

Medicaid and CHIP Operations Group

June 25, 2021

Susan Birch, Director MaryAnne Lindeblad, Medicaid Director Health Care Authority PO Box 45502 Olympia, WA 98504-5010

Re: Washington State Plan Amendment (SPA) WA-21-0007

Dear Ms. Birch and Ms. Lindeblad:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) WA-21-0007. This amendment proposes to add medication-assisted treatment (MAT) as a mandatory benefit in the Medicaid state plan. This letter is to inform you that Washington's Medicaid SPA Transmittal Number WA-21-0007 is approved effective October 1, 2020 until September 30, 2025, pursuant to 1905(a)(29) of the Social Security Act and Section 1006(b) of the SUPPORT Act.

Section 1006(b) of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act ("SUPPORT Act"), signed into law on October 24, 2018, amended section 1902(a)(10)(A) of the Social Security Act (the Act) to require state Medicaid plans to include coverage of MAT for all eligible to enroll in the state plan or waiver of the state plan. Section 1006(b) also added a new paragraph 1905(a)(29) to the Act to include the new required benefit in the definition of "medical assistance" and to specify that the new required benefit will be in effect for the period beginning October 1, 2020, and ending September 30, 2025.

Section 1006(b) of the SUPPORT Act also added section 1905(ee)(1) to the Act to define MAT, for purposes of the new required coverage, as:

... all drugs approved under section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355), including methadone, and all biological products licensed under section 351 of the Public Health Service Act (42 U.S.C. 262) to treat opioid use disorders; and[,] ... with respect to the provision of such drugs and biological products, counseling services and behavioral therapy.

Pursuant to section 1135(b)(5) and/or 1135(b)(1)(C) of the Act, due to the COVID-19 public health emergency (PHE), CMS issued an approval letter on March 12, 2021 allowing Washington to modify the SPA submission requirements at 42 C.F.R. 430.20, to allow the state to submit a SPA implementing section 1905(a)(29) of the Act by March 31, 2021 that would take effect on October 1, 2020.

Pursuant to section 1135(b)(5) and/or 1135(b)(1)(C) of the Act, due to the COVID-19 PHE, CMS issued an approval letter on March 12, 2021 allowing Washington to modify the public notice time frames set forth at 42 C.F.R. 447.205, in order to obtain an effective date of October 1, 2020 for its SPA implementing statewide methods and standards for setting payment rates for the benefit described at section 1905(a)(29) of the Act. The state issued public notice on January 11, 2021.

CMS conducted our review of your submittal according to statutory requirements in Title XIX of the Act and implementing regulations.

If you have any questions, please contact Nikki Lemmon at 303-844-2641 or via email at <u>nicole.lemmon@cms.hhs.gov</u>.

Sincerely,

Ruth A. Hughes, Acting Director Division of Program Operations

cc: Ann Myers, HCA

DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FINANCING ADMINISTRATION		FORM APPROVED OMB NO. 0938-0193		
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 21-0007	2. STATE Washington		
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)			
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE			
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	October 1, 2020			
5. TYPE OF PLAN MATERIAL (Check One):				
□ NEW STATE PLAN □ AMENDMENT TO BE O	CONSIDERED AS NEW PLAN	AMENDMENT		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME				
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:			
1902(a) and 1905(s)(29) of the Social Security Act	a. FFY 2021 \$0			
	b. FFY 2022 \$0			
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS OR ATTACHMENT (If Applicable):			
Attachment 3.1-A page 18b	Attachment 3.1-A page 18b			
Supplement 4 to Attachment 3.1-A pages 1-3 (new) 1-6 (new) Attachment 3.1-B page 18b	Attachment 3.1-A page 18b			
Supplement 2 to Attachment 3.1-B pages 1-3 (new) 1-6 (new)	Attachment 5.1 D page 100			
Attachment 4.19-B page 52 (new)				
10. SUBJECT OF AMENDMENT:				
Medication Assisted Treatment (MAT)/Medications for Opic	oid Use Disorder (MOUD)			
 11. GOVERNOR'S REVIEW (Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL 	⊠ OTHER, AS SPEC	IFIED: Exempt		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:			
Mary aune Sindellad	Ann Myers			
13. TYPED NAME:	Rules and Publications			
MaryAnne Lindeblad	Division of Legal Services			
14. TITLE:	Health Care Authority			
Medicaid Director	626 8 th Ave SE MS: 42716			
15. DATE SUBMITTED:	Olympia, WA 98504-2716			
03-30-2021 FOR REGIONAL OFFICE USE ONLY				
17 DATE RECEIVED:	18. DATE APPROVED:			
3/30/2021	June 25, 2021			
PLAN APPROVED – ON	E COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 10/1/2021	20. SIGNATURE OF REGIONAL OF			
21. TYPED NAME: Ruth A. Hughes	22. TITLE: Acting Director, Division of	of Program Operations		
23. REMARK 5:26/21: the state authorizes P& I change: Box 8				
o Remove "Attachment 3.1-A page 18b" and "Attachment 3.1-B page 18b"				
 o Under "Supplement 4 to Attachment 3.1-A" replace pages "1 -3 (new) with pages "1 - 7 (new)" o Under "Supplement 2 to Attachment 3.1-B" replace pages "1 - 3 (new)" with pages "1 - 7 (new)" 				
o Add "Attachment 4.19-B page 52 (new)"				
• Box 9				
o Remove "Attachment 3.1-A page 18b" and "Attachment 3.1-B page 18b"				
 6/3/21: the state authorizes the following P&I changes to box 8 of the 179 form: For Supplement 4 to Attachment 3.1-A, change the previously authorized pages "1 – 7" to pages "1 – 6" 				
For Supplement 2 to Attachment 3.1-B, change the previously				

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND 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

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. See chart below.
- b) Please include each practitioner and provider entity that furnishes each service and component service.
 See chart below

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

a. Service	a. Service Description	b. Providers Able to Render Service
Medication Manageme	ent	
Screening	Obtain client history, review medications, demographics, determine services client is seeking	ARNP, MD/DO, PA (all may prescribe medication for MAT with a DATA Waiver 2000)
Medication Management	The prescribing of and monitoring of all drugs in all forms identified for use as MAT, 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).	ARNP, MD/DO, PA (all may prescribe medication for MAT with a DATA Waiver 2000)
Physical health management	Provision of an initial examination, review of past medical history and current medications to determine the appropriateness of medication assisted treatment. The identification, management and referral to care as indicated for the treatment of medical conditions resulting from the use of MAT or those that might interfere with the success of MAT.	MD/DO, ARNP, PA

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

a. Service	a. Service Description	b. Providers Able to Render Service
Opioid Use Treatment		
Assessment	Assessment documents an age-appropriate, strengths-based psychosocial assessment that considers current needs and the patient's relevant history according to best practices.	SUDP, SUDPT, Behavioral Health Co-occurring Disorder Specialist
Cognitive behavioral therapy (CBT)	Helps participant to look at the interactions between thoughts, feelings, behaviors, and physical symptoms, together with the situations within they occur, all affect and interact with each other. This helps the participant to identify what or where it is that they want to change.	Marriage & Family Therapist, Mental Health Counselor, SUDP with CBT training
Counseling	Individual, family, or group therapy designed to provide assistance and guidance in resolving personal, social, or psychological problems and difficulties. Facilitate the achievement and maintenance of maximum functional recovery. 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 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.	ARNP, Behavioral Health Co- occurring Disorder Specialist, LPN, Marriage & Family Therapist, Mental Health Counselor, MD/DO, PA, RN, SUDP, SUDPT,

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

a. Service	a. Service Description	b. Providers Able to Render Service
Opioid Use Treatme		
Motivational interviewing	Person-centered counseling for addressing the common problem of ambivalence about change. MI is done for or with someone, not on or to them. The four key aspects are partnership, acceptance, compassion, and evocation.	Marriage & Family Therapist, Mental Health Counselor, SUDP, SUDPT
Individual Service Plan	Be in terminology that is understandable to the participant. Must be a plan that is mutually agreed upon. Addresses issues identified by the individual or legal representative. Contains measurable goals and objectives and is initiated during the first individual sessions following the assessment with at least one goal identified by the individual. Must be updated to address applicable changes in identified needs and achievement of goals.	Marriage & Family Therapist, Mental Health Counselor, SUDP, SUDPT
Peer Services	Provides a wide range of activities to assist an individual in exercising control over their own life and recovery process through: developing self-advocacy and natural supports, maintenance of community living skills, promoting socialization and the practice of peer counselors sharing their own life experiences related to mental and substance use illness to build alliances that enhance the individual's ability to function.	Peer Counselors

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

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

- 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.
 - Advanced Registered Nurse Practitioner (ARNP) is licensed and provides services within their scope of practice in accordance with state law. May prescribe medication for MAT with a DATA Waiver 2000.
 - Behavioral Health Co-occurring Disorder Specialist is licensed and provides services within their scope of practice in accordance with state law
 - Licensed Practical Nurse (LPN) is licensed and provides services within their scope of practice in accordance with state law
 - Marriage and Family Therapist is licensed and provides services within their scope of practice in accordance with state law
 - Mental Health Counselor is licensed and provides services within their scope of practice in accordance with state law
 - Physician/osteopathic physician (MD/DO): is licensed and provides services within their scope of practice in accordance with state law. May prescribe medication for MAT with a DATA Waiver 2000
 - Physician Assistant is licensed and provides services within their scope of practice in accordance with state law. May prescribe medication for MAT with a DATA Waiver 2000
 - Registered Nurse (RN) is licensed and provides services within their scope of practice in accordance with state law
 - Substance Use Disorder Professional (SUDP) is licensed and provides services within their scope of practice in accordance with state law
 - Substance Use Disorder Professional Trainee (SUDPT) is licensed and provides services within their scope of practice in accordance with state law, working under the supervision of an SUDP.
 - Peer Counselor is licensed and provides services within their scope of practice in accordance with state law.

Note: Providers prescribing medications for MAT must prescribe according to the authorities granted to them by the DEA and must follow all federal regulations/requirements when prescribing methadone to treat people with opioid use disorder.

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

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

iv. Utilization Controls

X The state has drug utilization controls in place. (Check each of the following that apply)

<u>X</u> Generic first policy <u>X</u> Preferred drug lists <u>X</u> Clinical criteria X 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.

Medications to treat MAT may require prior authorization to determine medical necessity and may be subject to daily dose limits. All non-preferred products require a trial of preferred products with the same indication before a non-preferred drug will be authorized, unless contraindicated or not clinically appropriate. Requests for limitation extensions are considered and reviewed for medical necessity on a case-by-case basis.

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

Supplement 2 to Attachment 3.1-B Page 1

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE MEDICALLY NEEDY GROUP(S): ALL

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

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. See chart below.
- b) Please include each practitioner and provider entity that furnishes each service and component service.
 See chart below

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE MEDICALLY NEEDY GROUP(S): ALL

b. Service	c. Service Description	d. Providers Able to Render Service
Medication Manageme	ent	
Screening	Obtain client history, review medications, demographics, determine services client is seeking	ARNP, MD/DO, PA (all may prescribe medication for MAT with a DATA Waiver 2000)
Medication Management	Medical treatment of Substance Use Disorders involving abstinence, medication to address withdrawal symptoms, monitoring client until they are free of toxins.	ARNP, MD/DO, PA (all may prescribe medication for MAT with a DATA Waiver 2000)
Physical health management	Provision of an initial examination, review of past medical history and current medications to determine the appropriateness of medication assisted treatment. The identification, management and referral to care as indicated for the treatment of medical conditions resulting from the use of MAT or those that might interfere with the success of MAT.	MD/DO, ARNP, PA

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE MEDICALLY NEEDY GROUP(S): ALL

a. Service	a. Service Description	b. Providers Able to Render Service
Opioid Use Treatment		
Assessment	Assessment documents an age-appropriate, strengths-based psychosocial assessment that considers current needs and the patient's relevant history according to best practices.	Behavioral Health Co- occurring Disorder Specialist, SUDP, SUDPT
Cognitive behavioral therapy (CBT)	Helps participant to look at the interactions between thoughts, feelings, behaviors, and physical symptoms, together with the situations within they occur, all affect and interact with each other. This helps the participant to identify what or where it is that they want to change.	Marriage & Family Therapist, Mental Health Counselor, SUDP with CBT training
Counseling	Individual, family, or group therapy designed to provide assistance and guidance in resolving personal, social, or psychological problems and difficulties. Facilitate the achievement and maintenance of maximum functional recovery 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 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."	ARNP, Behavioral Health Co- occurring Disorder Specialist, LPN, Marriage & Family Therapist, Mental Health Counselor, MD/DO, PA, RN, SUDP, SUDPT,

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE MEDICALLY NEEDY GROUP(S): ALL

a. Service	a. Service Description	b. Providers Able to Render Service
Opioid Use Treatme	nt (cont)	1
Motivational interviewing	Person-centered counseling for addressing the common problem of ambivalence about change. MI is done for or with someone, not on or to them. The four key aspects are partnership, acceptance, compassion, and evocation.	Marriage & Family Therapist, Mental Health Counselor, SUDP, SUDPT
Individual Service Plan	Be in terminology that is understandable to the participant. Must be a plan that is mutually agreed upon. Addresses issues identified by the individual or legal representative. Contains measurable goals and objectives and is initiated during the first individual sessions following the assessment with at least one goal identified by the individual. Must be updated to address applicable changes in identified needs and achievement of goals	Marriage & Family Therapist, Mental Health Counselor, SUDP, SUDPT
Peer Services	Provides a wide range of activities to assist an individual in exercising control over their own life and recovery process through: developing self-advocacy and natural supports, maintenance of community living skills, promoting socialization and the practice of peer counselors sharing their own life experiences related to mental and substance use illness to build alliances that enhance the individual's ability to function.	Peer Counselors

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE MEDICALLY NEEDY GROUP(S): ALL

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

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.

- Advanced Registered Nurse Practitioner (ARNP) is licensed and provides services within their scope of practice in accordance with state law. May prescribe medication for MAT with a DATA Waiver 2000.
- Behavioral Health Co-occurring Disorder Specialist is licensed and provides services within their scope of practice in accordance with state law
- Licensed Practical Nurse (LPN) is licensed and provides services within their scope of practice in accordance with state law
- Marriage and Family Therapist is licensed and provides services within their scope of pract ice in accordance with state law
- Mental Health Counselor is licensed and provides services within their scope of practice in accordance with state law
- Physician/osteopathic physician (MD/DO): is licensed and provides services within their scope of practice in accordance with state law. May prescribe medication for MAT with a DATA Waiver 2000
- Physician Assistant is licensed and provides services within their scope of practice in accordance with state law. May prescribe medication for MAT with a DATA Waiver 2000
- Registered Nurse (RN) is licensed and provides services within their scope of practice in accordance with state law
- Substance Use Disorder Professional (SUDP) is licensed and provides services within their scope of practice in accordance with state law
- Substance Use Disorder Professional Trainee (SUDPT) is licensed and provides services within their scope of practice in accordance with state law, working under the supervision of an SUDP.
- Peer Counselor is licensed and provides services within their scope of practice in accordance with state law.

Note: Providers prescribing medications for MAT must prescribe according to the authorities granted to them by the DEA and must follow all federal regulations/requirements when prescribing methadone to treat people with opioid use disorder.

Supplement 2 to Attachment 3.1-B Page 6

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State WASHINGTON

AMOUNT, DURATION, AND SCOPE OF SERVICES PROVIDED TO THE MEDICALLY NEEDY GROUP(S): ALL

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

i. Utilization Controls

 \underline{X} The state has drug utilization controls in place. (Check each of the following that apply)

<u>X</u> Generic first policy

<u>X</u> Preferred drug lists

X Clinical criteria

<u>X</u> Quantity limits

____ The state does not have drug utilization controls in place.

ii. Describe the state's limitations on amount, duration, and scope of MAT drugs, biologicals, and counseling and behavioral therapies related to MAT.

Medications to treat MAT may require prior authorization to determine medical necessity and may be subject to daily dose limits. All non-preferred products require a trial of preferred products with the same indication before a non-preferred drug will be authorized, unless contraindicated or not clinically appropriate. Requests for limitation extensions are considered and reviewed for medical necessity on a case-by-case basis.

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STATE: WASHINGTON

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES.

XXIII. Medication Assisted Treatment (MAT) for Opioid Use Disorder (OUD)

Unbundled prescribed drugs for dispensed or administered for MAT are reimbursed using the same methodology as described in Attachment 4.19-B(IV) for pharmacy services.