

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Regional Operations Group – Region VI
1301 Young Street, Room 833
Dallas, Texas 75202



Regional Operations Group, Division of Medicaid Field Operations South

17 May, 2019

Reference: **SPA – LA 19-0002**
(Behavioral Health Services – Substance Use Disorders Services)

Ms. Jen Steele
Medicaid Director
LA Department of Health and Hospitals
628 North 4th Street, P.O. Box 91030
Baton Rouge, Louisiana 70821-9030

Dear Ms Kennedy:

This is to acknowledge receipt of State's letters dated 15 May, 2019, stating the Withdrawal of State Plan Transmittals No.19-0002. This action is reflected on the enclosed CMS 179. For your convenience, we are enclosing copies of the material withdrawn.

If you have any questions, please call Cheryl Rupley at 214-767-6278 or Tobias Griffin at 214-767-4425.

Sincerely,

A handwritten signature in black ink that reads "Mafsha Marks". The signature is written in a cursive, flowing style.

Mafsha Marks, Health Insurance Specialist
Centers for Medicare & Medicaid Services
Division of Medicaid and Child Health

Enclosures:
State's Letter Dated 5/15/19
Copies of Withdrawn Page

John Bel Edwards
GOVERNOR



Rebekah E. Gee MD, MPH
SECRETARY

State of Louisiana
Louisiana Department of Health
Bureau of Health Services Financing

VIA ELECTRONIC MAIL ONLY

May 14, 2019

Bill Brooks
Associate Regional Administrator
Division of Medicaid & Children's Health
DHHS/Centers for Medicare and Medicaid Services
1301 Young Street, Room #833
Dallas, Texas 75202

Dear Mr. Brooks:

**RE: Louisiana Title XIX State Plan
Transmittal No. 19-0002 Behavioral Health Services - Substance Use Disorders
Services**

Please refer to the above proposed amendment submitted under transmittal number (TN) 19-0002 with an effective date of March 20, 2019. The SPA proposed to amend the provisions governing substance use disorders services in order to permit managed care organizations (MCOs) to provide opioid use disorder/substance use disorder services to Medicaid recipients in an institution for mental disease (IMD) without regard to the monthly MCO length of stay limit for these residential treatment services in an IMD setting.

The State's authority to provide substance use disorders services in IMDs lies in the Section 1115 Demonstration Waiver; therefore, the Department no longer wishes to pursue this State Plan amendment and requests that LA SPA TN 19-0002 be withdrawn from consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Jen Steele".

Jen Steele
Medicaid Director

JS/KHB/RJ



State of Louisiana
Louisiana Department of Health
Office of the Secretary

VIA ELECTRONIC MAIL ONLY

March 29, 2019

Bill Brooks
Associate Regional Administrator
Division of Medicaid & Children's Health
DHHS/Centers for Medicare and Medicaid Services
1301 Young Street, Room #833
Dallas, Texas 75202

RE: Louisiana Title XIX State Plan
Transmittal No. 19-0002

Dear Mr. Brooks:

I have reviewed and approved the enclosed Louisiana Title XIX State Plan material.

I recommend this material for adoption and inclusion in the body of the State Plan.
Should you have any questions or concerns regarding this matter, please contact Karen
Barnes at (225) 342-3881 or via email at Karen.Barnes@la.gov.

Warmly,

Cerdy Rice for

Rebekah E. Gee MD, MPH
Secretary

Withdrawn per State's Letter
Dated 5/15/2019

Attachments (2)

REG:JS:RJ

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 19-0002	2. STATE Louisiana
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)		

TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE March 20, 2019
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5. TYPE OF PLAN MATERIAL (Check One)

NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION 42 CFR 440.60 42 CFR 440.130(d) 42 CFR 447.304	7. FEDERAL BUDGET IMPACT a. FFY 2019 \$0.00 b. FFY 2020 \$0.00
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Withdrawn per State's Letter
Dated 5/15/2019

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-A, Item 13d, Pages 5, 5a, 9, 11 – 11a Attachment 3.1-A, Item 13d, Page 11b	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Same (TN 18-0024) None (new page)
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10. SUBJECT OF AMENDMENT **The purpose of this SPA is to amend the provisions governing substance use disorders services in order to permit managed care organizations (MCOs) to provide opioid use disorder/substance use disorder services to Medicaid recipients in an institution for mental disease (IMD) without regard to the monthly MCO length of stay limit for these residential treatment services in an IMD setting.**

11. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED The Governor does not review State Plan material.
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL 13. TYPED NAME Rebekah E. Gee MD, MPH 14. TITLE Secretary 15. DATE SUBMITTED March 29, 2019	16. RETURN TO Jen Steele, Medicaid Director State of Louisiana Department of Health 628 North 4th Street P.O. Box 91030 Baton Rouge, LA 70821-9030
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FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED	18. DATE APPROVED
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL	20. SIGNATURE OF REGIONAL OFFICIAL
21. TYPED NAME	22. TITLE
23. REMARKS	

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

CITATION
42 CFR 440.130(d)

Rehabilitation Services

Substance Use Disorder Services

The Medicaid program provides coverage under the Medicaid State Plan for substance use disorders (SUD) services rendered to children and adults. SUD services rendered shall be those services which are medically necessary to reduce the disability resulting from the illness and to restore the individual to his/her best possible level of functioning in the community. Children and adults who meet Medicaid eligibility and clinical criteria shall qualify to receive medically necessary SUD services. Qualifying children and adults with an identified SUD diagnosis shall be eligible to receive SUD services.

American Society of Addiction Medicine (ASAM) levels of care require reviews on an ongoing basis, as deemed necessary by the Department, to document compliance with national standards.

Services provided to children and youth must include communication and coordination with the family and/or legal guardian and custodial agency for children in state custody provided that written consent is obtained from the minor. Coordination with other child-serving systems should occur as needed to achieve the treatment goals subject to the minor's consent and applicable privacy laws. All coordination and consent must be documented in the child's medical record.

These services include a continuum of individually centered outpatient, intensive outpatient and residential services consistent with the individual's assessed treatment needs. The rehabilitation and recovery focus is designed to promote skills for coping with and managing substance use symptoms and behaviors. Services should address an individual's major lifestyle, attitudinal and behavioral problems that have the potential to undermine the goals of treatment.

Withdrawn per State's Letter
Date 5/15/2019

TN _____ Approval Date _____ Effective Date _____
Supersedes
TN _____

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

Children and youth who are in need of SUD services shall be served within the context of the family and not as an isolated unit.

Services shall be:

- a. delivered in a culturally and linguistically competent manner;
- b. respectful of the individual receiving services;
- c. appropriate to individuals of diverse racial, ethnic, religious, sexual, and gender identities, and other cultural and linguistic groups; and
- d. appropriate for age, development, and education.

Evidence-based practices require prior approval and fidelity reviews on an ongoing basis as determined necessary by the Department.

Withdrawn per State's Letter
Date 5/15/2019

TN _____ Approval Date _____ Effective Date _____
Supersedes
TN _____

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

CITATION **Rehabilitation Services**

42 CFR 440.130(d)

This level provides care to patients whose withdrawal signs and symptoms are sufficiently severe to require 24-hour inpatient care. It may overlap with Level IV-D services (as a “step-down” service) in a specialty unit of an acute care general or psychiatric hospital. Twenty-four hour observation, monitoring and treatment are available.

Limitations:

These SUD services are provided as part of a comprehensive specialized psychiatric program available to all Medicaid eligible individuals with significant functional impairments resulting from an identified addiction diagnosis. Services must be medically necessary and must be recommended by a licensed mental health practitioner or physician, who is acting within the scope of his/her professional license and applicable state law, to promote the maximum reduction of symptoms and/or restoration of an individual to his/her best age-appropriate functional level according to an individualized treatment plan.

The activities included in the service must be intended to achieve identified treatment plan goals or objectives. The treatment plan should be developed in a person-centered manner with the active participation of the individual, family and providers and be based on the individual’s condition and the standards of practice for the provision of rehabilitative services. The treatment plan should identify the medical or remedial services intended to reduce the identified condition as well as the anticipated outcomes of the individual. The treatment plan must specify the frequency, amount and duration of services. The treatment plan must be signed by the licensed mental health practitioner or physician responsible for developing the plan with the participant (or authorized representative) also signing to note concurrence with the treatment plan.

The plan will specify a timeline for re-evaluation of the plan that is at least an annual redetermination. The reevaluation should involve the individual, family and providers and include a reevaluation of plan to determine whether services have contributed to meeting the stated goals. A new treatment plan should be developed if there is no measureable reduction of disability or restoration of functional level. The new plan should identify different rehabilitation strategies with revised goals and services..

Withdrawn per State's Letter
Date 5/15/2019

TN _____ Approval Date _____ Effective Date _____

Supersedes

TN _____

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

CITATION
42 CFR 440.130(d)

Rehabilitation Services

A QPS includes the following professionals who are currently registered with their respective Louisiana board:

1. licensed psychologists;
2. licensed clinical social workers;
3. licensed professional counselors;
4. licensed addiction counselors;
5. licensed physicians; and
6. advanced practice registered nurses.

The following professionals may obtain QPS credentials:

1. a masters-prepared individual who is registered with the appropriate state board and under the supervision of a licensed psychologist;
2. licensed professional counselor (LPC); and
3. licensed clinical social worker (LCSW).

The QPS can provide clinical/administrative oversight and supervision of staff.

Withdrawn per State's Letter
Date 5/15/2019

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Supersedes
TN _____

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

Addiction Services include an array of individual-centered outpatient, intensive outpatient, residential, and inpatient services consistent with the individual's assessed treatment needs, with a rehabilitation and recovery focus designed to promote skills for coping with and managing substance use symptoms and behaviors.

Master's Prepared Behavioral Health Professional:

1. A master's-prepared behavioral health professional that has not obtained full licensure privileges and is participating in ongoing professional supervision.
2. When working in addiction treatment settings, the master's-prepared unlicensed professional (UP) must be supervised by a Licensed Mental Health Professional (LMHP).

Services

1. Alcohol and/or drug assessment;
2. Alcohol and/or drug services – Individual Session;
3. Alcohol and/or drug services - Group Session; and
4. Alcohol and/or drug services - Family Counseling.

Withdrawn per State's Letter
Date 5/15/2019

Certified Addiction Counselor (CAC)

1. Possesses a bachelor's degree from an accredited institution of higher education. The degree shall be in a human services or behavioral science discipline, or such other discipline or disciplines as the department may deem appropriate;
2. Has met all of requirements of Louisiana Addictive Disorders Regulatory Authority (ADRA); and
3. Has demonstrated professional competence by passing a written and oral exam and conducting a case presentation.

CAC Service Provision

1. Alcohol and/or drug assessment;
2. Alcohol and/or drug services – Individual Session;
3. Alcohol and/or drug services - Group Session; and
4. Alcohol and/or drug services - Family Counseling

STATE OF LOUISIANA

AMOUNT DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED
LIMITATIONS ON THE AMOUNT, DURATION AND SCOPE OF CERTAIN ITEMS OF PROVIDED
MEDICAL AND REMEDIAL CARE AND SERVICES ARE DESCRIBED BELOW:

Registered Addiction Counselor (RAC)

1. Has met all of requirements of Louisiana Addictive Disorders Regulatory Authority (ADRA); and
2. Has demonstrated professional competence by passing a written and oral exam and conducting a case presentation.

RAC Service Provision

1. Alcohol and/or drug Assessment;
2. Alcohol and/or drug services – Individual Session;
3. Alcohol and/or drug services - Group Session; and
4. Alcohol and/or drug services - Family Counseling

Residential treatment facilities shall:

1. Be a licensed organization, pursuant to the residential service provider qualifications described in the *Louisiana Administrative Code* and the Louisiana Medicaid provider manual.
2. Be accredited by an approved accrediting body and maintain such accreditation. Denial, loss of or any negative change in accreditation status must be reported to the MCO in writing within the time limit established by the Department.
3. Provide full disclosure of ownership and control, including but not limited to any relative contractual agreements, partnerships, etc.
4. Follow all residential treatment provider qualifications and program standards in licensure, Medicaid provider manual, managed care contracts or credentialing.
5. Deliver care consistent with the specifications in the ASAM Criteria or other OBH approved, nationally recognized SUD program standards, hours of clinical care, and credentials of staff for residential treatment settings.
6. Offer medication-assisted treatment (MAT) on-site or facilitate access to MAT off-site, and appropriately document MAT options, education and facilitation efforts in accordance with requirements outlined in the Medicaid provider manual, effective April 1, 2019.

Withdrawn per State's Letter
Date 5/15/2019