

**STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES**

Notice of Proposed Medicaid State Plan Amendment (SPA)

CT 22-AF SPA: Updates to Alternative Benefit Plan (ABP) for the Medicaid Coverage Group for Low-Income Adults – Expanding Coverage for Naturopaths and Behavioral Health Clinicians

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS), which will amend the Alternative Benefit Plan (ABP) at Attachment 3.1-L of the Medicaid State Plan.

The ABP is the benefit package that is provided to the Medicaid low-income adult population under section 1902(a)(10)(A)(i)(VIII) of the Social Security Act (also known as HUSKY D). Pursuant to section 2001 of the Affordable Care Act, effective January 1, 2014, Connecticut expanded Medicaid eligibility to low-income adults with incomes up to and including 133% of the federal poverty level. The expanded coverage group is referred to as Medicaid Coverage for the Lowest-Income Populations.

Changes to Medicaid State Plan

Effective on or after October 1, 2022, this SPA will amend the ABP (Attachment 3.1-L of the Medicaid State Plan) in order to expand coverage for naturopath and behavioral health clinician services as detailed below.

First, as required by recently adopted state law in section 247 of Public Act 22-118, An Act Adjusting the State Budget for the Biennium Ending June 30, 2023, Concerning Provisions Related to Revenue, School Construction and Other Items to Implement the State Budget and Authorizing and Adjusting Bonds of the State, this SPA removes the age limit in the ABP for coverage of services for naturopaths in private practice (solo practice or in naturopath groups). Before the effective date of this SPA, naturopath services in private practice were covered only for members under age twenty-one.

Second, as required by recently adopted state law in section 25 of Public Act 22-81, An Act Expanding Preschool and Mental and Behavioral Services for Children, this SPA amends the ABP to expand coverage for services provided by behavioral health clinicians in private practice. Specifically, this SPA newly enables an independent licensed clinician (defined as a licensed psychologist, licensed marital and family therapist, licensed clinical social worker, or licensed

professional counselor) to bill for and be paid by the covered behavioral health services performed by an associate licensed clinician (defined as a licensed master social worker, licensed marital and family therapy associate, or licensed professional counselor associate) working under the person's supervision. This SPA does not change any scope of practice requirements, so an independent licensed clinician may supervise and bill for the services only of an associate licensed clinician that the person is authorized to supervise under state law. The independent licensed behavioral health clinician is paid at the same rate for services performed by an associate licensed clinician under the person's supervision as for services directly performed by the independent licensed behavioral health clinician.

The purpose of this SPA is to comply with the state laws referenced above and provide increased access to naturopath services and behavioral health clinician services.

This SPA corresponds to SPA 22-AE, which adds Medicaid coverage and payment for these services to the underlying Medicaid State Plan (Attachments 3.1-A, 3.1-B, and 4.19-B). This SPA cross-references to the description of the coverage in the Attachment 3.1-A pages for SPA 22-AE.

This SPA will not make any other changes to the ABP than as described above, which will continue to reflect the same coverage in the ABP for HUSKY D Medicaid members as in the underlying Medicaid State Plan. Accordingly, the ABP will continue to provide full access to Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services to beneficiaries under age twenty-one. This includes informing beneficiaries that EPSDT services are available and to inform beneficiaries about the need for age-appropriate immunizations. The ABP also provides or arranges for the provision of screening services for all children and for corrective treatment as determined by child health screenings. These EPSDT services are provided by the DSS fee-for-service provider network. EPSDT clients are also able to receive any additional health care services that are coverable under the Medicaid program and found to be medically necessary to treat, correct or reduce illnesses and conditions discovered regardless of whether the service is covered in Connecticut's Medicaid State Plan.

Likewise, this SPA will not make any changes to cost sharing for the services provided under the ABP. Connecticut does not currently impose cost sharing on Medicaid beneficiaries. Because there are no Medicaid cost sharing requirements for Connecticut beneficiaries, no exemptions are necessary in order to comply with the cost sharing protections for Native Americans found in section 5006(e) of the American Recovery and Reinvestment Act of 2009.

Fiscal Impact

DSS estimates this SPA will not change annual aggregate expenditures in Federal Fiscal Year (FFY) 2023 and FFY 2024 because the fiscal impact is being included within the underlying SPA, 22-AE.

Obtaining SPA Language and Submitting Comments

The proposed SPA is posted on the DSS website at this link: <https://portal.ct.gov/DSS/Health-And-Home-Care/Medicaid-State-Plan-Amendments>. The proposed SPA may also be obtained at any DSS field office, at the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the SPA from DSS or to send comments about the SPA, please email: Public.Comment.DSS@ct.gov or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105. Please reference “CT 22-AF SPA: Updates to Alternative Benefit Plan (ABP) for the Medicaid Coverage Group for Low-Income Adults – Expanding Coverage for Naturopaths and Behavioral Health Clinicians.”

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than October 27, 2022.



Alternative Benefit Plan

Scope Limit: <input type="text" value="See 'Other' re dental services"/>		<input type="button" value="Remove"/>
Other: <input type="text" value="Limits for Dental Services apply to dental services provided by FQHCs (see 'Dental Services (for Adults)' in EHB 1: Ambulatory patient services)
Connecticut does not have any Rural Health Clinics (RHCs)"/>		
Other 1937 Benefit Provided: <input type="text" value="Home Health Services - Home Health Aide Svs"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	<input type="button" value="Remove"/>
Authorization: <input type="text" value="Authorization required in excess of limitation"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="Not covered: Services for well child care or for prenatal or postpartum care that is not high risk"/>		
Other: <input type="text" value="-The cost of services provided by the home health agency may not exceed the cost if the client were in the appropriate institution
-Prior authorization required for more than 14 hours per week"/>		
Other 1937 Benefit Provided: <input type="text" value="Other Practitioner: Naturopath"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	<input type="button" value="Remove"/>
Authorization: <input type="text" value="Authorization required in excess of limitation"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="Only for clients under age 21. None"/>		
Other: <input type="text" value="-Authorization required for more than five visits per month to the the same provider"/>		
Other 1937 Benefit Provided: <input type="text" value="School Based Child Health Services"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	
Authorization: <input type="text" value="Other"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	



Alternative Benefit Plan

<input type="text"/>		<input type="button" value="Remove"/>
Other 1937 Benefit Provided: <input type="text" value="Other Practitioner: Professional Counselor Svs"/>	Source: Section 1937 Coverage Option Benchmark Benefit Package	<input type="button" value="Remove"/>
Authorization: <input type="text" value="Other"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="None See Attachment 3.1-A"/>		
Other: <input type="text" value="Prior authorization required only for psychiatric diagnostic evaluation."/>		
Other 1937 Benefit Provided: <input type="text" value="Other Practitioner: Licensed ADC Svs"/>	Source: Section 1937 Coverage Option Benchmark Benefit Package	<input type="button" value="Remove"/>
Authorization: <input type="text" value="Other"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="None See Attachment 3.1-A"/>		
Other: <input type="text" value="Prior authorization required only for psychiatric diagnostic evaluation."/>		
Other 1937 Benefit Provided: <input type="text" value="Other Pract: Licensed Marital & Family Therapist"/>	Source: Section 1937 Coverage Option Benchmark Benefit Package	
Authorization: <input type="text" value="Other"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="None See Attachment 3.1-A"/>		



Alternative Benefit Plan

Other: <input type="text" value="Prior authorization required only for psychiatric diagnostic evaluation."/>		<input type="button" value="Remove"/>
Other 1937 Benefit Provided: <input type="text" value="Other Practitioner: Psychologist"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	<input type="button" value="Remove"/>
Authorization: <input type="text" value="Other"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="None See Attachment 3.1-A"/>		
Other: <input type="text" value="Prior authorization required only for psychiatric diagnostic evaluation and psychological testing."/>		
Other 1937 Benefit Provided: <input type="text" value="Licensed Clinical Social Worker"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	<input type="button" value="Remove"/>
Authorization: <input type="text" value="Other"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="None See Attachment 3.1-A"/>		
Other: <input type="text" value="Prior authorization required only for psychiatric diagnostic evaluation."/>		
Other 1937 Benefit Provided: <input type="text" value="Preventive Services: Autism Spectrum Disorder Svcs"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	
Authorization: <input type="text" value="Prior Authorization"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	