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State/Territory Name: Massachusetts

State Plan Amendment (SPA) #: 23-0004

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 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

November 20, 2023

Kathleen E. Walsh, Secretary
The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
One Ashburton Place, Room 1109
Boston, MA 02108

Re: Massachusetts State Plan Amendment (SPA) 23-0004

Dear Secretary Walsh:

We reviewed your proposed Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 23-0004. This amendment adds new coverage and payment methodologies for certain behavioral services under rehabilitative services.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 42 CFR Part 440 and 470. This letter is to inform you that Massachusetts' Medicaid SPA Transmittal Number 23-0004 was approved on November 20, 2023, with an effective date of January 1, 2023.

If you have any questions, please contact Marie DiMartino at (617) 565-9157 or via email at Marie.DiMartino@cms.hhs.gov.

Sincerely,

A large black rectangular redaction box covers the signature area of the letter.

James G. Scott, Director
Division of Program Operations

Enclosures

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

1. TRANSMITTAL NUMBER

2 3 — 0 0 0 4

2. STATE

M A

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT

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

4. PROPOSED EFFECTIVE DATE

01/01/2023

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR Parts 440 and 470

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 23 \$ 3,020,000
b. FFY 24 \$ 3,880,000

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Supplement to Attachment 3.1-A p. 3a14-17
Supplement to Attachment 3.1-B p. 3a14-17
Attachment 4.19-B page 1miii

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

NEW
NEW
NEW

9. SUBJECT OF AMENDMENT

An amendment to add new coverage and payment methodologies for certain behavioral services under rehabilitative services

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:

Not required under 42 CFR 430.12(b)(2)(i)

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME
Mike Levine

13. TITLE
Assistant Secretary for MassHealth

14. DATE SUBMITTED
03/30/2023

15. RETURN TO

Executive Office of Health and Human Services
The Commonwealth of Massachusetts
Office of Medicaid
One Ashburton Place
Boston, MA 02108

FOR CMS USE ONLY

16. DATE RECEIVED

03/30/2023

17. DATE APPROVED

11/20/2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

01/01/2023

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: Massachusetts
Limitations to Services Provided to the Categorically Needy

3. Rehabilitative Behavioral Health Services provided by Mental Health Centers

The following standard outpatient behavioral health rehabilitative services are provided by Mental Health Centers (MHCs) on a mobile or outreach basis in the community or in a nursing facility, and through telehealth modalities: diagnostic evaluation, treatment planning, case and family consultation, individual therapy, couple therapy, family therapy, group therapy, pharmacotherapy, psychotherapy for crisis services, peer services, and referral services. Case and Family Consultation and Therapy Services are all provided for the direct benefit of the beneficiary and for the purposes of assisting in the beneficiary's treatment.

- Case Consultation: intervention, for behavioral and medical management purposes, on a member's behalf with agencies, employers, or institutions which may include the preparation of reports of the member's psychiatric status, history, treatment, or progress (other than for legal purposes) for other physicians, agencies, or insurance carriers.
- Family Consultation: a scheduled meeting with one or more of the parents, legal guardian, or foster parents of a child who is being treated by clinical staff at the center, when the parents, legal guardian, or foster parents are not clients of the center.
- Peer Services: services that promote empowerment, self-determination, self-advocacy, understanding, coping skills, and resiliency through a specialized set of activities and interactions when provided by a qualified Certified Peer Specialist to an individual with a mental health disorder

The following standard and intensive outpatient rehabilitative behavioral health services may also be provided by MHCs on a mobile basis in the community or in a nursing facility, and through telehealth modalities: psychological assessment, structured outpatient addiction program services, enhanced structured outpatient addiction program services, and intensive outpatient services.

- Structured Outpatient Addiction Program (SOAP), ASAM Level Intensive Outpatient Services: a substance use disorder treatment service that provides short-term, multidisciplinary, clinically intensive structured treatment to address the sub-acute needs of members with substance use disorders and/or co-occurring disorders.
- Enhanced Structured Outpatient Addition Program Services: program that provides short-term, clinically intensive, structured day and/or evening substance use disorder (SUD) services. E-SOAP services are provided to individuals requiring enhanced programming that targets more specific clinical needs. Services include individual, group, and family therapy, peer services, as well as care coordination services.
- Intensive Outpatient Services: Treatment service that provides time-limited, multi-disciplinary, multimodal structured treatment in an outpatient setting for individuals requiring a clinical intensity that exceeds outpatient treatment. Services include individual, group, and family therapy as well as care coordination services.

Psychological assessment may be performed once every 6 months, or more often as clinically indicated. The following qualified clinicians, or their supervised trainees, employed by or under contract with a MHC provide standard and intensive outpatient rehabilitative behavioral health services within their scope of

State Plan under Title XIX of the Social Security Act
State: Massachusetts
Limitations to Services Provided to the Categorically Needy

practice under state law: board-certified or eligible psychiatrists, psychiatric nurses, psychiatric clinical nurse specialists, physicians, nurse practitioners, registered nurses, physician assistants, medical assistants, licensed psychologists, licensed independent clinical social workers, licensed clinical social workers, licensed mental health counselors, licensed alcohol and drug counselor Is, licensed marriage and family therapists, licensed applied behavior analyst, certified peer specialists, peer recovery coaches and recovery support navigators. Non-licensed clinicians (including peers) or trainees provide services under the supervision of a licensed clinician or a certified peer supervisor.

- **Certified peer specialist provider qualifications:** A certified peer specialist is an individual trained by an agency approved by the Massachusetts Department of Mental Health (DMH). Certified peer specialists are self-identified persons with lived experience of a mental health disorder and wellness who can effectively share their experiences and serve as a mentor, advocate, or facilitator for a member experiencing a mental health disorder.
- **Peer recovery coach provider qualifications:** A peer recovery coach is an individual with at least two years of sustained recovery who holds, or is actively working to obtain, credentialing as a Certified Addiction Recovery Coach (CARC) through the Massachusetts Board of Substance Abuse Counselor Certification, or alternative licensure or certification process, as directed by EOHHS. Peer recovery coaches must have lived experience with substance use and other addictive disorders, and/or co-occurring mental health disorders and has been trained to help their peers with similar experiences to gain hope, explore recovery, and achieve life goals.
- **Recovery support navigator provider qualifications:** A recovery support navigator is a paraprofessional who holds a bachelor's degree in social work, psychology, or a related field. Recovery support navigators receive specialized training in the essentials of substance use disorder and evidence-based techniques.

**State Plan under Title XIX of the Social Security Act
State: Massachusetts
Limitations to Services Provided to the Categorically Needy**

4. Rehabilitative Behavioral Health Services provided by Substance Use Disorder Treatment Clinics

The following standard outpatient behavioral health rehabilitative services provided by Substance Use Disorder Treatment Clinics (SUDC) providers when on a mobile or outreach basis in the community or in a nursing facility, and through telehealth modalities: opioid treatment program services, evaluation and treatment planning, structured outpatient addiction program services, enhanced structured outpatient addiction program services, pharmacotherapy, individual, group, and family/couple substance use disorder outpatient counseling, case consultation, peer support, and acupuncture withdrawal management. Case Consultation and Therapy Services are all provided for the direct benefit of the beneficiary and for the purposes of assisting in the beneficiary's treatment.

- Case Consultation: intervention, for behavioral and medical management purposes, on a member's behalf with agencies, employers, or institutions which may include the preparation of reports of the member's psychiatric status, history, treatment, or progress (other than for legal purposes) for other physicians, agencies, or insurance carriers.
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The following qualified clinicians, or their supervised trainees, employed by or under contract with a SUDC provide standard and intensive outpatient rehabilitative behavioral health services within their scope of practice under state law: board-certified or eligible psychiatrists, psychiatric nurses, psychiatric clinical nurse specialists, physicians, nurse practitioners, registered nurses, physician assistants, medical assistants, licensed psychologists, licensed independent clinical social workers, licensed clinical social workers, licensed mental health counselors, licensed alcohol and drug counselor Is, licensed marriage and family therapists, licensed applied behavior analyst, certified peer specialists, peer recovery coaches and recovery support navigators. Non-licensed clinicians (including peers) or trainees provide services under the supervision of a licensed clinician or a certified peer supervisor.

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State Plan under Title XIX of the Social Security Act
State: Massachusetts
Limitations to Services Provided to the Categorically Needy

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**State Plan under Title XIX of the Social Security Act
State: Massachusetts
Amount, Duration, and Scope of Medical
And Remedial Care and Services Provided to the Medically Needy**

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State Plan under Title XIX of the Social Security Act
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Amount, Duration, and Scope of Medical
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**State Plan under Title XIX of the Social Security Act
State: Massachusetts
Amount, Duration, and Scope of Medical
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State Plan under Title XIX of the Social Security Act
State: Massachusetts
Amount, Duration, and Scope of Medical
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State Plan under Title XIX of the Social Security Act
State: Massachusetts
Methods and Standards for Establishing Payment Rates – Other Types of Care

C. Mental Health Center Services

The fee-for-service rates for rehabilitative services provided by mental health centers when on a mobile or outreach basis in the community or in a nursing facility, and through telehealth modalities shall be reimbursed using the same methodology as described in Attachment 4.19-B, for mental health center services reimbursement in Section 8.h.9.

D. Rehabilitative Substance Use Disorder Treatment Services

The fee-for-service rates for rehabilitative services provided by substance use disorder treatment programs when on a mobile or outreach basis in the community or in a nursing facility, and through telehealth modalities shall be reimbursed using the same methodology as described in Attachment 4.19-B, for substance use disorder treatment clinics reimbursement in Section 8.h.10.