Thursday Connections with SUD at DHS April 18, 2024



Agenda

3:00-3:05: Logistics and Introductions

3:05-3:20: Team Updates

3:20-3:40: Attesting to ASAM

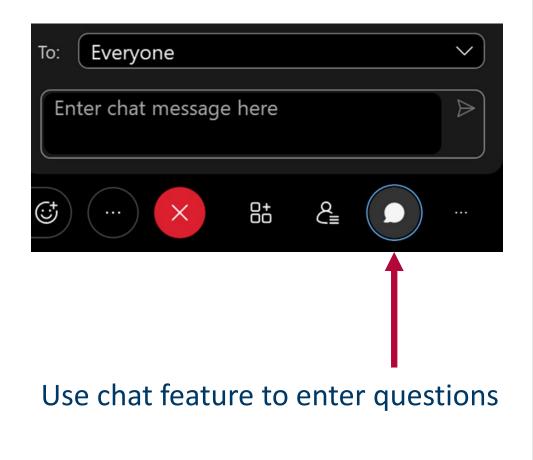
3:40-4:00: Q & A

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 two weeks 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
- Post chat questions to everyone to allow for all attendees to see conversation
- 4. Refrain from using chat during presentations



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
- Don Moore, Supervisor, Behavioral Health American Indian Team
- Jennifer Rennquist, Supervisor, State Opioid Response Team

SUD Clinical Policy Services Team

- Tobacco Use Disorder as a primary diagnosis for SUD services
 - Reminder: Tobacco is a substance that should be included/assessed for in the comprehensive assessment. Counseling/education and referrals should be provided if the client chooses.
- In February, the <u>final rule revising Part 8 of Title 42 of the Code of Federal Regulations</u> (CFR), which includes the regulations that guide Opioid Treatment Programs, was published and these regulations will go into effect October 2024.
- Tracking bills and providing technical assistance
- In depth review of ASAM 4th edition standards

Promotion, Prevention and Early Intervention Updates

• No updates at this time

SUD Reform & Redesign Team Updates -ASAM Implementation

- ASAM Criteria 4th Edition eBook distribution deadline now April 30, 2024
 - 4th Edition textbook distribution will begin as early as May 2024
- Request for Proposal (RFP) for Evidence-Based Training
- ASAM Criteria Assessment Interview Guide
- <u>Clinical Documentation Training PowerPoint</u>

SUD Reform & Redesign Team Updates -ASAM Training & Support

- On-the-Spot: ASAM Integration and Application
 - 3rd Friday at 11 am CST
- Monthly Portal Training Meeting
 - 2nd Friday at 11 am CST
 - May 10
 - June 14
- ASAM Quarterly Lunch & Learn Training Meeting
 - 4th Wednesday, every 3 months, at 12 pm CST
 - June 26
 - Sept. 25

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

- All residential programs mandated to attest to ASAM by Jan. 1, 2024, did so
- 199 nonresidential programs must attest to providing an ASAM level of care (enroll) by Jan. 1, 2025.
 - Providers must have 245G or 245F licensure and be enrolled as a Minnesota Health Care Programs (MHCP) provider
 - Providers must have the 245G.20 co-occurring designation.

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

- Internal discussions have begun in reviewing preliminary recommendations related to licensing application and licensing reviews/audits.
- Analysis of billing and payment systems continue.
- Planning has begun on drafting the report and appendices to accompany the report.
- Steering Committee Meetings continue monthly. April's focus:
 - Client services documentation
 - Billing

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

- Upcoming Meetings
 - May 7, 2024: 11 am-12:30 pm CT Q2
 - Aug. 20, 2024: 1-2:30 pm CT Q3
 - Oct. 15, 2024: 1-2:30 pm CT Q4

• SUD <u>CoP Webpage</u> – provides overview, agendas and summaries.

SUD Reform & Redesign Team Updates – Re-entry Demonstration

DHS received legislative authority in the 2023 legislative session to:

- <u>MN Laws 2023, Regular Session, Chapter 61, Article 4, Section 23</u> to complete a Medical Assistance Behavioral Health System Transformation Study that directed DHS to evaluate the feasibility, potential design, and federal authorities needed to cover behavioral health services in correctional facilities under the medical assistance program.
- In February BerryDunn was awarded the contract to begin work on the study . The study is expected to completed in late September.
- The study will inform any further legislative requirements that may come out of this upcoming session, including if DHS is directed to apply for the waiver.

The governor has included the 1115 reentry waiver and pilot program plan in his budget proposal. The bill to direct DHS to apply for the waiver and creates pilot programs is in the DHS house omnibus bill and is currently not in the DHS senate omnibus bill. The mandated services that MN will be required to provide beyond the minimum requirements from CMS are still being discussed.

American Indian Team Updates

• No updates at this time

Opioid Epidemic Response Services Team

- OERAC 2023 contracts are all finalized; team is managing those contracts in partnership with grantees. A press release will be issued in the near future.
- Composing the OERAC 2024 RFP.
- Amending contracts set to expire 6/30/2024 with no cost extensions, unspent funds to carryforward or working on closeouts
- Managing and monitoring approximately 100 active contracts
- Preparing for the new SAMSHA Notice of Funding Opportunity and other SAMHSA contract related activities
- Partnering with MDH and OAR to host a naloxone saturation convening this Spring.
- Working with MMB to prepare an updated opioid settlement spending <u>dashboard</u>, targeted release Mid-May.oh

DEPARTMENT OF HUMAN SERVICES

Attesting to ASAM

SUD Reform & Redesign Team | Behavioral Health Division

Minnesota Department of Human Services | mn.gov/dhs

ASAM in Minnesota

- ASAM has existed in MN for years
 - Six Dimensions, Biopsychosocial Assessment
- 254B.19 American Society of Addiction Medicine Standards of Care
 - Level of care requirements
 - Patient referral arrangement agreement
 - Evidence-based practices
 - Program outreach plan

ASAM and the 1115 waiver

- CMS waives IMD exclusion in exchange for achieving Goals and Milestones
 - Access to critical levels of care
 - Increased use of evidence-based, SUD placement criteria
 - Evidence-based program standards
 - Provider capacity at each level of care
 - Comprehensive OUD treatment and prevention
 - Improved care coordination and transitions between levels of care
- ASAM!

Why ASAM

- Evidence-based, national standard
- A set of guidelines to direct patients along a continuum of care
- Chest pain
 - 1) receive right level of care
 - 2) for the shortest duration of time
 - 3) with the correct array of services
- Patient-centered, medically necessary, longitudinal care

Enrolling is Attesting

- Language of enrollment versus attestation
- As a provider
 - Know what level(s) of care you provide
 - Treatment hours
 - Staffing levels, interdisciplinary team
 - PRAA
 - PRSS
 - Provide or facilitate access to MOUD
 - Treatment coordination
- Another way to think about the 1115 waiver

Attesting

- The enrollment process is how programs attest to meeting and upholding ASAM 3rd Edition standards
- Enrolled as a Minnesota Health Care Programs (MHCP) provider
- 245G or 245F licensed
- 245G.20 rising to co-occurring capable/enhanced
- Nonresidential to attest by January 1, 2025



Thank you!

1115demonstration.dhs@state.mn.us

Minnesota Department of Human Services | mn.gov/dhs

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 two weeks 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 <u>Thursday</u> <u>Connections with SUD at DHS webpage</u>.