State of Minnesota

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

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

1905(a)(29) ___X___MAT as described and limited in Supplement __7__ to Attachment 3.1-A.

ATTACHMENT 3.1-A identifies the medical and remedial services provided to the categorically needy.
1905(a)(29) Medication-Assisted Treatment (MAT)

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
   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.

   a. The state covers the following counseling services and behavioral health therapies as part of MAT.

      Individual and Group Therapy
This service assists the beneficiary with achieving the goals developed in an individual opioid use disorder treatment plan and with the establishment of an individual recovery plan by identifying problems and implementing strategies to address, minimize, or reduce the inappropriate use and effects of chemicals through a combination of skills therapy, counseling, and service coordination. Therapy may also include consultation with relatives, guardians, close friends, and other treatment providers. Participation of non-Medicaid eligible persons 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 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.

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

b. The following practitioners are qualified to provide this service within their scope of practice:

x Licensed alcohol and drug counselors; x counselor supervisors of licensed alcohol and drug counselors; x licensed social workers x licensed marriage and family therapists; and x licensed professional counselors.

c. The following is a brief summary of qualifications for each practitioner identified above:

Counselor supervisors of licensed alcohol and drug counselors must have three years of work experience as a licensed alcohol and drug counselor. Licensed professional counselors must have a master’s degree which included 120 hours of a specified course of study in addition studies with 440 hours of post-degree supervised experience in the provision of alcohol and drug counseling.

Counseling and behavioral health therapies delivered as part of medication assisted treatment services are provided according to an individual recipient’s treatment plan by an entity licensed by the Minnesota Department of Human Services to provide substance use disorder services or by a licensed professional in private practice.
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. 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 on the amount, duration, or scope of MAT counseling and behavioral therapies. Oral buprenorphine is subject to quantity limits, and certain products and brands are included on the state’s Preferred Drug List. Injectable and implantable buprenorphine are covered through the medical benefit with prior authorization.
**1905(a)(29) Medication-Assisted Treatment (MAT)**

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

1905(a)(29) ___X__MAT as described and limited in Supplement __7__ to Attachment 3.1-A.

ATTACHMENT 3.1-B identifies the medical and remedial services provided to the medically needy.
1905(a)(29) Medication-Assisted Treatment (MAT)

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
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.

a. The state covers the following counseling services and behavioral health therapies as part of MAT.

Individual and Group Therapy
This service assists the beneficiary with achieving the goals developed in an individual opioid use disorder treatment plan with the establishment of an individual recovery plan by identifying problems and implementing strategies to address, minimize, or reduce the inappropriate use and effects of chemicals through a combination of skills therapy, counseling, and service coordination. Therapy may also include consultation with relatives, guardians, close friends, and other treatment providers. Participation of non-Medicaid eligible persons 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 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.
1905(a)(29) Medication-Assisted Treatment (MAT) (continued)

b. The following practitioners are qualified to provide this service within their scope of practice:

- Licensed alcohol and drug counselors;
- Counselor supervisors of licensed alcohol and drug counselors;
- Licensed social workers;
- Licensed marriage and family therapists; and
- Licensed professional counselors.

c. The following is a brief summary of qualifications for each practitioner identified above:

Counselor supervisors of licensed alcohol and drug counselors must have three years of work experience as a licensed alcohol and drug counselor. Licensed professional counselors must have a master’s degree which included 120 hours of a specified course of study in addition studies with 440 hours of post-degree supervised experience in the provision of alcohol and drug counseling.

Counseling and behavioral health therapies delivered as part of medication assisted treatment services are provided according to an individual recipient’s treatment plan by an entity licensed by the Minnesota Department of Human Services to provide substance use disorder services or by a licensed professional in private practice.
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. **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 on the amount, duration, or scope of MAT counseling and behavioral therapies. Oral buprenorphine is subject to quantity limits, and certain products and brands are included on the state’s Preferred Drug List. Injectable and implantable buprenorphine are covered through the medical benefit with prior authorization.
Supplement 3 to Attachment 4.19-B
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1905(a)(29) Medication-Assisted Treatment (MAT)

Payment methods and rates for MAT services provided in opiate treatment programs, licensed substance use disorder treatment programs, or by licensed professionals in private practice are authorized under the Rehabilitative Services (§ 13d.) benefit in Attachment 4.19-B of the state plan. All enrolled SUD treatment providers are reimbursed as described in this attachment. IHS and Tribal 638 facilities are reimbursed in accordance with Supplement 2 in this attachment.

Reimbursement for unbundled MAT prescribed drugs and biologicals used to treat opioid use disorder will be reimbursed using the same methodology as described for prescribed drugs in Attachment 4.19-B, Item 12a., pages 37 through 37(d), for prescribed drugs that are dispensed or administered