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State/Territory Name: Colorado

State Plan Amendment (SPA) #: 17-0051

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Denver Regional Office
1961 Stout Street, Room 08-148
Denver, CO 80294



REGION VIII - DENVER

January 24, 2018

Kim Bimestefer, Executive Director
Department of Health Care Policy & Financing
303 East 17th Avenue, 7th Floor
Denver, CO 80203

RE: Colorado #17-0051

Dear Ms. Bimestefer:

We have reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number (TN) 17-0051. This Amendment clarifies the list of allowable outpatient substance abuse treatment providers.

Please be informed that this State Plan Amendment was approved January 24, 2018, with an effective date of October 1, 2017. We are enclosing the CMS-179 and the amended plan page(s).



If you have any questions concerning this amendment, please contact Curtis Volesky at (303) 844-7033.

Sincerely,



Richard C. Allen
Associate Regional Administrator
Division for Medicaid & Children's Health Operations

cc: Gretchen Hammer
John Bartholomew
David DeNovellis
Russell Ziegler

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES		1. TRANSMITTAL NUMBER: 17-0051	2. STATE: COLORADO
		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: October 1, 2017	
5. TYPE OF PLAN MATERIAL (Check One): NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS A 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: 42 CFR 440.130		7. FEDERAL BUDGET IMPACT: a. FFY 2017-18: \$__0.00 b. FFY 2018-19: \$__0.00	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Supplement to Attachment 3.1-A -- Limitations to Care and Services -- 13.d Rehabilitative Services: Substance use Disorder Treatment Services -- Pages 1-2 of 2		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Supplement to Attachment 3.1-A -- Limitations to Care and Services -- 13.d Rehabilitative Services: Substance use Disorder Treatment Services -- Pages 1-2 of 2 (TN: 17-0002)	
10. SUBJECT OF AMENDMENT: This State Plan Amendment clarifies the list of allowable outpatient substance abuse treatment providers.			
11. GOVERNOR'S REVIEW (Check One): GOVERNOR'S OFFICE REPORTED NO COMMENT <input checked="" type="checkbox"/> OTHER, AS SPECIFIED COMMENTS OF GOVERNOR'S OFFICE ENCLOSED Governor's letter dated 15 January 2015 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO: Colorado Department of Health Care Policy and Financing 1570 Grant Street Denver, CO 80203-1818 Attn: David DeNovellis	
13. TYPED NAME: Gretchen Hammer			
14. TITLE: Medicaid Director			
15. DATE SUBMITTED: <u>Initial:</u> December 18, 2017 <u>Update #1:</u> January 19, 2018			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED December 18, 2017		18. DATE APPROVED January 24, 2018	
PLAN APPROVED -- ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL October 1, 2017		20. SIGNATURE OF REGIONAL OFFICIAL: 	
21. TYPED NAME Richard C. Allen		22. TITLE ARA, DMCHO	
23. REMARKS			

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

STATE OF COLORADO

Supplement to Attachment 3.1-A

LIMITATIONS TO CARE AND SERVICES

Item 13.d. Rehabilitative Services (continued)

Page 1 of 2

Substance Use Disorder Treatment Services

Outpatient substance abuse treatment services, unless otherwise specified, must be performed by a licensed health practitioner with a certification in addiction counseling or a licensed clinician. Services may also be performed under the supervision of a licensed health practitioner with a certification in addiction counseling or a licensed clinician in facilities that are licensed by the Office of Behavioral Health (OBH).

1. Licensed health practitioners include:
 - a. Advanced Practice Nurse (APN) pursuant to CRS 12-38-111.5.
 - b. Physician/Psychiatrist pursuant to CRS 12-36-101.
 - c. Physician assistant pursuant to CRS 12-36-106.
2. Licensed clinicians include:
 - a. Licensed Clinical Social Worker (LCSW) pursuant to CRS 12-43-404.
 - b. Licensed Professional Counselor (LPC) pursuant to CRS 12-43-603.
 - c. Licensed Marriage and Family Therapist (LMFT) pursuant to CRS 12-43-504.
 - d. Licensed Addiction Counselor (LAC) pursuant to CRS 12-43-804.
 - e. Psychologist, Psy.D/Ph.D pursuant to CRS 12-43-304.
3. Allowable services include:
 - a. Substance use disorder assessment. An evaluation designed to determine the level of drug or alcohol abuse or dependence, and the comprehensive treatment needs of a client.
 - b. Individual and family therapy. Therapeutic substance abuse counseling and treatment services with one client per session. Family therapy will be directly related to the client's treatment for substance use or dependence.
 - c. Group therapy. Therapeutic substance abuse counseling and treatment services with more than one client.
 - d. Alcohol/drug screening counseling. Counseling services provide in conjunction with the collection of urine to test for the presence of alcohol or drugs.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

STATE OF COLORADO

Supplement to Attachment 3.1-A

LIMITATIONS TO CARE AND SERVICES

Item 13.d. Rehabilitative Services (continued)

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- e. Social/ambulatory detoxification. Social/ambulatory detoxification services exclude room and board. Social/ambulatory detoxification includes the following services:
 - i. Physical assessment of detoxification progression.
 - ii. Evaluation of level of motivation for treatment.
 - iii. Safety assessment, including suicide ideation and other mental health issues.
 - iv. Provision of daily living needs.

- f. Medication Assisted Treatment (MAT). MAT consists of administration, management, and oversight of methadone or another approved controlled substance to an opiate dependent person for the purpose of decreasing or eliminating dependence on opiate substances. Administration, management and oversight of methadone or another approved controlled substance shall only be provided by:
 - i. Physicians;
 - ii. Physician Assistants; and
 - iii. Advance Practice Nurse.