist 	<ul style="list-style-type: none"> • Medication Monitoring

- 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.
1. OTPs must have:

- Current, valid certification from the Substance Abuse and Mental Health Services Administration (SAMHSA) and be accredited by an independent, SAMHSA-approved accrediting body
 - Register with the RI Department of Health
 - Register with the Drug Enforcement Administrations
 - Compliance with all applicable RI Behavioral Healthcare Regulations
2. Any organization that wishes to provide counseling services and behavioral health therapies as part of MAT must apply for a Behavioral Healthcare Service License for any of the following categories:
- General Outpatient Services
 - Case management services
 - Intensive outpatient services
 - Outpatient detoxification services
3. Within an organization no less than 50% of staff providing direct therapeutic substance use services shall
- Hold a RI license in a behavioral health clinical specialty with a certification in chemical dependency from a nationally recognized entity or;
 - Shall Be Licensed Chemical Dependency Professionals
 - The remaining 50% shall be actively engaged in the process of meeting the requirements and shall be supervised by a licensed professional

Enclosure ____

Supplement to Attachment 3.1-A

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State of Rhode Island

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

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.

v. Limitations

Describe the state's limitations on amount, duration, and scope of MAT drugs, biologicals, and counseling and behavioral therapies related to MAT.

There are no limitations.

State of ____ Rhode Island _____

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

- Medication-assisted treatment services, including the drug component, the provider component, and the behavioral health component, are reimbursed on a fee-for-service basis.
- The State will cover all forms of drugs and biologicals that the Food and Drug Administration has approved or licensed for MAT to treat opioid use disorder (OUD).
- Payment for unbundled prescribed drugs prescribed for the treatment of opioid-use disorder, if dispensed by a pharmacy, are reimbursed accordingly.
- Opioid Treatment Program (OTP) services are reimbursed on a fee-for-service basis.
- The State will cover all forms of drugs and biologicals that the Food and Drug Administration (FDA) has approved or licensed for MAT to treat opioid use disorder (OUD).
- Payment for unbundled OTP behavioral health services are reimbursed on a fee for service basis.

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.