

## **Table of Contents**

**State/Territory Name: OR**

**State Plan Amendment (SPA) #:19-0006**

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

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Seattle Regional Office  
701 Fifth Avenue, Suite 1600, MS/RX-200  
Seattle, WA 98104



Western Division - Regional Operations Group

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October 8, 2019

Patrick Allen, Director  
Oregon Health Authority  
500 Summer Street Northeast, E-15  
Salem, OR 97301-1079

RE: Oregon State Plan Amendment (SPA) Transmittal Number OR 19-0006

Dear Mr. Allen:

The Centers for Medicare & Medicaid Services (CMS) has completed its review of the enclosed State Plan Amendment (SPA), Transmittal Number OR19-0006. This SPA authorizes the state to take advantage of the exception in Section 1012 of the SUPPORT Act to the IMD exclusion for services to pregnant and postpartum women outside of an IMD.

This SPA is approved effective October 24, 2018. This retroactive effective date is approved by CMS pursuant to 42 CFR 430.20(b)(3). Enclosed is a copy of the CMS-179 summary form, as well as the approved pages for incorporation into the Oregon State Plan.

If there are any questions concerning this approval please contact me or your staff may contact Gary Ashby at [gary.ashby@cms.hhs.gov](mailto:gary.ashby@cms.hhs.gov) or at (206) 615-2333.

Sincerely,

A solid black rectangular box redacting the signature of the sender.

Deputy Director

Enclosure

cc:  
Lori Coyner, OHA  
Dana Hittle, OHA  
Jesse Anderson, OHA

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

1. TRANSMITTAL NUMBER:  
**19-0006**

2. STATE  
Oregon

**FOR: HEALTH CARE FINANCING ADMINISTRATION**

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE  
SOCIAL SECURITY ACT (MEDICAID) Medical Assistance

TO: REGIONAL ADMINISTRATOR  
HEALTH CARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE  
~~7/1/19~~ **10/24/18**

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 440.130

7. FEDERAL BUDGET IMPACT:  
a. FFY 2018 \$ 94,870  
b. FFY ~~2020-2019~~ \$ 213,829

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 3.1-A, page 6-d.19

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  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

Attachment 3.1-A, page 6-d.19

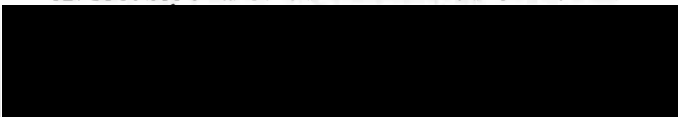
10. SUBJECT OF AMENDMENT: This transmittal is being submitted to include the Section 1012 SUPPORT Act  
exception for services to pregnant and postpartum women outside of an IMD.

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: The Governor  
does not wish to review any plan materials.

12. SIGNATURE OF STATE AGENCY OFFICIAL:



13. TYPED NAME Lori Coyner, MA

14. TITLE: State Medicaid Director, OHA

15. DATE SUBMITTED: 9/27/19

16. RETURN TO:

Oregon Health Authority  
Medical Assistance Programs  
500 Summer Street NE E-65  
Salem, OR 97301

ATTN: Jesse Anderson, State Plan Manager

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED: 9/27/19

18. DATE APPROVED: 10/8/19

**PLAN APPROVED – ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL:  
10/24/18

20. SIGNATURE OF REGIONAL OFFICIAL: Digitally signed by David L. Meacham - S  
© 2019, Oregon Health Department, ou=HHS.

21. TYPED NAME: David L. Meacham

22. TITLE: Deputy Director Date: 2019.10.09 08:27:19 -0700

23. REMARKS:

10/1/19-State authorized a P&I change to block #4.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
State/Territory: OREGON

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

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13.d. Rehabilitative: Substance Use Disorder Services:

Provider qualifications (cont):

LMPs, QMHPs, QMHAs, CADC Peer Support Specialists, Acupuncturists and Mental Health Interns or other persons whose education and experience meet the standards and qualifications established by the Addictions and Mental Health Division of the Oregon Health Authority (OHA) through administrative rule may be authorized to deliver substance use disorder treatment services as specified by the Division in support of mental health workforce shortages in certain areas of the state and engage alternative treatment delivery options such as telemedicine and remote video supported therapy.

For treatment staff holding certification in addiction counseling, qualification for the certification must include at least: 750 hours of supervised experience in substance use counseling; 150 contact hours of education and training in substance use related subjects; and successful completion of a written objective examination or portfolio review by the certifying body. For treatment staff holding a health or allied health provider license, the license or registration must have been issued by one of the following state bodies and the person must possess documentation of at least 60 (120 for supervisors) contact hours of academic or continuing professional education in substance use disorder treatment; Board of Medical Examiners; Board or Psychologist Examiners; Board of Licensed Clinical Social Workers, Board of Licensed Professional Counselors and Therapists; or Board of Nursing.

All treatment staff must demonstrate competence in treatment of substance use disorders including individual assessment and individual, group, family and other counseling techniques, programs policies and procedures for service delivery and documentation, and identification, implementation and coordination of services identified to facilitate intended outcomes.

IMD ASSURANCE

Residential treatment services for SUDs are provided to Medicaid title XIX eligible individuals in facilities with 16 or fewer beds. Payment is excluded for individuals in “institutions of mental diseases” (IMDs) defined per 42 CFR 435.1010, except to the extent that the state is providing medical assistance to eligible pregnant and postpartum women outside of an IMD pursuant to section 1012 of the SUPPORT for Patients and Communities Act.