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State/Territory Name: Illinois

State Plan Amendment (SPA) #: 23-0012

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

May 5, 2023

Theresa Eagleson
Director
Illinois Department of Healthcare and Family Services
201 South Grand Avenue East
3rd Floor
Springfield, IL 62763-0001

Re: Illinois State Plan Amendment (SPA) 23-0012

Dear Ms. Eagleson:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0012. This amendment proposes to provide peer recovery support for Medicaid beneficiaries diagnosed with substance use disorder.

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 Illinois Medicaid SPA 23-0012 was approved on May 4, 2023, with an effective date of January 1, 2023.

If you have any questions, please contact Courtenay Savage at 708-567-2048 or via email at Courtenay.Savage@cms.hhs.gov.

Sincerely,


James G. Scott, Director
Division of Program Operations

Enclosures

cc: Kelly Cunningham
Mary Doran

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

1. TRANSMITTAL NUMBER <u>2 3</u> — <u>0 0 1 2</u>	2. STATE <u>IL</u>
3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
January 1, 2023

5. FEDERAL STATUTE/REGULATION CITATION
42 CFR 440.130

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 2023 \$ 3,015,000
b. FFY 2024 \$ 4,020,000

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
**Appendix to Attachment 3.1-A, p. 15(A)
Attachment 4.19-B, p. 39A**

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
**Appendix to Attachment 3.1-A, p. 15(A)
Attachment 4.19-B, p. 39A**

9. SUBJECT OF AMENDMENT
Peer recovery support specialists

10. 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:

12. TYPED NAME
Theresa Eagleson

13. TITLE
Director of Healthcare and Family Services

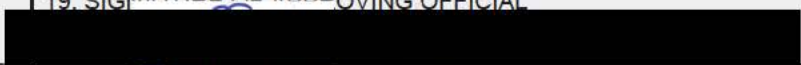
14. DATE SUBMITTED
3/31/2023

15. RETURN TO
Department of Healthcare and Family Services
Bureau of Program and Policy Coordination
Attn: Mary Doran
201 South Grand Avenue East
Springfield, IL 62763-0001

FOR CMS USE ONLY

16. DATE RECEIVED March 31, 2023	17. DATE APPROVED May 4, 2023
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PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL January 1, 2023	19. SIGNATURE OF APPROVING OFFICIAL 
20. TYPED NAME OF APPROVING OFFICIAL James G. Scott	21. TITLE OF APPROVING OFFICIAL Director, Division of Program Operations

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: **Illinois**

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

13d. REHABILITATIVE SERVICES

Alcohol and Substance Abuse Substance Use Disorder Services (continued)

8. Medication Assisted Treatment (MAT): The medical administration of opioid compounds as a treatment for a substance use disorder. MAT is delivered under the supervision of a physician, and administered by an Illinois licensed physician, nurse practitioner or physician extender, registered nurse or licensed practical nurse. While other FDA approved opioid compounds are used for MAT, Methadone is the only compound reimbursable through IDHS/SUPR. MAT shall be determined to be medically necessary prior to delivery and must:
- Include a referral for additional treatment for one or more of the covered Medicaid Rehabilitative Option (MRO) substance use disorder services; or
 - Include one or more of the covered MRO covered services as an adjunct to MAT when Methadone is used for MAT in accordance with State Administrative Rules and SAMHSA guidelines in 42 CFR Part 8 (MAT); and
 - Have MAT services effectively coordinated with the delivery of MAT and documented in the patient treatment plan in accordance with standard medical practice or, as applicable, in accordance with State Administrative Rules, and
 - Ensure that from October 1, 2020, through September 30, 2025, 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.

All services or treatments which are medically necessary to correct or lessen health problems detected or suspected by the screening process will be provided to individuals under age 21 as an EPSDT benefit.

9. Peer Recovery Support: Culturally competent individual and group services that provide nonclinical assistance and support throughout all stages of the SUD recovery and rehabilitation process in support of the beneficiary's recovery or treatment goals. Services aim to prevent relapse, empower beneficiaries through strength-based coaching, support linkages to community resources and the development of natural supports, and educate beneficiaries and their families about their conditions and the process of recovery. Services can include contact with family members or other collaterals if the purpose of the collateral's participation is to focus on the treatment needs of the beneficiary by supporting the achievement of the beneficiary's recovery or treatment goals. Peer Recovery Support services are provided directly by Peer Support Workers (PSWs), operating under the supervision of a Certified Alcohol and Drug Counselor (CADC), who meet the following qualifications:
- Are at least 18 years of age;
 - Have a minimum one year of recovery from lived experience in substance use and/or co-occurring mental health disorders;
 - Has completed a Department-approved peer recovery training or certification program; and
 - Demonstrates the ability to work within agency structure, accept supervision, and participate as a member of a multi-disciplinary team, when applicable.

State: **Illinois**

STATE PLAN UNDER TITLE XIX OF THE *SOCIAL SECURITY ACT*
**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES—
OTHER TYPE OF CARE—BASIS FOR REIMBURSEMENT**

21. REHABILITATIVE SERVICES

Substance Use Disorder Treatment, continued

- 01/22 d. Medication Assisted Treatment (MAT) – Reimbursement for medical administration of Methadone as a medical adjunct to substance use disorder treatment is made on a weekly per patient case rate. The rate is established as part of the state-developed fee schedule for both governmental and private providers of MAT. The agency’s fee schedule rate was set as of January 1, 2022, and is effective for services provided on or after that date.

All rates are published at

<https://www.illinois.gov/hfs/MedicalProviders/MedicaidReimbursement/>.

The fee schedule for MAT considers cost components associated with: 1) Managing the medical plan of care; 2) Ordering the drug; 3) Nursing services related to administration; 4) Administration of the drug; 5) Coordination with other MRO Substance Use Disorder (SUD) services; and 6) Actual drug cost per dose.

- 01/17 The initial medical examination, additional medical services rendered by a practitioner, laboratory services provided by an outside laboratory, and other MRO SUD services are reimbursed separately (not part of the Medication Assisted Treatment bundle) when the services and the provider of the services meet the requirements specified in the state plan.

- 01/22 e. The state pays the lessor of: 1) provider charges, or 2) the maximum fee schedule rate for the following substance use disorder rehabilitative services:
- Outpatient care
 - Day Treatment and Medically Monitored Withdrawal Management provided in a facility setting as a per diem payment
 - Psychiatric evaluation services
 - Medication Assisted Treatment
 - Peer Recovery Support services

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of substance use disorder rehabilitative services. The agency’s fee schedule rate was set as of January 1, 2023 and is effective for services provided on or after that date. Rates are published at

<https://www.illinois.gov/hfs/MedicalProviders/MedicaidReimbursement/>.