LEGAL NOTICE STATE OF NEW JERSEY DEPARTMENT OF HUMAN SERVICES DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Reimbursement for Opioid Treatment Program (OTP) Delivery of Methadone to Residential Settings

TAKE NOTICE the New Jersey Department of Human Services (DHS), Division of Medical Assistance and Health Services (DMAHS) intends to seek approval from the United States Department of Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS), for the following amendment to the New Jersey Medicaid (Title XIX) State Plan in order to reimburse Opioid Treatment Programs (OTPs) for the delivery and provision of Methadone medication assisted treatment in a residential setting.

Subject to CMS approval, DMAHS intends to allow OTPs that provide methadone to individuals with an opioid addiction who are residing in a substance use residential setting or long term care facility to receive payment for that service. OTPs will be allowed to bill a bundled rate for the provision of the Methadone, the preparation of the medication and the associated travel costs to deliver the product. This provision will allow individuals in need of medication assisted treatment to obtain the appropriate medication when residing in a residential setting. The estimated fee-for-service total costs associated with this amendment for SFY 2025 and SFY 2026 are projected to be \$59,885 (\$20,960 State share) and \$179,655 (\$62,879 State share) respectively.

The fee schedules will be published on the Department's fiscal agent's website at https://www.njmmis.com under "rate and code information" when available.

This Notice is intended to satisfy the requirements of Federal statutes and regulations, specifically 42 CFR 447.205, and 42 U.S.C. 1396a(a)(13). A copy of this Notice is available for public review at the Medical Assistance Customer Centers, County Welfare Agencies, and the Department's website at:

http://www.state.nj.us/humanservices/providers/grants/public/index.html.

Comments or inquiries must be submitted in writing within 30 days of the date of this notice to:

Division of Medical Assistance and Health Services Office of Legal & Regulatory Affairs Attention: Margaret Rose P.O. Box 712, Mail Code #26 Trenton, New Jersey 08625-0712 Fax: 609-588-7343 E-mail: Margaret.Rose@dhs.state.nj.us