

## **Table of Contents**

**State Name: Virginia**

**State Plan Amendment (SPA) #: 21-0008**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS-179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages



Medicaid and CHIP Operations Group

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June 2, 2021

Karen Kimsey, Director  
Department of Medical Assistance Services  
600 East Broad Street, Suite 1300  
Richmond, VA 23219

RE: Virginia State Plan Amendment 21-0008

Dear Ms. Kimsey:

The Centers for Medicare & Medicaid Services (CMS) has reviewed Virginia's State Plan Amendment (SPA) 21-0008, Coverage of Mandatory Medication Assisted Treatment (MAT).

This amendment proposes to address the newly added mandatory benefit for coverage and reimbursement of medication-assisted treatment (MAT) in opioid treatment programs (OTPs) and office-based opioid treatment settings in compliance with Section 1006(b) of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act, HR 6, and, Section 1905(a) (29) of the Social Security Act. The purpose of the SPA is to move Virginia's current MAT benefit from the optional benefit section in Virginia's state plan to the required benefit section to comply with Section 1006(b) of the SUPPORT Act.

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 Virginia 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 Virginia 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 February 23, 2021.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter is to inform you that Virginia's Medicaid SPA Transmittal Number 21-0008 is approved effective October 1, 2020 until September 30, 2025, pursuant to Section 1006(b) of the SUPPORT Act. Enclosed are the approved SPA pages and signed CMS-179 form.

If you have any questions concerning this information, please contact me at (816) 426-6417, or your staff may contact Margaret Kosherzenko at [Margaret.Kosherzenko@cms.hhs.gov](mailto:Margaret.Kosherzenko@cms.hhs.gov) or (215) 861-4288.

Sincerely,

James G. Scott, Director  
Division of Program Operations

Enclosures

cc:  
Emily McClellan

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 1 0 0 8

2. STATE

Virginia

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

10/1/2020

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

Support Act, Sect 1006b, SSA 1905(a)29

7. FEDERAL BUDGET IMPACT

a. FFY 2021 \$ 0  
b. FFY 2022 \$ 0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19-B, new page 16  
Attachment 3.1A, Supplement 7, new pages 1, 2, 3, 4  
Attachment 3.1B, Supplement 1, new pages 1, 2, 3, 4

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (*If Applicable*)

Same as box #8.

10. SUBJECT OF AMENDMENT

Coverage of Mandatory MAT

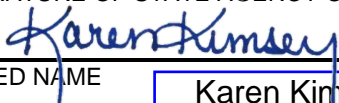
11. GOVERNOR'S REVIEW (*Check One*)

- GOVERNOR'S OFFICE REPORTED NO COMMENT  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED

Secretary of Health and Human Resources

12. SIGNATURE OF STATE AGENCY OFFICIAL



13. TYPED NAME

Karen Kimsey

14. TITLE

Director

15. DATE SUBMITTED

2/23/2021

16. RETURN TO

Dept. of Medical Assistance Services  
600 East Broad Street, #1300  
Richmond VA 23219

Attn: Regulatory Coordinator

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED

March 26, 2021

18. DATE APPROVED

06/02/2021

**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL

October 1, 2020

20. SIGNATURE OF REGIONAL OFFICIAL

21. TYPED NAME

James G. Scott

22. TITLE

Director, Division of Program Operations

23. REMARKS

**State of Virginia**

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

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

1905(a)(29)\_\_\_\_\_MAT as described and limited in Supplement 7\_\_\_\_\_to Attachment 3.1-A.

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

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).

**State of Virginia**

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

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><u>Service Component</u></b>	<b><u>Service Component Description</u></b>
Assessment	Means the individualized, person-centered biopsychosocial assessment performed face-to-face, in which the provider obtains comprehensive information from the individual.
Individual Service Plan	Development of a person-centered plan of care that is specific to the individual’s unique treatment needs, developed with the individual, in consultation with the individual's family, as appropriate.
Individual, Family, and Group Therapy	Application of principles, standards, and methods of the counseling profession in (i) conducting assessments and diagnoses for the purpose of establishing treatment goals and objectives and (ii) planning, implementing, and evaluating treatment plans using treatment interventions to facilitate human development and to identify and remediate mental, emotional, or behavioral disorders and associated distresses that interfere with mental health. Includes evidenced-based patient counseling on addiction, treatment, recovery, and associated health risks.  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.
Medication administration	The administration of medication related to opioid use disorder treatment or the monitoring for adverse side effects or results of that medication; interventions are matched to levels of patient progress and intended outcomes.

**State of Virginia**

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

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

<b><i>Service Component</i></b>	<b><i>Type of Practitioner</i></b>
Assessment	Credentialed addiction treatment Professional.  A registered nurse or a practical nurse who is licensed by the Commonwealth with clinical experience involving medication management.
Individual Service Plan	Credentialed addiction treatment Professional.
Individual, Family, and Group Therapy	Credentialed addiction treatment Professional.
Medication administration	Physician, Nurse Practitioner, Physician Assistant  A registered nurse or a practical nurse who is licensed by the Commonwealth with experience involving medication management.

- 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.

"Credentialed addiction treatment professional" means (i) an addiction-credentialed physician or physician or physician extender with experience or training in addiction medicine; (ii) a licensed psychiatrist; (iii) a licensed clinical psychologist; (iv) a licensed clinical social worker; (v) a licensed professional counselor; (vi) a certified psychiatric clinical nurse specialist; (vii) a licensed psychiatric nurse practitioner; (viii) a licensed marriage and family therapist; (ix) a licensed substance abuse treatment practitioner; (x) residents under supervision of a licensed professional counselor, licensed marriage and family therapist, or licensed substance abuse treatment practitioner who is registered with the Virginia Board of Counseling; (xi) a resident in psychology under supervision of a licensed clinical psychologist who is registered with the Virginia Board of Psychology; (xii) a supervisee in social work under the supervision of a licensed clinical social worker who is registered with the Virginia Board of Social Work.

**State of Virginia**

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

iv. Utilization Controls

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

       Generic first policy

  X   Preferred drug lists

  X   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 for treatment of opioid use disorder that are not in the preferred drug list have a service authorization requirement.

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 Virginia**

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

Citation: 3.1(b)(1) Amount, Duration, and Scope of Services: Medically Needy  
(Continued)

1915(a)(29) \_\_\_\_ MAT as described and limited in Supplement 1 \_\_\_\_ to Attachment 3.1-B.

ATTACHMENT 3.1-B identifies the medical and remedial services provided to the medically needy.

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).

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

## 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><i><u>Service Component</u></i></b>	<b><i><u>Service Component Description</u></i></b>
Assessment	Means the individualized, person-centered biopsychosocial assessment performed face-to-face, in which the provider obtains comprehensive information from the individual.
Individual Service Plan	Development of a person-centered plan of care that is specific to the individual's unique treatment needs, developed with the individual, in consultation with the individual's family, as appropriate.
Individual, Family, and Group Therapy	Application of principles, standards, and methods of the counseling profession in (i) conducting assessments and diagnoses for the purpose of establishing treatment goals and objectives and (ii) planning, implementing, and evaluating treatment plans using treatment interventions to facilitate human development and to identify and remediate mental, emotional, or behavioral disorders and associated distresses that interfere with mental health. Includes evidenced-based patient counseling on addiction, treatment, recovery, and associated health risks.  Family therapy services that involve 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.
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**State of Virginia****1905(a)(29) Medication-Assisted Treatment (MAT)**

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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.

"Credentialed addiction treatment professional" means (i) an addiction-credentialed physician or physician or physician extender with experience or training in addiction medicine; (ii) a licensed psychiatrist; (iii) a licensed clinical psychologist; (iv) a licensed clinical social worker; (v) a licensed professional counselor; (vi) a certified psychiatric clinical nurse specialist; (vii) a licensed psychiatric nurse practitioner; (viii) a licensed marriage and family therapist; (ix) a licensed substance abuse treatment practitioner; (x) residents under supervision of a licensed professional counselor, licensed marriage and family therapist, or licensed substance abuse treatment practitioner who is registered with the Virginia Board of Counseling; (xi) a resident in psychology under supervision of a licensed clinical psychologist who is registered with the Virginia Board of Psychology; (xii) a supervisee in social work under the supervision of a licensed clinical social worker who is registered with the Virginia Board of Social Work.

**State of Virginia**

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

iv. Utilization Controls

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

- Generic first policy
- X   Preferred drug lists
- X   Clinical criteria
- X   Quantity limits

       The state does not have drug utilization controls in place.

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

Medications for treatment of opioid use disorder that are not in the preferred drug list have a service authorization requirement.

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**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT**

State of VIRGINIA

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATE-  
OTHER TYPES OF CARE**

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§29 Medication-Assisted Treatment (MAT) Pursuant to section 1905(a)(29) of the Social Security Act

The state will cover 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).

The reimbursement for unbundled MAT prescribed drugs and biologicals used to treat opioid use disorder (OUD) will be reimbursed using the same methodology as described for covered outpatient legend and non-legend drugs located in Attachment 4.19-B, pages 7.3, 7.4, and 7.5 for prescribed drugs that are dispensed or administered.

The reimbursement for individual, family and group therapy is referenced in Attachment 4.19-B Page 6.01, Reimbursement for outpatient substance use disorder services: Other Providers, including Licensed Mental Health Professionals (LMHP) (42 CFR 447, Subpart F).