

**205.6311 Substance use disorder treatment benefit -- Administrative regulations --
Contracts with Medicaid managed care organizations -- Annual report.**

- (1) The Department for Medicaid Services shall provide a substance use disorder benefit consistent with federal laws and regulations which shall include a broad array of treatment options for those with heroin and other substance use disorders.
- (2) The department shall promulgate administrative regulations to implement this section and to expand the behavioral health network to allow providers to provide services within their licensure category.
- (3) Providers of peer-mediated, recovery-oriented, therapeutic community models of care shall have the opportunity to contract with managed care organizations to be reimbursed for any portion of those services that are provided by licensed or certified providers in accordance with approved billing codes.
- (4) A Medicaid managed care organization shall:
 - (a) Authorize treatment for each diagnosis related to substance use disorder and co-occurring mental health and substance use disorder covered by Medicaid that is identified within the most updated edition of the Diagnostic and Statistical Manual of Mental Disorders issued by the American Psychiatric Association that meets the criteria for medical necessity and level of care; and
 - (b) Approve coverage and payment for continuing care at the appropriate level of care.
- (5) Beginning January 1, 2016, the Department for Medicaid Services shall provide an annual report to the Legislative Research Commission detailing the number of providers of substance use disorder treatment, the type of services offered by each provider, the geographic distribution of providers, and a summary of expenditures on substance use disorder treatment services provided by Medicaid.

Effective: March 25, 2015

History: Created 2015 Ky. Acts ch. 66, sec. 5, effective March 25, 2015.