

# ARKANSAS REGISTER



## Proposed Rule Cover Sheet

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Agency or Division Name Division of Medical Services  
Other Subdivision or Department, If Applicable \_\_\_\_\_  
Previous Agency Name, If Applicable \_\_\_\_\_  
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Name of Rule SPA # 20-0013 Medication Assisted Treatment  
Newspaper Name Arkansas Democrat-Gazette  
Date of Publishing May 15th through May 17th, 2020  
Final Date for Public Comment June 13th, 2020  
Location and Time of Public Meeting No Public Hearing is scheduled

## NOTICE OF RULE MAKING

The Director of the Division of Medical Services of the Department of Human Services announces for a public comment period of thirty (30) calendar days a notice of rulemaking for the following proposed rule under one or more of the following chapters, subchapters, or sections of the Arkansas Code: §§ 20-76-201, 20-77-107, and 25-10-129.

### **Effective August 1, 2020:**

**Background:** Arkansas Act 964 of 2019 increases access to medications for Arkansas Medicaid eligible members diagnosed with opioid use disorder (OUD). The Act mandates that Arkansas Medicaid may not require prior authorization (PA) nor impose other requirements other than a valid prescription and compliance with medication assisted treatment (MAT) guidelines issued by the Substance Abuse and Mental Health Services Administration (SAMHSA). The Act intends to remove barriers to patients obtaining coverage for buprenorphine, naloxone, naltrexone, methadone, and their various formulations and combinations approved by the U.S. Food and Drug Administration (FDA) for the treatment of opioid addiction. This mandate to remove PA requirements pertains to prescription drugs for treatment of opioid addiction designated as preferred on the evidence-based preferred drug list (PDL), if there is at least one of each of the drugs which has the preferred designation on the PDL or are available without PA. Also, prescriptions for preferred prescription products, including oral and injectable medications, will not count against the monthly prescription benefit limit and are not subject to co-payment requirements. An additional change was made to clarify that tobacco cessation products do not count toward the three-prescription limit for pharmacy.

SAMHSA defines MAT as the use of medications in combination with counseling and behavioral therapies for the treatment of substance use disorders. A combination of medication and behavioral therapies is effective in the treatment of substance use disorders and can help some people to sustain recovery. This definition and other MAT guidelines can be found at: <https://www.integration.samhsa.gov/clinical-practice/mat/mat-overview>. Only providers who have an X-DEA identification number and have obtained an Arkansas Medicaid Specialty designation for MAT may prescribe medication required for the treatment of opioid use disorder for Arkansas Medicaid beneficiaries in conjunction with coordinating all follow-up and referrals for counseling and other services. In support of building capacity for SAMHS-compliant practices, Arkansas Medicaid is promulgating additional rules to recognize the importance of physician visits, counseling, and behavioral therapies in conjunction with prescribed medication by removing barriers to access. Visits to enrolled MAT practitioners will be excluded from the programmatic visit limits when the claim is coded with a specific Opioid Use Disorder (OUD) diagnosis. These services will also be excluded from the \$500 lab and x-ray limit.

**Arkansas Medicaid State Plan Amendment:** The Arkansas Department of Human Services (DHS), Division of Medical Services (DMS), intends to adopt a state plan amendment to meet the requirements of Act 964 of 2019. DMS added treatment for opioid use disorder when provided by an X-DEA waived practitioner and specified that preferred prescription drugs for treatment of opioid use disorder do not count against the prescription limit.

**Provider Manuals:** DMS intends to revise agency provider manuals to meet the requirements of Act 964 of 2019. The rule revisions are:

**Physician:** Sections 201.500 through 201.520 are revised to reflect Arkansas Medicaid participation requirements for providers of MAT for Opioid Use Disorder; Section 203.270 is revised to replace the

word “Mental” with “Behavioral;” Section 203.271 is added to explain the MAT Provider role for administering Opioid Use Disorder services; Section 225.000 is revised to automatically extend the outpatient hospital visit benefit limit when Opioid Use Disorder is rendered once monthly by MAT providers; Section 225.100 is revised to automatically override benefit limitations when one (1) Opioid Use Disorder test per month is ordered by a MAT provider; Section 226.000 is revised to automatically extend the physician visit benefit limit when services are rendered for Opioid Use Disorder once monthly by MAT providers; Sections 230.000 through 230.100 are added to explain coverage rules for MAT and minimum requirement compliance standards; Section 263.000 is revised to clarify where to locate information regarding procedures for physician-administered drugs; Section 263.100 is added to explain coverage for MAT prescription products; Section 272.600 is added to explain special reimbursement rules for MAT may be available; Section 292.920 is added to outline special billing procedures for MAT.

Outpatient Behavioral Health Services: Section 211.200 has a grammatical change; Section 214.200 is added to explain coverage rules for MAT and minimum requirement compliance standards.

Pharmacy: Section 211.105 is added to explain coverage and limitations for MAT products in the pharmacy program; Section 213.100 is revised to add prescriptions for Opioid Use Disorder and tobacco cessation products to the list of monthly prescription limits.

Federally Qualified Health Center: Section 212.220 is revised to add MAT for Opioid Use Disorders when furnished in collaboration with a physician; Section 220.000 is revised to exempt MAT for Opioid Use Disorder from the twelve (12) FQHC core service encounter per state fiscal year limit; Section 220.200 is revised to add Opioid Use Disorder when treated with MAT to the list of diagnoses for extension of benefits; Section 262.430 is added to provide guidelines for MAT billing.

Hospital: Section 272.501 is revised to incorporate coverage of MAT and Opioid Use Disorder treatment drugs when provided according to rules promulgated into the Arkansas Medicaid Physician’s provider manual.

Nurse Practitioner: Section 252.448 is revised to incorporate coverage of MAT and Opioid Use Disorder treatment drugs when provided according to rules promulgated into the Arkansas Medicaid Physician’s provider manual.

Rural Health Clinic: Section 211.100 is revised to include MAT for Opioid Use Disorders as a core service; Section 218.100 is revised to explain that the established benefit limit does not apply to individuals receiving MAT for Opioid Use Disorders when it is the primary diagnosis; Section 252.400 has been added as a place holder for Special Billing Procedures; Section 252.401 has been added to provide guidance for claims submitted for the Upper Respiratory Infection Acute Pharyngitis episode; Section 252.402 has been added to provide guidance for MAT billing procedures.

The proposed rule is available for review at the Department of Human Services (DHS) Office of Rules Promulgation, 2nd floor Donaghey Plaza South Building, 7th and Main Streets, P. O. Box 1437, Slot S295, Little Rock, Arkansas 72203-1437. You may also access and download the proposed rule on the Medicaid website at <https://medicaid.mmis.arkansas.gov/General/Comment/Comment.aspx>. Public comments must be submitted in writing at the above address or at the following email address: [ORP@dhs.arkansas.gov](mailto:ORP@dhs.arkansas.gov). All public comments must be received by DHS no later than June 13, 2020. Please note that public comments submitted in response to this notice are considered public documents. A public comment, including the commenter’s name and any personal information contained within the public comment, will be made publicly available and may be seen by various people.

If you need this material in a different format, such as large print, contact the Office of Rules Promulgation at 501-320-6266.

The Arkansas Department of Human Services is in compliance with Titles VI and VII of the Civil Rights Act and is operated, managed and delivers services without regard to religion, disability, political affiliation, veteran status, age, race, color or national origin. 4501888131

A handwritten signature in blue ink, appearing to read "Janet Mann", is positioned above a horizontal line.

Janet Mann, Director  
Division of Medical Services