

Enclosure ____

Supplement 2 to Attachment 3.1-A

Page 1

State of Nevada

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 2 to Attachment 3.1-A.

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

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(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.

As per Section 1905(a)(29) of the Act, beginning October 1, 2020, Medication-assisted treatment (MAT) services are covered as a mandatory benefit for adults and children who meet the medical necessity criteria for receipt of services. Services may require prior authorization by the DHCFP or its designated fiscal agent.

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).

Medication-assisted treatment Services (MAT) is an evidence-based practice using methadone, naltrexone, buprenorphine, and all other forms of MAT 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) for the treatment of OUD. With respect to the provision of such drugs and biological products, MAT also includes the provision of counseling and behavioral therapy.

Eligible Providers:

(1) Office-Based Opioid Treatment (OBOT) provider:

(a) physician contracted with the State to provide MAT services in OBOT settings, who are licensed and in good standing in the State, maintain a federal waiver to dispense and administer narcotics, and maintain state registration to dispense dangerous drugs; or

(b) a physician's assistant (PA), advanced practice registered nurse (APRN), or nurse midwife contracted with the State to provide MAT services, licensed and in good standing, and supervised as required by law.

OBOT providers must have capacity to provide directly or by referral all drugs approved by the Food and Drug Administration for the treatment of opioid use disorder, including

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for maintenance, overdose reversal, and relapse prevention. OBOT providers must have capacity to provide directly or by referral appropriate counseling and behavioral therapy. OBOT providers are limited to the drugs allowed by law to be prescribed and/or administered in a setting that is not an Opioid Treatment Program.

(2) Opioid Treatment Program (OTP):

- Licensed as an OTP by the Substance Abuse and Mental Health Services Administration (SAMHSA)
- Registered by the Drug Enforcement Agency (DEA)
- Licensed by the Nevada State Board of Pharmacy
- National Accreditation from a SAMHSA approved body such as Joint Commission or CARF
- Certified as an OTP by the Division of Public and Behavioral Health, Substance Abuse Prevention and Treatment Agency (SAPTA)

OTPs are engaged in the opioid treatment of individuals by use of an opioid agonist treatment medication, including methadone, and contracted with the State. An OTP must have the capacity to provide the full range of services included in the definition of MAT and must document both medication dosing and supporting behavioral health services.

(a) OTP MAT Provider - a licensed physician in good standing, maintaining a current federal waiver to prescribe drugs and biological products for the treatment of opioid-use disorder, and maintaining a current State registration to dispense dangerous medications; or

(b) OTP Exempt MAT Provider - (PA), Advanced Practice Registered Nurse (APRN), or Nurse Midwife in good standing A licensed Physician Assistant supervised, when required, by a physician described in (2)(a) above, and exempt from federal regulatory requirements for OTPs.

(c) OTP Behavioral Health Services Providers - professionals that meet the qualifications in Attachment 3.1-A, Page 6a.1-6a.7 and who provide the services noted within the same referenced page.

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The following services are excluded from coverage:

1. Components that are not provided to or exclusively for the treatment of the eligible individual;
2. Services or components of services of which the basic nature is to supplant housekeeping or basic services for the convenience of a person receiving covered services;
3. Room and board;
4. Telephone calls or other electronic contacts, not inclusive of telehealth; and
5. Field trips or social or physical exercise activity groups.

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.

Please refer to Opioid Treatment Program listed above.

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

Individual Provider Qualifications
Medication Assisted Treatment Services, Behavioral Health Components

Service	Service State Plan Page	Provider	Provider Qualifications
Alcohol and Drug Assessment or Behavioral Assessment	Attachment 3.1-A Page 6b.1	<ul style="list-style-type: none"> •Licensed Clinical Alcohol and Drug Counselor (LCADC) •Licensed Alcohol and Drug Counselor (LADC) •Certified Alcohol and Drug Counselor (CADC) 	Attachment 3.1-A Page 6a.1-6a.7

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		<ul style="list-style-type: none"> •Qualified Mental Health Professional (QMHP) 	
Alcohol and/or Substance use Treatment Plan Development	Attachment 3.1-A Page 6b	<ul style="list-style-type: none"> •Licensed Clinical Alcohol and Drug Counselor (LCADC) •Licensed Alcohol and Drug Counselor (LADC) •Certified Alcohol and Drug Counselor (CADC) •Qualified Mental Health Professional (QMHP) 	Attachment 3.1-A Page 6a.1-6a.7
Individual, group, and or family therapy	Attachment 3.1-A Page 6b.3	<ul style="list-style-type: none"> •Licensed Clinical Alcohol and Drug Counselor (LCADC) •Licensed Alcohol and Drug Counselor (LADC) •Certified Alcohol and Drug Counselor (CADC) •Qualified Mental Health Professional (QMHP) 	Attachment 3.1-A Page 6a.1-6a.7
Peer Support Services	Attachment 3.1-A Page 6b.4	<ul style="list-style-type: none"> •Qualified Mental Health Professional (QMHP) Qualified Behavioral Aid (QBA) 	Attachment 3.1-A Page 6a.1-6a.7
Crisis Intervention	Attachment 3.1-A Page 6b.2	<ul style="list-style-type: none"> •Licensed Clinical Alcohol and Drug Counselor (LCADC) •Licensed Alcohol and Drug Counselor (LADC) 	Attachment 3.1-A Page 6a.1-6a.7

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		<ul style="list-style-type: none"> •Certified Alcohol and Drug Counselor (CADC) •Qualified Mental Health Professional (QMHP) 	
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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.

Individual Provider Qualifications

Medication Assisted Treatment Services, Medical and Drug Components

Type of Services	Individual Provider Type	Qualifications
Medication-Assisted Treatment (MAT), office based opioid treatment (OBOT), drug dispensing and administration (excluding methadone)	<ul style="list-style-type: none"> • Physician • Advanced Practice Registered Nurse (APRN) • Physician’s Assistant (PA) • Nurse Midwife 	<ol style="list-style-type: none"> 1. Licensed physician in good standing with a current federal waiver to dispense narcotic drugs for narcotic treatment (as per 21 USC 823(g)(2)) and current registration or exemption to dispense dangerous drugs 2. Licensed PA in good standing supervised, when required, by a physician described in (1) above. 3. Licensed APRN in good standing with a current federal waiver to dispense as described in (1) above. 4. License (APRN) authorizing the practice in a role as Nurse Midwife

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		in good standing with a current federal waiver to dispense as described in (1) above.
Medication-Assisted Treatment (MAT), Opioid Treatment Program (OTP), drug dispensing and administration	<ul style="list-style-type: none"> • Physician • Advanced Practice Registered Nurse (APRN) • Physician’s Assistant (PA) • Nurse Midwife 	<ol style="list-style-type: none"> 1. Licensed physician in good standing with a current federal waiver to dispense narcotic drugs for narcotic treatment (as per 21 USC 823(g)(2)) and current registration or exemption to dispense dangerous drugs 2. Licensed PA in good standing supervised, when required, by a physician described in (1) above. 3. Licensed APRN in good standing with a current federal waiver to dispense as described in (1) above. 4. License (APRN) authorizing the practice in a role as Nurse Midwife in good standing with a current federal waiver to dispense as described in (1) above.

Rates for the listed providers and services above are contained within Attachment 4.19B

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**

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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 on the amount, duration or scope of MAT drugs or biologicals.

Utilization management for MAT services with the behavioral health component must include on-going patient assessments, including intensity of needs determinations using ASAM, to evaluate patient’s response to treatment interventions and to monitor progress toward treatment plan goals. On-going patient assessments must be completed at regularly scheduled intervals and whenever clinically indicated. Patient assessments must document the individual patients response to the treatment plan, progress towards goals, changes in identified goals and objectives based on progress and substantiate continued stay at the current intensity/frequency of services, or of response to the treatment plan and resolution of issues necessitates transfer to a higher or lower intensity/frequency of services or discharge from treatment as no longer meeting medical necessity at any level. Transfer and discharge planning must reflect best practices recognized by professional and advocacy organizations that ensure coordination of needed services, follow-up care and recovery supports.

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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.

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