Thursday Connections with SUD at DHS Oct. 17, 2024



Agenda

3:00-3:05: Logistics and introductions

3:05-3:20: Team updates

3:20-3:40: Legislative Update

3:40-3:50: ASAM Enrollment

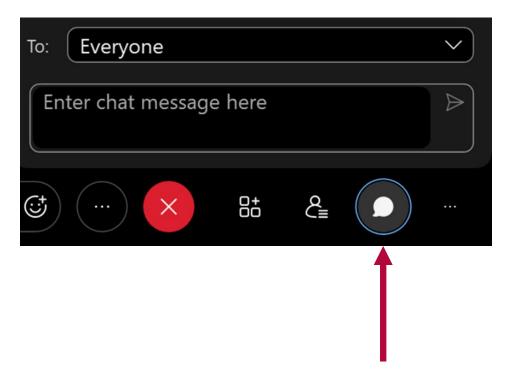
3:50-4:00: Q&A

Meeting Logistics

- All attendees, except presenters, will remain muted
- To save bandwidth, please keep cameras off
- We will work to address all questions during the time allotted.
- A summary of questions, comments and responses will be posted on the Thursday Connections with SUD webpage within one month of the meeting date.

Using Chat

- 1. Submit questions in the chat
- Questions submitted via chat will be addressed during Q&A portion of meeting
- 3. Post chat questions to everyone to allow for all attendees to see conversation
- 4. Refrain from using chat during presentations



Use chat feature to enter questions

SUD Unit Leadership at DHS

- Jen Sather, Deputy Director for Substance Use Disorder Services
- Kim Maley, Manager of SUD Recovery and Prevention Services

- Andrea Abel, Supervisor, Promotion, Prevention and Early Intervention Team
- Nathaniel Dyess, Supervisor, SUD Reform Team
- Amelia Fink, Supervisor, SUD Clinical Policy Team
- Chris Renville, Interim Supervisor, Behavioral Health American Indian Team
- Kate Toftness, Opioid Response Team Supervisor Interim



American Indian Team Updates

Chris Renville | American Indian Team Supervisor



Al Team Updates

- Hired a new Grant Manager, Pam Hughes started September 25
- Hoping to soon hire a Work Out of Class for the last Grant Manager vacancy
- The American Indian Team Manager position has closed earlier this week
- The permanent American Indian Team Supervisor is currently posted



Opioid Response Team Updates

Kate Toftness | Opioid Response Team Supervisor- Interim



Opioid Response Team

No updates at this time

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Reform and Redesign Team Updates

Nathaniel Dyess | Reform and Redesign Team Supervisor



SUD Reform & Redesign Team Updates – 1115 SUD System Reform Demonstration Waiver

- Centers for Medicare and Medicaid Services (CMS) granted MN a temporary extension of the 1115 SUD waiver, through June 30, 2025.
- 127 nonresidential programs must certify an ASAM level of care by Jan. 1, 2025.
- NEW streamlined ASAM Certification Checklist
- Providers seeking certification must first meet the following:
 - 245G or 245F licensed
 - Have the 245G.20 co-occurring licensing designation
 - Be enrolled as a Minnesota Health Care Programs (MHCP) provider
- Attend Virtual Office Hours for support in getting certified Thursdays at 2:00!

SUD Reform & Redesign Team Updates - ASAM Implementation

- ASAM Criteria 4th Edition textbook distribution will begin Fall 2024.
- Request for Proposal (RFP) for Evidence-Based Training
 - RFP was released in May
 - Proposal review complete
- ASAM Criteria Assessment Interview Guide
- Clinical Documentation Training PowerPoint

SUD Reform & Redesign Team Updates - ASAM Training & Support

- On-the-Spot: ASAM Integration and Application
 - 3rd Friday at 11 am
- Open Office for SUD Portal Assistance
 - 2nd Friday at 11 am
 - November 8
 - December 13
- ASAM Lunch & Learn Training Meeting
 - 4th Wednesday at 12 pm
 - October 23
 - November 27

SUD Reform & Redesign Team Updates— Paperwork Reduction & Systems Improvement

- ASAM Readiness Tool in development
 - A tool that organizations can use to self-assess their strengths and gaps in preparedness to integrate ASAM 4th edition
- Steering Committee Meetings
 - October focus: high-level overview of ASAM Readiness Tool & communication of transition plan
 - November focus: identify and agree on possible 'Quick Wins' within the recommendations

SUD Reform & Redesign Team Updates – Community of Practice (CoP)

• SUD CoP Webpage – provides overview, agendas, and summaries.

SUD Reform & Redesign Team Updates – 1115 Reentry Demonstration

- The Minnesota Reentry Feasibility study was completed on Sept. 30
- 2024 Legislature directed DHS to apply to CMS for an 1115 Reentry Waiver with the expected application submission date of early 2025
- Tribal consultation is being finalized for the tribal entity seat(s) for Reentry Working Group and for input on the tribal pilot site
- The county jail pilot sites will be determined by a competitive process. More information will be coming in future meetings
- An e-memo regarding the reentry waiver project has been sent to all DHS partners and providers

SUD Reform & Redesign Team Updates – Contingency Management MA Study

• Deliverables:

- Received & reviewed: Contingency Management Current Landscape Summary: Oct. 9
- Coverage, Cost, Policy, and Operations Options Summary: Dec. 4
- 1115 Waiver Application Components Report: March 27, 2025
- Recommendations for a Monitoring Plan: May 9, 2025
- Providers & professionals with contingency management experience in Minnesota who are interested in participating as a key informant, please contact andrea.suker@state.mn.us.
- Statute reference: MN Laws 2023, Regular Session, Chapter 61, Article 4, Section 23 directed DHS to complete a Medical Assistance Behavioral Health System Transformation Study to evaluate the feasibility, potential design, and federal authorities needed to cover contingency management services under the medical assistance program.

SUD Reform & Redesign Team Updates – Federal Block Grant Peer Review Process

- Federal Fiscal Year (FFY) 2024 ends Sept. 20, 2024
- An e-memo seeking professionals to assist with independent peer review to be released in October or November
- Please submit questions regarding the peer review process to sud.peer.review.dhs@state.mn.us
- Code of Federal Regulations (CFR) 96.136



SUD Clinical Policy Team

Amelia Fink | SUD Clinical Policy Supervisor



SUD Clinical Policy Updates

- State Plan Amendment for OTP Bundled Rates posted (25-01) submitted to CMS
- <u>DRAFT State Plan Amendment (24-0040)</u> for ASAM Outpatient levels of care and 3% residential rate increase out for public comment
- Proposed Updates to The ASAM Criteria, Fourth Edition, Adolescent Volume
 - Feedback must be submitted through the <u>online submission form</u> in order to be considered.
- ASAM Criteria Adolescent Volume Case Sketch Interest Survey

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SUD Primary Prevention and Recovery Team

Andrea Abel | SUD Primary Prevention and Recovery Supervisor



SUD Primary Prevention and Recovery Team

No updates at this time



SUD Problem Gambling Team

Kim Maley | Manager of SUD Prevention and Recovery



Request for Applicants for Advisory Task Force on Compulsive Gambling

- DHS is looking for applicants for its new Advisory Task Force on Compulsive Gambling
 - There are 15 open seats across various categories including family/community members, tribal representatives, treatment /prevention providers, individuals with lived experience, and underserved community representatives. Don't miss this opportunity to make a difference in your community!
 - Apply here: <u>Board/Commission Details (state.mn.us)</u>
 - Responsibilities include attending bi-monthly online meetings for 90 minutes and the chance to participate in outreach events or subcommittee meetings. Join us and play a vital role in shaping strategies for Gambling Disorder in Minnesota.
 - Email: dhs.problemgamblingprogram@state.mn.us with questions!

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SUD Harm Reduction Team

Kim Maley | Manager of SUD Recovery and Prevention



Harm Reduction Team Updates

- Outreach to Tribal Nations: On-site visits with White Earth, Leech Lake, Red Lake, Bois Forte, Fond du Lac, Grand Portage, Mille Lacs, Lower Sioux. Upcoming visits: Upper Sioux, Shakopee Mdewakanton Sioux, Prairie Island and Urban Indian Organizations.
- Harm Reduction Vending Machines: Contracting process underway with Tribal Nations.
- Winter Safe Recovery Site RFP: Targeting release this winter, more details to come.
- Narcan Portal: Expected to re-open by year-end, with permanent funding secured.

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2025 Legislative Session Behavioral Health Administration

Gena Savage | BHA Legislative Director

Note

- All the ideas we are highlighting today are considered DRAFT
 - These ideas are still under discussion and consideration
- No decisions have been made yet about what will be in the 2025 Governor's budget, nor is this a comprehensive list of items the agency is considering
 - The November budget forecast, which will be released in early December, is the next big step in the budget development process

Behavioral Health

Increase MA rates for outpatient services and residential SUD services

 Implements the recommendations from the Outpatient Rate study, which recommends increasing rates for outpatient physical health services, mental health services and outpatient and residential SUD services

SUD treatment service changes

- Defines current individual and group services into three categories (psychotherapy, psychoeducation and recovery support services) to align with ASAM Criteria, 4th edition
- Invests in workforce development
 - Creates new SUD practitioner position
 - Removes bachelor degree requirement for treatment coordinators

Behavioral Health

Recovery Residence certification and workgroup

 Creates and funds a certification body for recovery residences, and studies national payment models for recovery residences

Funding and research for problem gambling treatment

 Redirects current grant funding for the MN Alliance on Problem Gambling to a direct payment, and studies implications of transitioning from a grants-based payment system to a claims-based payment system

Direct payments to Tribal Nations for SUD services

 Based on feedback from Tribal Nations at the 2023 Tribal Summit and consultations, provides direct funding to Tribal Nations for withdrawal management and other SUD service needs

Safe Recovery Sites Implementation

 Provides legal protections in state law for potential grantees operating safe recovery sites, as well as individuals accessing its services



Thank You!

Gena Savage, gena.savage@state.mn.us



ASAM Level of Care Certification Process

SUD Reform & Redesign Team | Behavioral Health Administration

Certification

Certification is attesting to and demonstrating ASAM fidelity

Complete Checklist of Program and level of care requirements

Assurance Statement

Authority for ASAM levels of care now resides in 254B.19

Future of 1115 SUD Waiver

- CMS Standard Terms and Conditions
 - Waive of IMD exclusion
 - Federal Financial Participation
- Show Progress on Goals and Milestones
- Data, Monitoring, and Reporting
- End of 1115 enhanced rates

1115 SUD Waiver Goals

- Increased rates of identification, initiation, and engagement in treatment for OUD and other SUDs
- Increased adherence to, and retention in, treatment for OUD and other SUDs
- Fewer readmissions to the same or higher levels of care where the readmission is preventable or medically inappropriate
- Improved access to care for physical health conditions among Medicaid beneficiaries

- Reduced number of opioid related overdoses and deaths within the state of Minnesota
- Patients allowed to receive a wider array of evidence based services that are focused on a holistic approach to treatment
- Reduced utilization of emergency departments and inpatient hospital settings for treatment where the utilization is preventable or medically inappropriate through improved access to other continuum of care services

Impact Areas (Process Milestones)

Access to critical levels of care for SUDs Increased use of evidencebased, SUDplacement criteria Evidence-based SUD program standards for residential treatment provider qualifications Sufficient provider capacity at each level of care Implementation of comprehensive OUD treatment & prevention strategies

Improved care coordination & transitions between levels of care

Prerequisites

- Enrolled as a Minnesota Health Care Programs (MHCP) provider
- 245G or 245F licensed
- 245G.20 rising to co-occurring capable/enhanced
- All outpatient to Certify by January 1, 2025

How to Certify

- 1115 SUD System Reform Demonstration Website
 - How to Enroll Tab
- Step Four
 - (shortened!) ASAM Certification Checklist (DHS-7325)
- Office hours, mailbox, 1-on-1 sessions
- Timelines

	*PROVIDER NAME		*NPI	*LIC	CENSE NUMBER	
	XYZ Treatment Program		0011122233	11	1223344	
	*SERVICE LOCATION ADDRESS	*CITY		*STATE	*ZIP CODE	
	123 Main Street	Anytown		MN	12345	
	*CONTACT NAME	*EMAIL ADDRESS			*PHONE NUMBER	
	Ted Talk	TTalk@XYZtx.com			612-222-3333	
	*PATIENT REFERRAL ARRANGEMENT AGREEMENT CONTACT NAME	*EMAIL ADDRESS			*PHONE NUMBER	
	Nomen Clature	NClature@XYZtx.co	om		651-444-5555	
LEVEL(S) OF CARE AT THIS LOCATION Level 1.0: Outpatient Level 2.1 Intensive Outpatient Level 3.1: Clinically Managed Population-Specific High-Intensity Residential Level 3.5: Clinically Managed High-Intensity Residential Level 3.2: Clinically Managed Residential Withdrawal Management Add location						
·		Provide a brief description of how the program is meeting the requirement and applicable policy and procedure reference, if relevant. Policy and procedure references must include policy name, page number, and/or heading. Attach the relevant policy and procedures at submission.				
 (a) Providers must obtain all applicable licensure under chapter 245F, 245G or other applicable standards and must maintain documentation of a formal patient referral arrangement agreement on a form approved by the commissioner for each of the following levels of care not offered by the provider (245B.19 sub. 2) 		No response necessary here.				
(i) Level 1.0 Outpatient;		"Provided at this location"				
		1				

 (b) In addition to the requirements in (a), providers must: (1) be licensed as specializing in the treatment of persons with co-occurring substance use and mental health disorders according to section 245G.20 	"See 245G license"
(2) offer, or provide access to, peer recovery support services by a recovery peer that meets the qualifications of <u>245I.04</u> , <u>subd. 18 and 19</u> and described in section <u>245G.07</u> , <u>subdivision 2 (8)</u>	You may already have a treatment services policy that addresses peer recovery support services. Provide an update to ensure your description meets the required statute definitions. "See attached policy #101, pg. #12, paragraph #3."
(3) have access to and document the availability of psychiatric, psychological, laboratory and toxicology services available to address the severity and urgency of the client's condition.	Policies need to identify the specifics of access and availability of these services to inform your staff and clients of your programs practice in ensuring these services are available to address the severity and urgency of any client's need being served by your program. "See attached policy #, pg. #, paragraph #."
(c) In addition to meeting the requirements defined in (a) and (b), providers licensed under chapter 245G or other applicable standards offering 1.0 Outpatient or 2.1 Intensive Outpatient levels of care must have access to and document the availability of psychiatric and medical consultation services within 24 hours by telephone. *"Medical consultation" means a type of service provided by a licensed practitioner whose opinion or advice regarding evaluation or management of a specific problem is requested by the client or the program's treatment director as defined in section 245G.01, subdivision 27 or their designee.	If you are providing SUD treatment services to a client who presents with a psychiatric or medical condition, how do you ensure access to psychiatric or medical consultation services within 24 hours by telephone? Where in your policies do you have that documented? "See attached policy #, pg. #, paragraph #."
(d) In addition to meeting the requirements defined in (a) through (c), providers licensed under chapter 245G or other applicable standards offering level 2.1 Intensive Outpatient services must have access to and document the availability of psychiatric and other medical consultation to the client within 72 hours in person.	If you are providing SUD treatment services to a client who presents with a psychiatric or medical condition, how do you ensure access to psychiatric or medical consultation services within 72 hours in person? Where in your policie do you have that documented? "See attached policy #, pg. #, paragraph #."

(f) Providers must have access to and document the availability of a licensed practitioner capable of providing pharmacotherapy and must support clients to use all types of prescribed medications under the care of their medical provider. For clients without an established medical provider, the enrolled demonstration provider must support the client's preference in seeking medical consultation with a licensed practitioner with prescriptive authority to determine the course of treatment. Certified providers must offer medication assisted treatment at the enrolled location or must facilitate access to medication assisted treatment if it is not offered at the licensed location.	What is your practice for ensuring clients without an established medical provider have access to all types of prescribed medications? Where in your policies do you have that documented? "See attached policy #, pg. #, paragraph #."		
Certified providers licensed under chapter 245G or other applicable standards must have treatment plans that meet criteria in 245G.06 and include:	No response necessary here.		
(a) a goal for transition planning considering factors such as proximity to an individual's support network including but not limited to family members, employment, counseling and other services near an individual's place of residence.	Where in your policies do you have documented information regarding treatment plans? Ensure you have an update referencing this requirement of clinical documentation necessary to meet ASAM Criteria. "See attached policy #, pg. #, paragraph ."		
(b) how cultural and socioeconomic factors affecting the patient's access to services are being addressed when needed	See (a)		
 (b) Ongoing coordination between the demonstration provider and the provider of services the client was referred to that includes: (1) Referrals to other levels of care as identified in (a) 	Where in your policies do you have documented information regarding treatment coordination and referrals to other levels of care? Ensure you have an update referencing this requirement of clinical documentation necessary to meet ASAM Criteria. "See attached policy #, pg. #, paragraph #." (Same response for (c) on next page.)		
(2) Treatment coordination services described in section 245G.07, subdivision 1, paragraph (a), clause (5); and	See (b) (1)		
(3) Consultation, referral, and treatment services defined in item IV	See (b) (1)		
(c) Follow up on the services the client was referred to in (b).	See (b) (1)		

 The review of all treatment services performed by providers licensed under chapter 245G or other applicable standards must also document reviews of the following: 	No response necessary here.		
(a) Progress made on transition planning goals;	Where in your policies do you have documented information regarding documentation of treatment services? Ensure you have an update referencing this requirement of clinical documentation necessary to meet ASAM Criteria. "See attached policy #, pg. #, paragraph #."		
 (b) Adolescent treatment plan reviews must include ongoing assessment of: Parent or legal guardian supervision when available; School and peer relationships Warning signs of recurrence of affective disorders 	See (a) - only applicable if servicing adolescent clients.		
 Providers licensed under chapters 245F, 245G or other applicable standards must develop written program policies and procedures describing how the requirements in items 2 and 3 will be met. 	No response necessary here - directional and confirming the need for updates to current policies to reflect ASAM Criteria standards.		
 Providers licensed under chapters 245F, 245G or other applicable standards must maintain a copy of their approved ASAM Certification Checklist in the program's policy and procedure manual. 	"XYZ Treatment Program will maintain a copy of this approved ASAM Certification Checklist in our program's policy and procedure manual."		
6. Providers licensed under chapters 245F, 245G or other applicable standards must develop a policy and procedure containing a description of treatment services which include the following items where applicable:	"XYZ Treatment Program has developed a policy including items (a)-(c) below" "See attached policy #, pg. #, paragraph #."		

(a) How interdisciplinary treatment recommendations from treatment services, consultations and referrals provided to a client as required in item 2 will be incorporated into the documentation of treatment services and treatment plan reviews required in item 3.	Where in your policies do you have documented information regarding interdisciplinary treatment recommendations and how they are incorporated into the documentation in each client record/file? Ensure you have an update referencing this requirement of clinical documentation necessary to meet ASAM Criteria. "See attached policy #, pg. #, paragraph #."		
(b) How the Providers licensed under 245F, 245G or other applicable standards must have documentation of the evidence-based practices being utilized as referenced in "The ASAM Criteria 3rd edition" for each level of care provided.	Where in your policies do you have documented information regarding the evidence-based practices utilized by your program? Ensure you have an update referencing this requirement necessary to meet ASAM Criteria. "See attached policy #, pg. #, paragraph #."		
(c) A description of the treatment coordination activities designed to support the use of the enrolled provider's formal patient referral arrangements required inh 1(a)	Where in your policies do you have documented information regarding treatment coordination and referrals to other levels of care? Ensure you have an update referencing this requirement of clinical documentation necessary to meet ASAM Criteria. "See attached policy #, pg. #, paragraph #."		
(d) Referral procedures that a provider will implement when the program is unable to admit a client to a level of care offered by the program	See above.		
7. Certified Providers provide treatment services as defined in section <u>254B.19 sub. 1</u> .	254B.19 AMERICAN SOCIETY OF ADDICTION MEDICINE STANDARDS OF CARE.		



Thank you!

1115demonstration.dhs@state.mn.us

Questions and Answers

What questions do you have for the SUD Unit today?

We will try to answer your questions at this meeting.

Questions that require more research will be posted within one month on the Thursday Connections with SUD at DHS webpage.





Thank You!

For updates about future meetings and responses to questions not answered during this meeting, please visit the Thursday Connections with SUD at DHS webpage.