

Expanding the Substance Use Disorder Continuum of Care 1115(a) Substance Use Disorder

Third Annual SUD Stakeholder Forum

October 2023

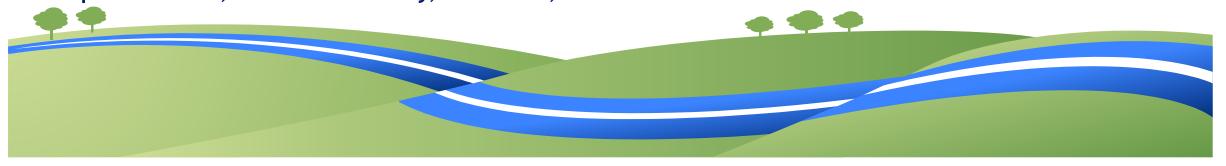
Agenda

- > Overview
- > Goals of the 1115 Demonstration
- Completed Key Deliverables & Events
- Outline of Milestones
- > 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.
- Providers must follow the American Society of Addiction Medicine's (ASAM) nationally recognized guidelines which provide evidence-based SUD level of care (LOC) standards for placement, continued stay, transfer, admission and interventions





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



The second Demonstration Year (DY2) of the 1115 SUD Waiver was completed



The following presentation is a summary of the DY2 report



Goals of the 1115 Demonstration

- Increase treatment options for opioid use disorders (OUD) and other SUDs
- Increase retention in treatment for OUD and other SUDs
- Reduce overdose deaths
- Reduce use of emergency department and inpatient hospital settings for OUD and other SUD treatment
- Reduce readmissions to the same or higher level of care
- 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: seven quarterly reports and two 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

June 30, 2024

Draft Interim
Evaluation
Report due

June 30, 2027

Draft Summative Evaluation Report due

60 days after receipt of CMS comments

Final Summative Evaluation Report due

2024

2025

60 days after

comments

Final Interim

Evaluation

Report due

receipt of CMS

2026

2027

Three quarterly reports and one annual report each year



Outline of Milestones

- 1 Access to critical levels of care for SUDs
 - 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
 - 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





Access to Critical Levels of Care for SUDs

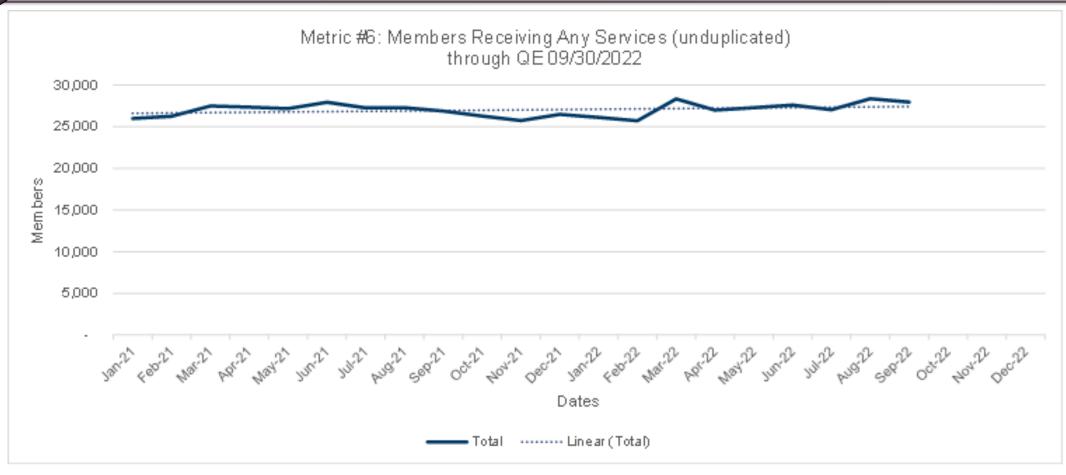
CMS Requirements

- > 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)

- Supported expansion of opioid treatment program (OTP) access through mobile MAT regions, funded five competitive grants to cover OTP medication unit start-up costs
- Implemented OwnPath, a care directory for providers and members, to help find services
- ➤ Fentanyl Accountability and Prevention Legislation requires public and private facilities provide MAT and withdrawal management treatment to incarcerated individuals

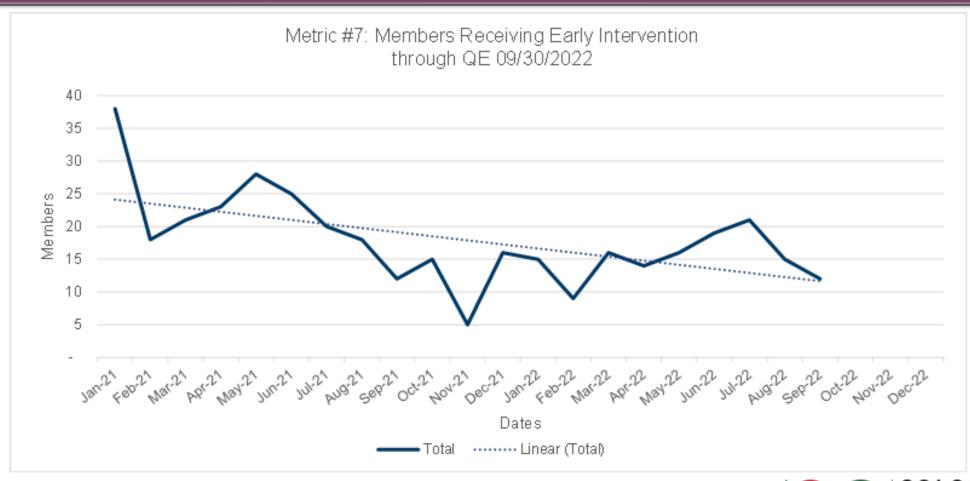


Members Receiving SUD Services Increased



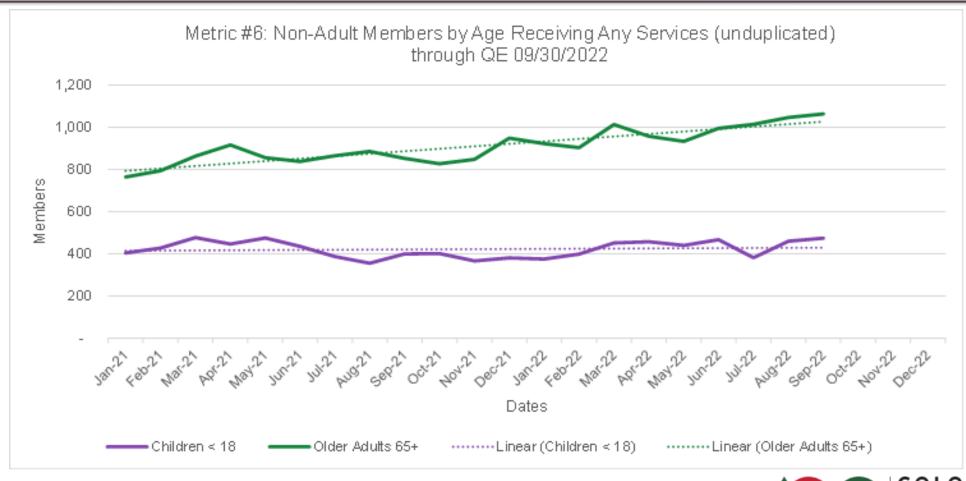


Members Receiving SUD Early Intervention Decreased



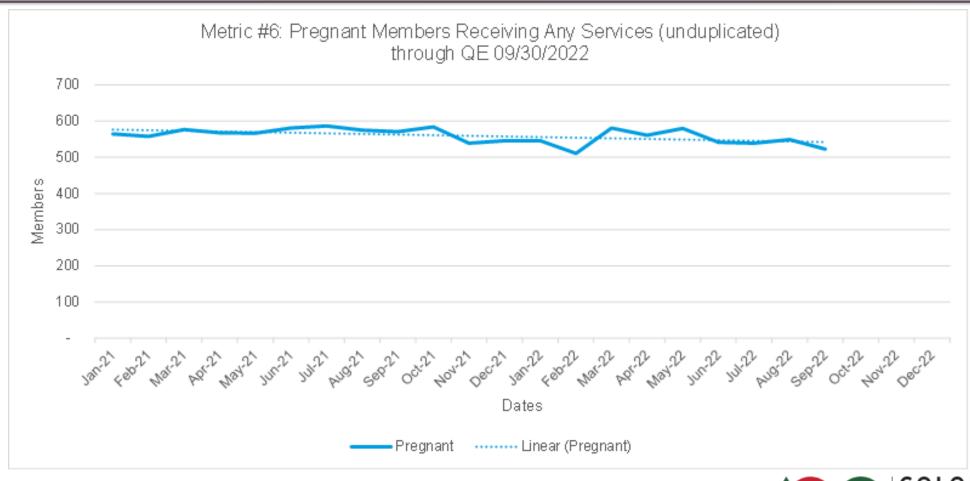


Senior and Youth Members Receiving SUD Services Increased





Pregnant Members Receiving SUD Services Decreased





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

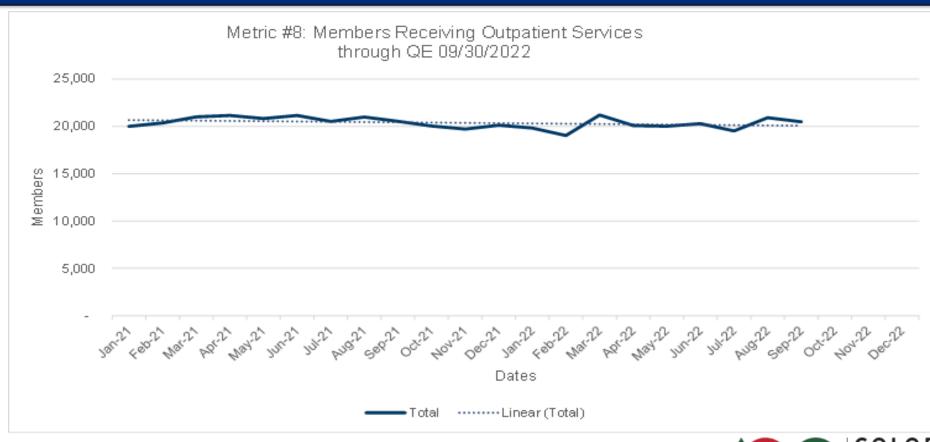
CMS Requirements

- ➤ 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

- All Managed Care Entities' (MCE) contracts require all SUD providers to have ASAM training, and use ASAM criteria when completing assessments
- > DY2 began tracking sub-population utilization
- Using Residential SUD Utilization Management data to inform policies including youth service reimbursement and length of stay minimum authorization times
- Quarterly reporting on Residential Level of Care Utilization Management thru SB21-137

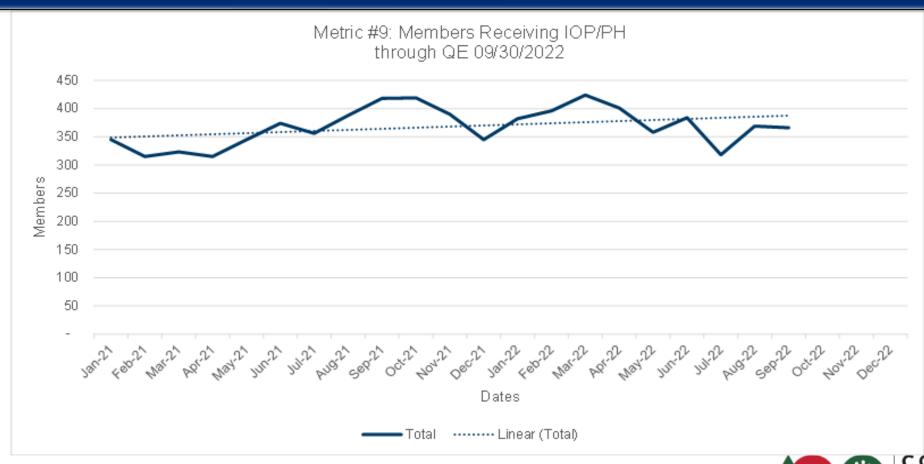


Members Receiving Outpatient Services Increased



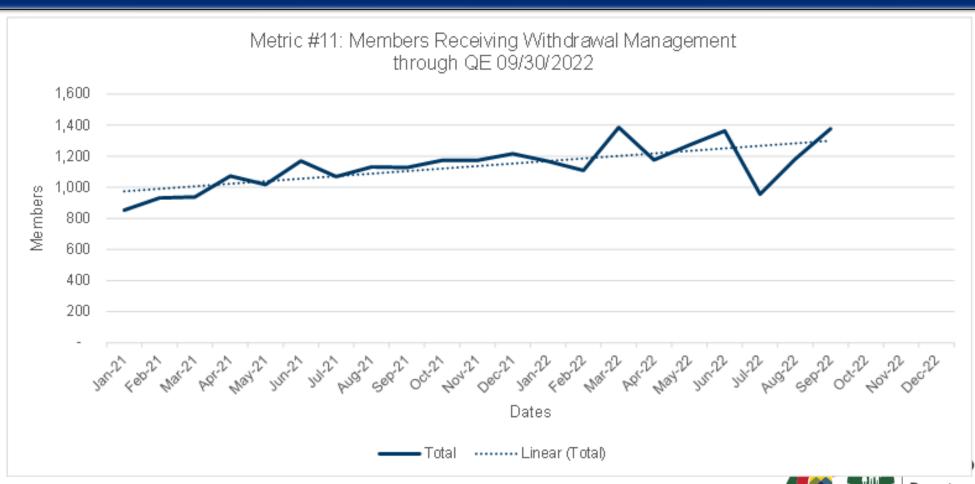


Members Receiving Intensive Outpatient Program Increased





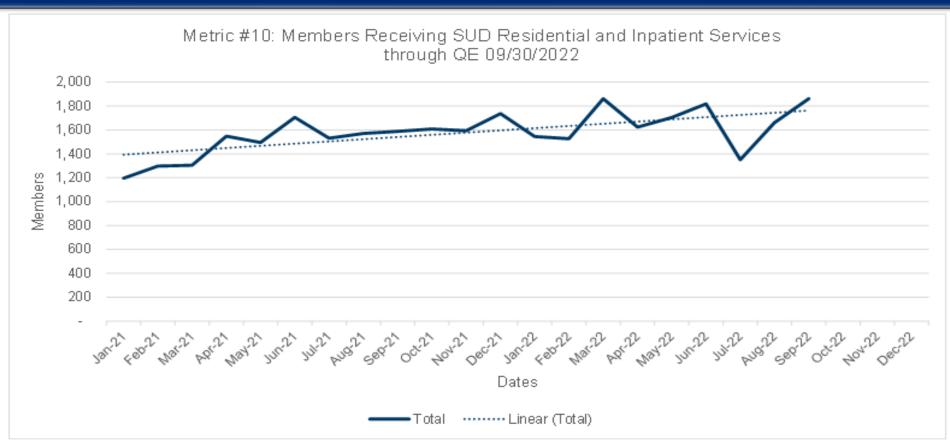
Members Receiving SUD Withdrawal Management Increased





RADO

Members Receiving SUD Residential & Inpatient Services Increased







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

- Collaborated with the Behavioral Health Administration (BHA) on SUD provider licensing
- Updated the SUD provider manual
- ➤ Ensured licensure language aligned with The ASAM Criteria's best practices around access to MAT



Sufficient provider capacity at each level of care, including MAT

CMS Requirements

- ➤ Enough providers enrolled in Medicaid who are accepting new patients in critical LOCs throughout the State
- Adequate number of providers who offer MAT to Medicaid members

Legislative Activities

- SB22-077 Interstate LPC Compact
- ➤ HB22-1052 Promoting Crisis Services to Students
- ➤ HB22-1214 Crisis Providers provide SUD support
- SB22-226 Health-Care Workforce grant programs





Sufficient provider capacity at each level of care, including MAT

CMS Requirements

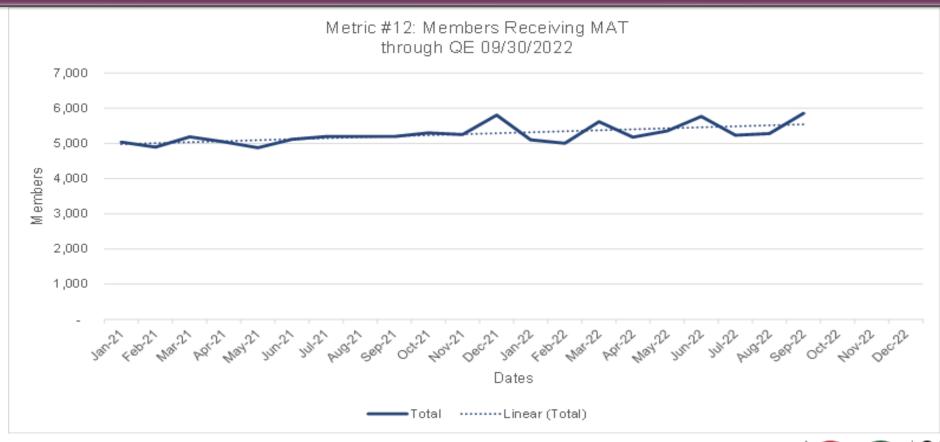
- ➤ Enough providers enrolled in Medicaid who are accepting new patients in critical LOCs throughout the State
- Adequate number of providers who offer MAT to Medicaid members

- MCEs submit annual network adequacy plans, reviewed by HCPF to monitor growth of networks
- ➤ BHA upgrading the Behavioral Health Bed Tracker, to enhance provider ability to see facilities with available beds by ASAM LOC
- ➤ 2022 Workforce Strategic Plan: "An Approach to Community Partnership" includes expansion of the Peer Support Professional workforce



Milestone 4 - Sufficient Provider Capacity at Each Level of Care, Including MAT

Members Receiving Medication Assisted Treatment (MAT) Increased





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

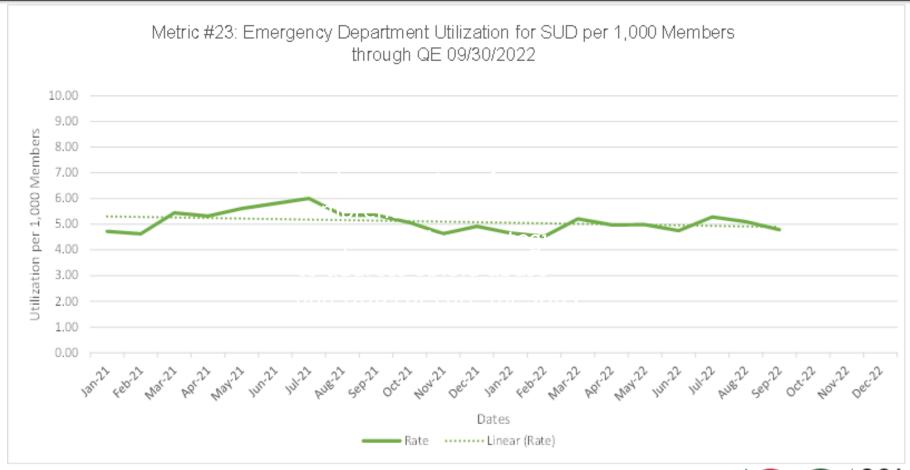
*Naloxone is medication used for the emergency treatment of known or suspected opioid overdoses

- Partnered with Colorado Consortium for Prescription Drug Abuse Prevention
- > First state Opioid Abatement Conference
- Implemented new policies
 - ✓ Morphine Milligram Equivalent policy
 - ✓ Short Acting Opioid Pill Quantity Limits
 - ✓ Opioid Naïve Policy
 - ✓ Dental Provider Limit
- Promoted use of Non-emergent Medical Transportation (NEMT)
- Maternal Overdose Matters Initiative
 - Provides overdose education and naloxone to pregnant and parenting beneficiaries



Milestone 5 - Implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUDs of care for SUDs

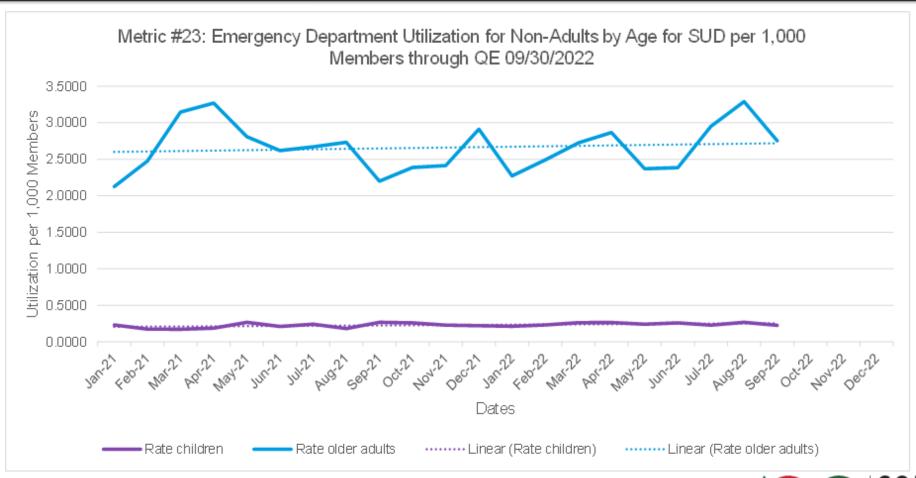
Members Emergency Department Utilization Decreased





Milestone 5 - Implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUDs of care for SUDs

Senior and Youth Members Emergency Department Utilization Decreased







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

- ➤ The State published "Bridging the Gaps: Policy Recommendations to Implement a Cohesive Statewide Care Coordination Infrastructure"
 - ✓ Provided recommendations on the implementation of statewide care coordination
- SB22-177 Investments in Care Coordination was signed into law
 - ✓ Requires improved care coordination infrastructure
 - ✓ Ensures care navigators are available statewide



Health Information

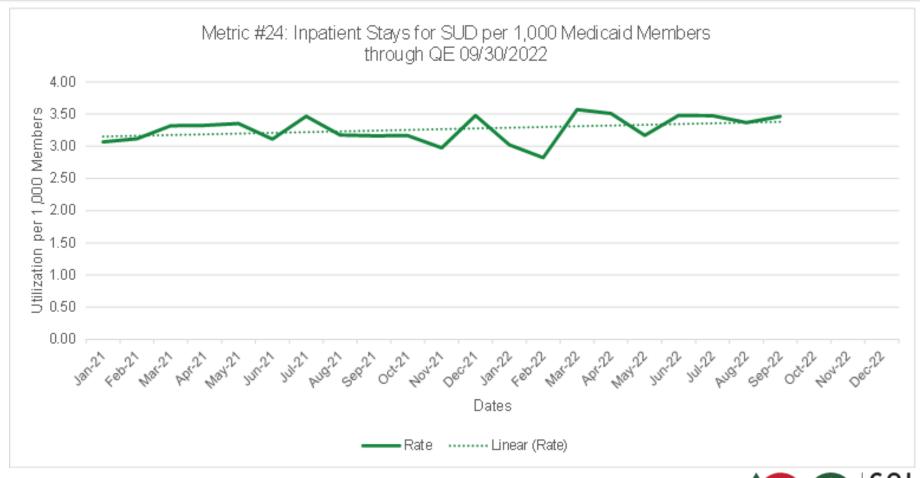
Health Information Technology Achievements

- > SB22-077 required prescribers to register and maintain a user account with the Prescription Drug Monitoring Program (PDMP), and query it before prescribing an opioid or benzodiazepine
 - ✓ Active PDMP user accounts increased from 46,036 at the end of DY2Q1 to 50,278 at the end of DY2Q4
- Supported the web-based Overdose Detection Mapping Application Program
 - ✓ Reports and tracks incidences of fatal and non-fatal drug overdoses and synthetic opiate poisonings
- > Telehealth and Broadband Initiative
 - ✓ Aimed to increase the use of telehealth, and provide reliable and affordable broadband access for health organizations and consumers



Other SUD Metrics

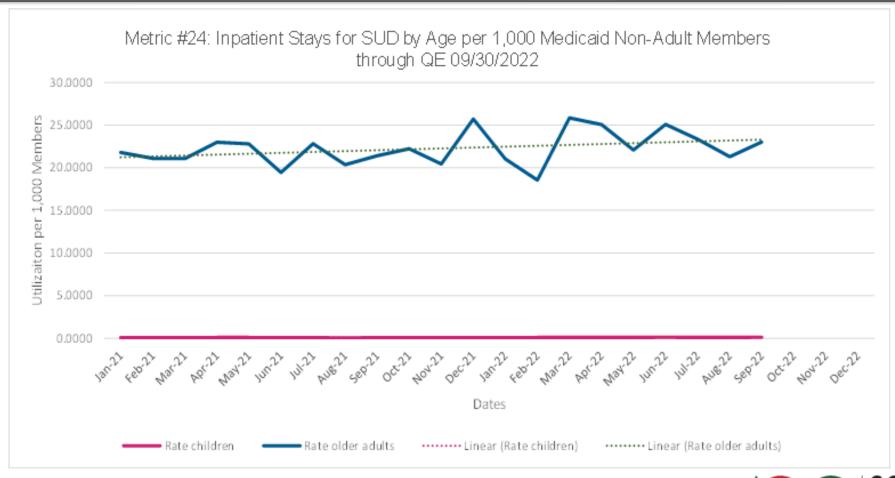
Inpatient Stays for SUD per 1,000 Members





Other SUD Metrics

Senior and Youth Members Inpatient Stays for SUD per 1,000 Members





Open Discussion

Questions?

Suggestions?

Comments?

Feedback?

