

Developing a Substance Use Disorder Waiver

Health First Colorado

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Stakeholder Meeting

May 28, 2019

Today's Agenda

- Welcome
- Waiver Timeline and Overview
- Discussion Topics
 - Using ASAM Criteria
 - Access to Care
- Next Steps for Stakeholder Engagement

Goals for Today's Meeting

- Understand the process and timeline for developing the Substance Use Disorder (SUD) 1115 waiver application.
- Inform key implementation milestones for the waiver application.
- Identify activities and topics for June stakeholder meetings.

Before We Get Started

- Please silence cell phones.
- Share your unique perspective.
- Honor the public space.
- Zoom participants – please raise your hand to speak or comment by chat.
- State your headline first so that everyone can participate.
- Write down anything that you were unable to say during the meeting. (Email to CHI.)



SUD Waiver Timeline and Application Overview

Our Mission

Improving health care access and outcomes for the **people** we serve while demonstrating sound stewardship of financial **resources**

C.R.S. 25.2.5-5.202

Granted the Department of Health Care Policy & Financing the authority to expand the Substance Use Disorder (SUD) benefit to include inpatient and residential treatment.

Will allow for coverage of the full continuum of SUD services.

Proposed Timeline

Summer 2018	Fall 2018	Winter 2019	Spring 2019	Summer 2019	Fall 2019	Winter 2020	Spring 2020	Summer 2020
Hiring/Consultant Contracting								
	Benefit Design/Development							
	Stakeholder Engagement							
Communications								
	Federal Authority Discussions/Creation				Federal Approval			
					CO interChange System Changes			
					Provider Communications/Training			
						ACC Contract Amend/ Provider Contracting		
								Benefit Begins

1115 SUD Waiver Demonstration Components

- Waiver application
- Implementation Plan
- Monitoring
- Evaluation

Evaluation and Monitoring

Examples of waiver goals and performance measures

Goals	Performance Measures
Increased rates of identification and engagement in treatment	Initiation and engagement in treatment
Improved adherence to treatment	<ul style="list-style-type: none"> Medication compliance Percentage of members with an SUD diagnosis utilizing SUD treatment services
Reduction in overdose deaths	<ul style="list-style-type: none"> Number of overdose deaths Number of high dose opioid prescriptions
Reduced utilization of ED and inpatient hospitalization	<ul style="list-style-type: none"> Number of ED visits for SUD diagnoses Inpatient admissions for SUD
Fewer readmissions to the same or higher level of care	30 day readmission rate following hospitalization for SUD diagnosis
Improved access to care for co-morbid physical health conditions	Percentage of members with SUD who access physical health care

Waiver Demonstration Milestones

1. **Access** to critical levels of care
2. Evidence-based, SUD-specific **patient placement** criteria
3. Use of nationally recognized standards to set **provider qualifications**
4. Sufficient **provider capacity**, including medication assisted treatment
5. **Treatment and prevention** strategies to address opioid abuse
6. Improved **care coordination and transitions**

Milestone 1

ACCESS TO CRITICAL LEVELS OF CARE FOR SUD

Coverage for the following services:

- Outpatient services
- IOP
- MAT
- Intensive levels of care in residential and inpatient settings
- Medically supervised withdrawal management

Milestone 2

USE OF EVIDENCE-BASED, SUD-SPECIFIC PATIENT PLACEMENT CRITERIA

Providers assess treatment needs based on SUD-specific, multi-dimensional assessment tools that reflect evidence-based clinical treatment guidelines.

Utilization management approaches are implemented to ensure

- access to SUD services at the appropriate level
- interventions are appropriate for the diagnosis and level of care

Milestone 3

USE OF NATIONALLY RECOGNIZED SUD-SPECIFIC PROGRAM STANDARDS FOR PROVIDER QUALIFICATIONS FOR RESIDENTIAL TREATMENT FACILITIES

OBH utilizing ASAM for licensure standards

MAT facilities will be required to offer MAT on-site or facilitate access off site

Milestone 4

SUFFICIENT CAPACITY AT CRITICAL LEVELS OF CARE

Assess provider capacity to identify gaps in availability of services for beneficiaries in the critical levels of care.

Includes availability of MAT

Milestone 5

IMPLEMENTATION OF COMPREHENSIVE TREATMENT AND PREVENTION STRATEGIES TO ADDRESS OPIOID USE DISORDER

Opioid prescribing guidelines

Expanded coverage of and access to naloxone

Implementation of strategies to increase utilization and improve functionality of prescription drug monitoring programs (PDMP)

Milestone 6

IMPROVED CARE COORDINATION AND TRANSITIONS BETWEEN LEVELS OF CARE

Link patients to community-based services after stays in residential and inpatient facilities.

Next Steps

- Discussion topics:
 - Milestone 2: Use of Evidence-Based, SUD-Specific Patient Placement Criteria
 - Milestone 4: Sufficient Capacity at Critical Levels of Care
- Write down anything you just heard that has you curious or concerned.



Milestone 2: Assessment and Placement Criteria

Milestone 2

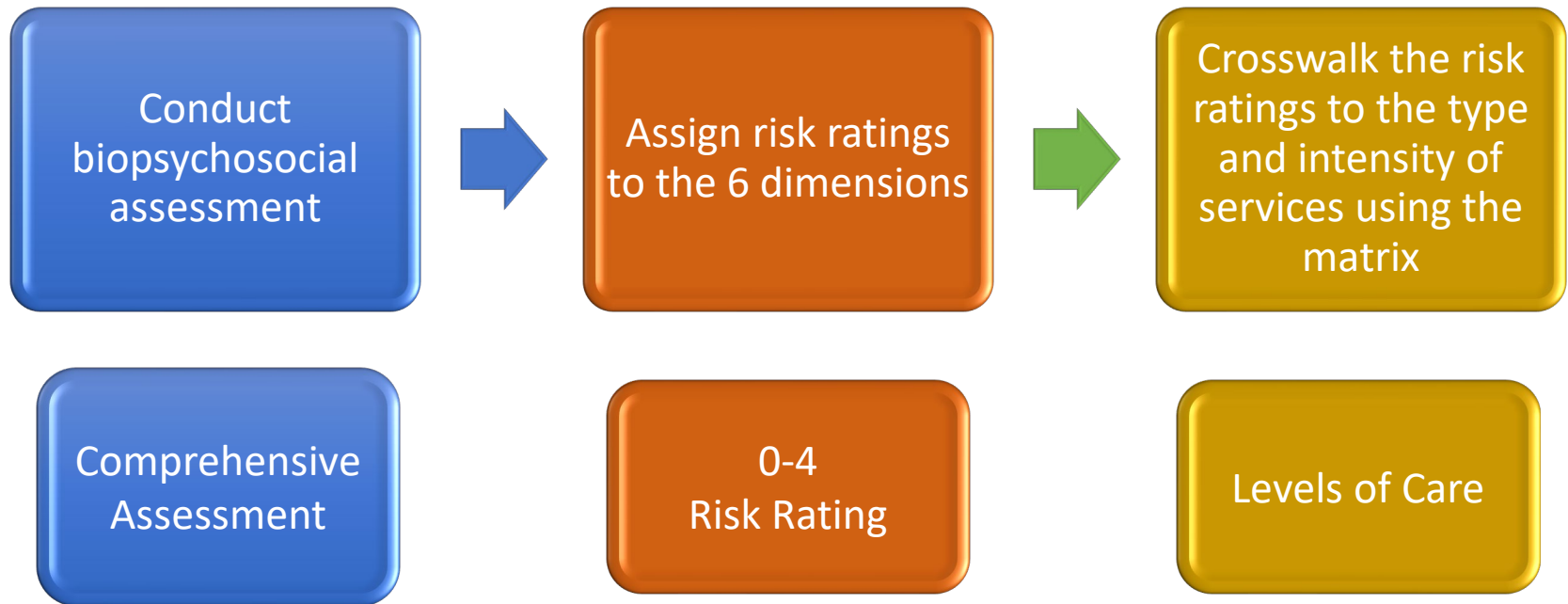
USE OF EVIDENCE-BASED, SUD-SPECIFIC PATIENT PLACEMENT CRITERIA

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American Society of Addiction Medicine (ASAM) Assessment Process



ASAM Level of Care Designations

Level 0.5

Early Intervention

- Assessment and educational services for at risk individuals
- Screening, brief intervention, referral to treatment, DUI educational programs

Level 1

Outpatient treatment

- Less than 9 hours of services per week, usually delivered as group therapy, individual therapy or peer support

Level 2

Intensive Outpatient Services or Partial Hospitalization

- IOP = more than 9 hours of services per week

Level 3

Residential and Inpatient Services

- 3.1: Clinically managed low-intensity residential services
- 3.2: Clinically managed population-specific high-intensity residential services for adults only (no adolescent equivalent)
- 3.5: Clinically managed residential services
- 3.7: Medically monitored high-intensity inpatient services

Level 4

Medically Managed Intensive Inpatient Services

- 24-hour nursing care, daily physician care



Why ASAM Matters for the SUD Waiver

The Implementation Plan requires that states meet the following criteria for patient placement:

“Providers assess treatment needs based on SUD-specific, multidimensional assessment tools, e.g., the ASAM criteria, or other patient placement assessment tools that reflect evidence-based clinical treatment guidelines”

States must: “describe how these criteria are established as requirements, e.g. in managed care contracts, policy manuals or other guidance”



Discussion Questions

- How consistent with ASAM are current patient placement decision-making processes?
- What would it take to make current practices more consistent with ASAM criteria?
- What would the benefits and challenges be of having a standardized tool for conducting assessments?





Milestone 4: Network Capacity

Milestone 4

SUFFICIENT CAPACITY AT CRITICAL LEVELS OF CARE

Assess provider capacity to identify gaps in availability of services for beneficiaries in the critical levels of care.

Includes availability of MAT

Ensuring Network Adequacy

- Outpatient Services
- Intensive Outpatient Programs
- Medication Assisted Treatment
- Intensive Levels of Residential and Inpatient Care
- Medically Supervised Withdrawal Management



Discuss Poll Results



Next Steps

Proposed Timeline

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June Stakeholder Sessions

- Focus of Meetings
 - Report on progress and outcomes of today's discussion.
 - Review waiver application highlights
- Wednesday, June 19 from 3:30-5:30 pm in Colorado Springs
- Thursday, June 20 from 8:00 – 10:00 am in Greeley
- Thursday, June 20 from 3:30-5:30 pm via Zoom.



Please Complete An
Evaluation and Thank You for
Your Time!

