

State of Nebraska

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

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

1905(a)(29) Medication-Assisted Treatment (MAT) as described and limited in Supplement 5 to Attachment 3.1-A.

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

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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.

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

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.

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.

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Nebraska covers the following services to address the symptoms of addiction and related impaired functioning as part of medication-assisted treatment:

- Initial assessment: Completion of an Adult Opioid Use Disorder Assessment by a licensed clinician (described below) that indicates individual has an opioid use disorder of sufficient severity that this level of care is necessary.
- 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).
- Ongoing assessment services: A opioid 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).
- Prescribing 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.
- 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.
- Therapy services: Include therapy to address the symptoms of addiction and related impaired functioning. Covered therapy services include: individual therapy, group therapy, and family therapy. Family Therapy service that involves the participation of a non-Medicaid eligible 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

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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. 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 below).

- Care coordination: Is a collaborative process that assesses, plans, implements, coordinates, and evaluates the options and services required to meet the client's needs and includes referrals to appropriate outside resources when the needed services are not provided by the OTP.
- Sustained Recovery: Non-residential, outpatient sustained recovery from opioid analgesics including methadone and buprenorphine, as needed by the individual receiving services. Sustained recovery services include supervision of dosing and administration of MAT, toxicology result interpretation and counseling.

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

- The following practitioners conduct physical examinations:
 - Physician
 - Physician assistants (PAs)
 - Advance practice registered nurses (APRNs)
- The following practitioners conduct initial assessments:
 - Licensed Independent Mental Health Practitioner (LIMHP)
 - Licensed Psychologists
 - Provisionally licensed Psychologists
 - Licensed Mental Health Practitioners
 - Provisionally licensed Mental Health Practitioners
 - Licensed Drug and Alcohol Counselors (LDAC)
 - Provisionally licensed Drug and Alcohol Counselors (under the supervision of a fully licensed therapist)
- The following practitioners conduct ongoing assessments:
 - LIMHP
 - Licensed Psychologists
 - Provisionally licensed Psychologists
 - Licensed Mental Health Practitioners

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- Provisionally licensed Mental Health Practitioners
- LDAC
- Provisionally licensed Drug and Alcohol Counselors (under the supervision of a fully licensed therapist)

- The following practitioners prescribe and / or administer opioid agonist medication:
 - Physicians (prescribe and administer opioid agonist medication)
 - PAs (prescribe and administer opioid agonist medication)
 - APRNs (prescribe and administer opioid agonist medication)
 - Registered nurses (RNs) (administer opioid agonist medication under the supervision of a physician)
 - Licensed Practical Nurses (LPNs) (administer opioid agonist medication under the supervision of a physician)

- The following practitioners are involved in treatment planning:
 - Physicians
 - PAs
 - APRNs
 - RNs
 - LPNs
 - LIMHP
 - Licensed Psychologists
 - Provisionally licensed Psychologists
 - Licensed Mental Health Practitioners
 - Provisionally licensed Mental Health Practitioners
 - LDAC
 - Provisionally licensed Drug and Alcohol Counselors

- The following practitioners provide therapy services:
 - LIMHP
 - Licensed Psychologists
 - Provisionally licensed Psychologists
 - Licensed Mental Health Practitioners
 - Provisionally licensed Mental Health Practitioners
 - LDAC
 - Provisionally licensed Drug and Alcohol Counselors

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- The following practitioners are involved in care coordination:
 - Physicians
 - PAs
 - APRNs
 - RNs
 - LPNs
 - LIMHP
 - Licensed Psychologists
 - Provisionally licensed Psychologists
 - Licensed Mental Health Practitioners
 - Provisionally licensed Mental Health Practitioners
 - LDAC
 - Provisionally licensed Drug and Alcohol Counselors

- The following practitioners provide sustained recovery services:
 - Physicians
 - PAs
 - APRNs
 - LIMHPs
 - Licensed Psychologists
 - Provisionally licensed Psychologists
 - Licensed Mental Health Practitioners
 - Provisionally licensed Mental Health Practitioners
 - LDACs
 - Provisionally licensed Drug and Alcohol Counselors

Opioid Treatment Programs (OTPs) provide all services listed above.

- 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.

See Table A below for the qualifications for each practitioner.

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OTPs must:

- Comply with applicable state laws and regulations;
- Be accredited by SAMHSA-approved accreditation bodies;
- Be certified under 42 C.F.R. Part 8;
- Be licensed by DHHS Division of Public Health; and
- Be an active enrolled provider with Nebraska Medicaid.

OTPs must be staffed as specified in the Federal regulations established for MAT by SAMHSA and must have a program sponsor who is a qualified physician responsible for assuring adherence to all requirements and ensuring all services identified and the required services are available. OTPs must also have a medical director who assumes responsibility for administering all medical services performed by the OTP.

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

| Title of Professional | Level of Education/ Degree /Experience Required | License or Certification Required | Supervision | Applicable Service Components Provided |
|--|--|---|--|--|
| Physician | Doctor of Medicine or Osteopathy | Licensed by NE Board of Medical Examiners. | None | Physical examination, prescribing of opioid agonists, medication administration, sustained recovery from opioid |
| Physician Assistant (PA) | Successful completion of an approved program for the education of physician assistants. | Successful completion of the proficiency examination. | Physician | |
| Advance Practice Registered Nurse (APRN) | Master's or doctoral degree and national board certification to qualify for licensure. | APRN license as a Certified Nurse Midwife, Certified Registered Nurse Anesthetist, Clinical Nurse Specialist, or Nurse Practitioner | Integrated Practice Agreement (IPA) with physician | analgesics, care coordination, 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 National Council Licensure Examination Registered Nurse (NCLEX-RN) in order to qualify for licensure. | Successful completion of the NCLEX-RN. | | Medication administration (under supervision of a physician), care coordination, and treatment planning as a member of the interdisciplinary team. |

| Title of Professional | Level of Education/ Degree /Experience Required | License or Certification Required | Supervision | Applicable Service Components Provided |
|---|---|--|--------------------|--|
| Licensed Practical Nurse (LPN) | Licensure follows nine months to one year of education and successful completion of the National Council Licensure Examination Practical Nurse (NCLEX-PN). | Successful completion of the NCLEX-PN. | | Medication administration (under supervision of a physician), care coordination, and treatment planning as a member of the interdisciplinary team. |
| Licensed Independent Mental Health Practitioner | Have a Master's or doctorate degree from an accredited educational program, successfully passed 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. | Licensed by Nebraska Department of Health and Human Services | | Initial assessment and ongoing assessment services, therapy services (individual, group and family) within the clinician's scope of practice, care coordination, sustained recovery, 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 | Licensed by Nebraska Department of | | |

| Title of Professional | Level of Education/ Degree /Experience Required | License or Certification Required | Supervision | Applicable Service Components Provided |
|---|---|--|---|--|
| | of supervised professional experience; one-year of postdoctoral experience | Health and Human Services | | |
| Provisionally Licensed Psychologist | Have a doctoral degree from a program of graduate study in professional Psychology; two years of supervised professional experience | | Nebraska Licensed 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 | | Needs to obtain 3,000 hours of supervised experience in mental health practice in Nebraska. | |

| Title of Professional | Level of Education/ Degree /Experience Required | License or Certification Required | Supervision | Applicable Service Components Provided |
|---|--|--|--|--|
| | defined in licensure requirements, and included a practicum or internship. | | Must be supervised by a fully licensed 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 | |

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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.

None

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.