



COLORADO

Department of Health Care
Policy & Financing

Expanding the Substance Use Disorder Continuum of Care

1115(a) Substance Use Disorder

**Second Annual
SUD Stakeholder Forum**

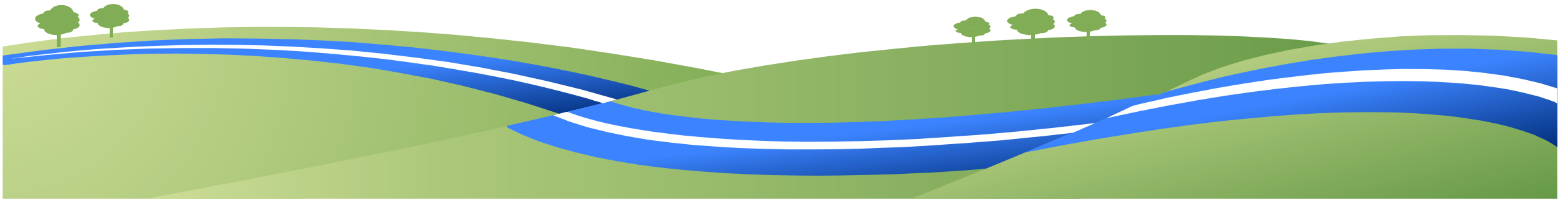
October 2022

Agenda

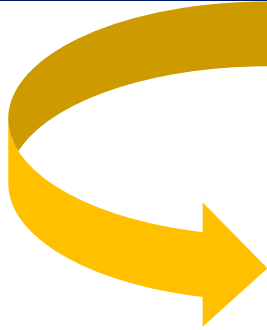
- Overview
- Goals of the 1115 Demonstration
- Outline of Milestones
- Completed Key Deliverables & Events
- Future Deliverables & Events
- Review of Progress toward Milestones 1 through 6
- Questions

Overview

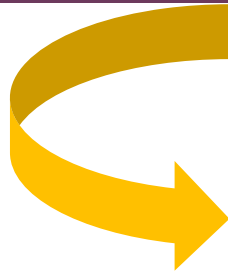
- The Department of Health Care Policy & Financing (HCPF) received Federal approval to cover Substance Use Disorder (SUD) services in Institutions for Mental Disease (IMDs) and other settings.
- Colorado received approval from Centers for Medicare & Medicaid Services (CMS) through an **1115 SUD Demonstration Waiver**.
- Colorado filed a State Plan Amendment (SPA) to modify our State Medicaid coverage.
- SUD Providers must follow the American Society of Addiction Medicines (ASAM) nationally recognized guidelines which provide evidence-based SUD level of care standards.
- Standards for placement, continued stay, transfer, and discharge include guidelines for admission and interventions for each level of care.



Each year the State of Colorado must submit an annual report to CMS



The first Demonstration Year (DY1) of the 1115 SUD Waiver was completed

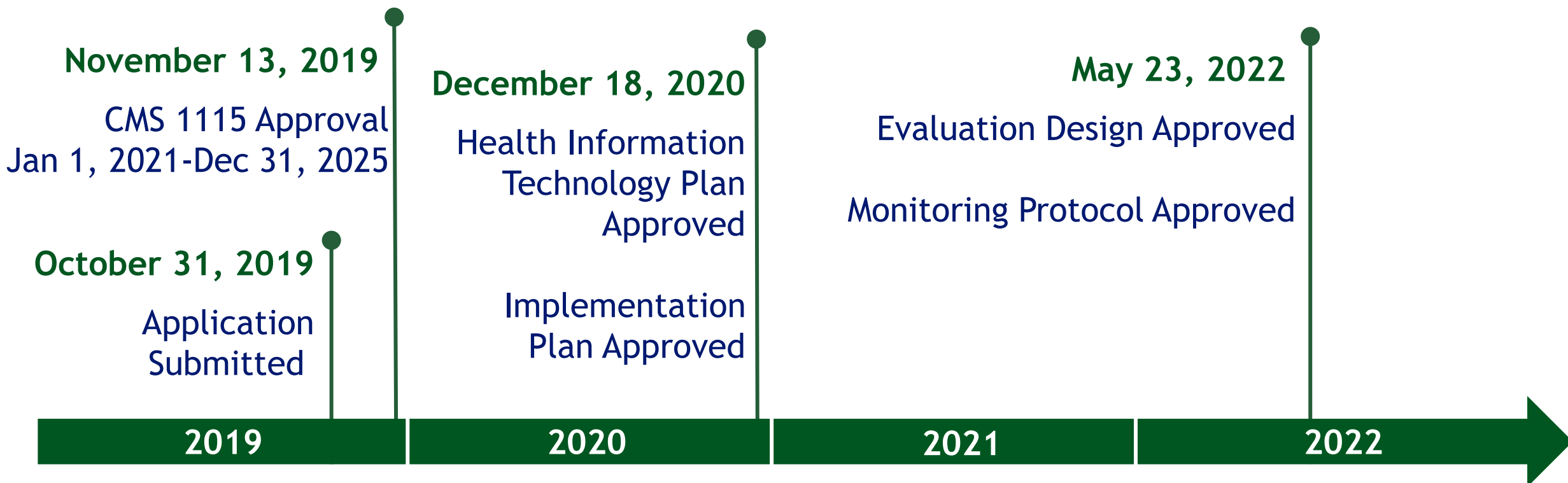


The following presentation is a summary of the DY1 report

Goals of the 1115 Demonstration

- 1 Increase treatment options for opioid use disorders (OUD) and other SUDs
- 2 Increase retention in treatment for OUD and other SUDs
- 3 Reduce overdose deaths
- 4 Reduce use of emergency department and inpatient hospital settings for OUD and other SUD treatment
- 5 Reduce readmissions to the same or higher level of care
- 6 Improve access to care for physical health conditions for those with OUDs or other SUDs

Completed Key Deliverables and Events

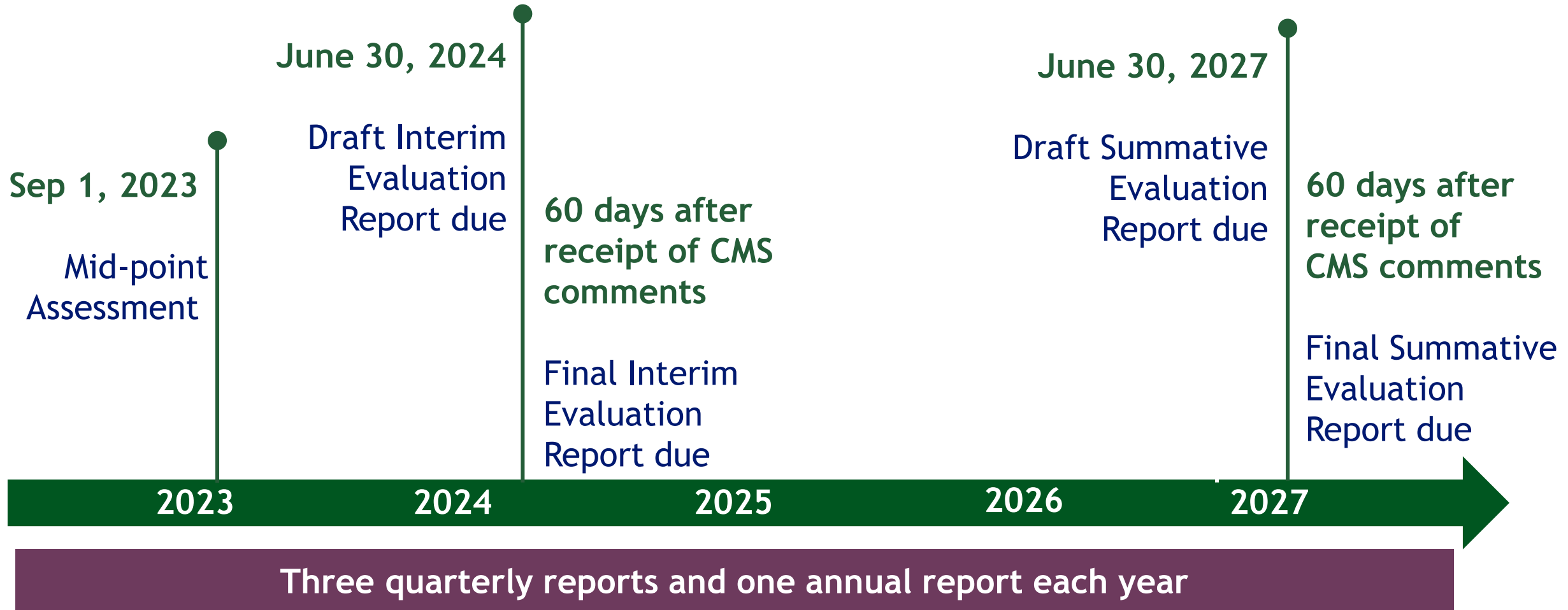


Quarterly & Annual Reports To Date: Five quarterly reports and one annual report submitted to CMS

Program Documentation & CMS Approved Deliverables can be accessed at

<https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/81176>

Future Key Deliverables and Events



Outline of Milestones

- 1 Access to critical levels of care for SUDs
- 2 Widespread use of evidence-based, SUD-specific patient placement criteria
- 3 Use of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities
- 4 Sufficient provider capacity at each level of care, including medication-assisted treatment (MAT)
- 5 Implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUD
- 6 Improved care coordination and transitions between levels of care

Milestone 1

Access to critical levels of care for SUDs

CMS Requirements

- Coverage of:
 - Outpatient (including early intervention)
 - Intensive Outpatient services (IOP)
 - MAT (Medication Assisted Treatment) medications, counseling and other services with sufficient provider capacity to meet needs of Medicaid beneficiaries in the state
 - Intensive levels of care in residential and inpatient settings
 - Medically supervised Withdrawal Management (WM)

State Activities

- State Plan Updated
 - ✓ Medicaid service definitions
 - ✓ Managed care entity contracts require providers to use ASAM criteria
 - ✓ Inpatient (Residential/Hospital) ASAM services permitted in IMDs
- Providers licensed at each ASAM level of care
- Changes communicated through
 - ✓ in-person discussions
 - ✓ provider forums
 - ✓ State website
- Provider ASAM training
- Agencies' ASAM manuals



Milestone 2

Widespread use of evidence-based, SUD-specific patient placement criteria

CMS Requirements

- Widespread use of evidence-based SUD criteria to place members in treatment:
 - Providers must use ASAM criteria and review treatment needs based on SUD-specific, comprehensive assessment tools.
- Utilization Management (UM) approach:
 - Access to services at the right Level of Care
 - Treatment appropriate for diagnosis and Level of Care
 - Independent process to review placement in Residential Level of Care

State Activities

- The MCEs offered trainings on ASAM criteria
- Quarterly Forums offered to providers and other stakeholders
- Legislation requiring reporting on Residential Level of Care Utilization Management
 - ✓ First Quarterly Report published Oct. '21
 - ✓ Quarterly reports are on the website
 - ✓ Report for [SUD UM Demonstration Year 1](#)

Milestone 3

Use of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities

CMS Requirements

- New standards for Residential LOC providers and updates to:
 - Licensure requirements and policy manuals
 - Managed Care contracts
- Process to review:
 - Residential LOC providers to ensure they meet the new standards including ASAM criteria
- Residential facilities must offer MAT or arrange for members to receive MAT at another location

State Activities

- Updated licensure regulations to incorporate ASAM standards for Residential LOC providers
- Contracted to have Residential treatment facilities reviewed through Quality Assurance audits
- Updated the contracts of residential providers to require they make MAT services available to Medicaid members

Milestone 3 continued

Use of nationally recognized SUD-specific program standards to set provider qualifications for residential treatment facilities

CMS Requirements

- Updated standards for Residential LOC providers:
 - Licensure requirements
 - Policy manuals
 - Managed Care contracts
- Process to review and ensure:
 - Residential treatment providers meet new standards including ASAM criteria
- Residential treatment facilities must offer MAT or arrange for members to receive MAT at another location if needed

State Activities

- Residential treatment facilities are monitored
- Residential treatment facilities licensed to provide MAT
 - ✓ Licenses are tracked
 - ✓ Renewals are tracked
- Billing and coding requirements were updated for the new services covered

Milestone 4

Sufficient provider capacity at each level of care, including MAT

CMS Requirements

- There needs to be enough providers enrolled in Medicaid who are accepting new patients in the critical levels of care throughout the State
- There needs to be an adequate number of providers who offer MAT to Medicaid members

State Activities

- The Behavioral Health Capacity Registry
 - ✓ Live April '21
 - ✓ Updated daily
 - ✓ Identifies licensed Opioid Treatment Programs (OTPs) accepting new clients
- Mobile Health units delivering MAT
- Hospitals start MAT in emergency departments, and coordinate follow-up treatment with community providers
- Expand access to MAT by serving uninsured and anyone up to 300% of the federal poverty level at any OTP that serves Medicaid members

Milestone 5

Implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUDs of care for SUDs

CMS Requirements

- Guidelines on prescribing opioids need to be put into place
- Access to Naloxone* needs to increase
- Prescription drug monitoring programs should be in place

*Naloxone is medication used for the emergency treatment of known or suspected opioid overdoses

State Activities

- OpiSafe program started
- Money from Marijuana Tax used for
 - ✓ Prevention and treatment programs
 - ✓ Increase public awareness through the Lift the Label campaign
- Drug Utilization Review program monitors how opioids are provided
- Naloxone provided free to
 - ✓ Syringe service programs, law enforcement, public health agencies, school districts, and first responders
 - ✓ All at-risk people discharged from the hospital

Milestone 6

Improved care coordination and transitions between levels of care

CMS Requirements

- Members will receive better care coordination
- It will be easier for members to move to other levels of care
- Members, particularly those with OUD, who receive treatment in residential and inpatient facilities, will get help accessing community-based services after they are done with their treatment

State Activities

- MCEs' Care Coordination policies updated
- Identified problems with certain ASAM LOC were addressed by some facilities adding additional services to ensure members did not have any breaks in treatment
- Partnership with the Colorado Hospital Association to help people, especially pregnant and parenting people, with an OUD get connected with community-based services for follow up after they leave the hospital

Open Discussion

Questions?

Suggestions?

Comments?

Feedback?