



**State of Louisiana**  
Louisiana Department of Health  
Office of the Secretary

**VIA ELECTRONIC MAIL ONLY**

March 31, 2021

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. 21-0002

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](mailto:Karen.Barnes@la.gov).


Sincerely,

A handwritten signature in cursive script, appearing to read "Courtney N. Phillips", written over a horizontal line.

\_\_\_\_\_, for  
Dr. Courtney N. Phillips  
Secretary

Attachments (2)

CNP:TAL:KDS

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>		1. TRANSMITTAL NUMBER <b>21-0002</b>	2. STATE <b>Louisiana</b>
		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 <b>October 1, 2020</b>	
5. TYPE OF PLAN MATERIAL (Check One) <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION  <b>Section 1006(b) of the SUPPORT Act Social Security Act 1905(a)(29)</b>		7. FEDERAL BUDGET IMPACT  a. FFY <b>2021</b> \$ <b>0</b> b. FFY <b>2022</b> \$ <b>0</b>	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  <b>Supplement 4 to Attachment 3.1-A, Pages 1-7 Attachment 4.19-B, Item 29, Page 1</b>		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  <b>None – new pages None – new page</b>	
10. SUBJECT OF AMENDMENT <b>The purpose of this SPA is to comply with Section 1006(b) of the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act and State Health Official (SHO) Letter #20-005, by continuing access to medication-assisted treatment (MAT) for opioid use disorders (OUD) through Medicaid coverage of certain drugs and biological products and related counseling services and behavioral therapy.</b>			
11. GOVERNOR'S REVIEW (Check One) <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input checked="" type="checkbox"/> OTHER, AS SPECIFIED <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED      The Governor does not review State Plan material. <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL 		16. RETURN TO  <b>Tara A. LeBlanc, Interim Medicaid Executive Director State of Louisiana Department of Health 628 North 4<sup>th</sup> Street P.O. Box 91030 Baton Rouge, LA 70821-9030</b>	
13. TYPED NAME <b>Ruth Johnson, designee for Dr. Courtney N. Phillips</b>			
14. TITLE <b>Secretary</b>			
15. DATE SUBMITTED <b>March 31, 2021</b>			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED		18. DATE APPROVED	
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**

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

Citation:

1905(a)(29) of the Act

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) for purposes of opioid treatment as part of the MAT mandatory benefit for the period beginning October 1, 2020 and ending September 30, 2025.
- 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

- a. The state covers the following counseling services and behavioral health therapies as part of the MAT mandatory benefit for the period beginning October 1, 2020, and ending September 30, 2025. Please set forth each service and components of each service (if applicable), along with a description of each service and component service.
  - i. The administration and dispensing of medications; and

**State of LOUISIANA**

**Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the  
Categorically Needy (continued)**

- ii. Treatment phases 1 through 4:
  - 1. Initial treatment phase lasts from three to seven days. During this phase, the provider conducts orientation, provides individual counseling and develops the initial treatment plan for treatment of critical health or social issues.
  - 2. Early stabilization begins on the third to seventh day following initial treatment through 90 days in duration, whereas the provider:
    - a. Conducts weekly monitoring of the beneficiary's response to medication;
    - b. Provides at least four individual counseling sessions;
    - c. Revises the treatment plan within 30 days to include input by all disciplines, the beneficiary and significant others; and
    - d. Conducts random monthly drug screen tests.
  - 3. Maintenance treatment follows the end of early stabilization and lasts for an indefinite period of time. The provider shall:
    - a. Perform random monthly drug screen tests until the client has negative drug screen tests for 90 consecutive days as well as random testing for alcohol when indicated;
    - b. Thereafter, monthly testing to clients who are allowed six days of take-home doses, as well as random testing for alcohol when indicated;
    - c. Continuous evaluation by the nurse of the client's use of medication and treatment from the program and from other sources;
    - d. Documented reviews of the treatment plan every 90 days in the first two years of treatment by the treatment team; and
    - e. Documentation of response to treatment in a progress note at least every 30 days.

**State of LOUISIANA****Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the  
Categorically Needy (continued)**

4. Medically supervised withdrawal from synthetic narcotic with continuing care (only when withdrawal is requested by the beneficiary). The provider shall:
  - a. Decrease the dose of the synthetic narcotic to accomplish gradual, but complete withdrawal, as medically tolerated by beneficiary;
  - b. Provide counseling of the type and quantity based on medical necessity; and
  - c. Conduct discharge planning as appropriate.
- b. Please include each practitioner and provider entity that furnishes each service and component service.

Services must be provided by an agency licensed by the Louisiana Department of Health as a behavioral health service provider – opioid treatment program. Opioid treatment programs must be accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or The Joint Commission (TJC), certified by Substance Abuse and Mental Health Services Administration (SAMHSA) and hold a current and unrestricted Drug Enforcement Administration (DEA) registration. Providers will be subject to all applicable state and federal regulations and all opioid treatment program enabling legislation.

Staffing for the opioid treatment program must be delivered in accordance with federal and state laws and regulations, the provider manual, and other notices or directives issued by the Department. Individuals providing services must be licensed in accordance with state laws and regulations, in addition to operating within their scope of practice license. Providers shall meet the provisions of the provider manual and the appropriate statutes.

The provider's opioid treatment program shall have the following staff:

1. Medical Director;
2. Pharmacist or Dispensing Physician;
3. Clinical Supervisor;
4. Physician or APRN;
5. Nursing staff;

**State of LOUISIANA**

6. Licensed Mental Health Professionals (LMHPs); and
  7. Unlicensed professionals (UPs) of addiction services.
- 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. Medical Director shall be licensed physician with a current, valid unrestricted license to practice in the state of Louisiana.
  2. Pharmacist or Dispensing Physician shall have a current, valid unrestricted license to practice in the state of Louisiana.
  3. Clinical Supervisor, in accordance with State regulations, shall supervise unlicensed professionals. A clinical supervisor is an LMHP that maintains a current and unrestricted license with its respective professional board or licensing authority in the state of Louisiana.
  4. Physician or APRN shall have a current, valid unrestricted license to practice in the state of Louisiana.
  5. Nursing staff shall have a current, valid and unrestricted nursing license in the State of Louisiana.
  6. Licensed Mental Health Professionals (LMHP) as defined below shall have a current, valid and unrestricted license in the State of Louisiana. LMHPs include the following individuals who are licensed to practice independently:
    - a. Medical Psychologists;
    - b. Licensed Psychologists;
    - c. Licensed Clinical Social Workers (LCSWs);
    - d. Licensed Professional Counselors (LPCs);
    - e. Licensed Marriage and Family Therapists (LMFTs);
    - f. Licensed Addiction Counselors (LACs); and
    - g. Advanced Practice Registered Nurses (APRN)  
(must be a nurse practitioner specialist in Adult Psychiatric & Mental Health, and Family Psychiatric & Mental Health or a Certified Nurse Specialist in Psychosocial, Gerontological Psychiatric Mental Health, Adult Psychiatric and Mental Health, and Child-Adolescent Mental Health and may practice to the extent that services are within the APRN's scope of practice).

**State of LOUISIANA**

**Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the  
Categorically Needy (continued)**

7. Unlicensed professionals (UPs) of addiction services must meet at least one of the following qualifications:
  - a. Master's Prepared Behavioral Health Professional that has not obtained full licensure privileges and is participating in ongoing professional supervision;
  - b. Certified Addiction Counselor (CAC) registered with the Addictive Disorders Regulatory Authority (ADRA);
  - c. Registered Addiction Counselor (RAC) registered with ADRA; or
  - d. Counselor-in-training (CIT) registered with ADRA.

State regulations require supervision of unlicensed professionals by a physician or LMHP.

**State of LOUISIANA**

**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.

The amount, duration, and scope of MAT drugs, biologicals, and counseling and  
behavioral therapies, is limited to those determined to be medically necessary.



**State of LOUISIANA****1905(a)(29) Medication-Assisted Treatment (MAT)**

Amount, Duration, and Scope of Medical and Remedial Care Services Provided to the  
Categorically Needy (continued)

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.

STATE OF LOUISIANA

PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES - OTHER TYPES OF CARE OR SERVICE LISTED IN SECTION 1902(a) OF THE ACT THAT ARE INCLUDED IN THE PROGRAM UNDER THE PLAN ARE DESCRIBED AS FOLLOWS:

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

**Reimbursement Methodology**

Unbundle prescribed drugs for Medication-Assisted Treatment (MAT) will be reimbursed as described in Attachment 4.19-B, Item 12a, *Prescribed Drugs*.