

Welcome!

Please add your name & agency in the chat

Agenda – R95 Kickoff Meeting and Admissions & Discharge Policy Discussion

2:00 pm	Welcome &	R95 Initiative	Foundation	Laying -	Dr. Gan	y Tsai
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- Overview & Updates
- R95 Workgroup Structure
- R95 Workgroup Meeting Calendar

2:05 pm Capacity Building and Reimbursement

Finance Services Division – Invoice #1 Update – Daniel Deniz

2:10 pm Focus Area 1

- Outreach & Engagement
 - New Partnerships [2A-1, 2A-2, 2A-3] Yanira Lima
 - Field-Based Services [2B-1, 2B-2] Yanira Lima
 - 30- and 60-day Engagement Policy [2C-1, 2C-2] Dr. Brian Hurley
- 2:20 pm Focus Area 2 (**Admission & Discharge Policies will be addressed in particular detail today)
 - Lowering Barriers to Care
 - Bidirectional Referrals between Harm Reduction Agencies & Treatment Agencies [2F-2, 2F-2] - Dr. Brian Hurley
 - Service Design [2E-1, 2E-2, 2E-3] Antonne Moore

2:30 pm **Admission & Discharge (A&D) Policies [2D-1, 2D-2] - Michelle Gibson

- Overview
- Template Input
- Discussion
- 3:00 pm Provider Agency Q&A and Open Discussion
- 3:25 pm Next Steps
- 3:30 pm Adjourn



R95 Kick Off & A&D Discussion Virtual Meeting October 23, 2023

Substance Abuse Prevention and Control Bureau Los Angeles County Department of Public Health



Purpose of the Reaching the 95% (R95) Initiative

• Goals

- 1. To ensure that we are designing a specialty SUD system that is focused not just on the ~5% of people with SUDs who are already receiving and open to treatment, but also the ~95% of people with SUDs who do not receive treatment for any reason.
- 2. To communicate through words, policies, and actions that people with SUD are worthy of our time and attention, no matter where they are in their recovery journey or their stage of readiness for change.
- 3. To sow the seeds to disconnect readiness for treatment from abstinence in the hearts and minds of the SUD community and general public.



Reaching the 95% (R95) Workgroup Structure & Calendar

 There will be two core R95 workgroups, but there will be sub-groups, particularly for the "30- and 60-day policy" and "Admissions & Discharge" topics to dive deeper and get into details that won't be possible in the broader workgroup given how complex these topics are

<u>Workgroup 1</u>: Outreach & Engagement

Focus Areas:

- <u>Preparation/Planning & Formalizing New Partnerships</u> (SAPC lead: Yanira Lima)
 - Wed, 12/21/23: 2:00 pm 3:30 pm
- Expanding Field-Based Services (SAPC lead: Yanira Lima)
 - Wed, 1/17/24: 3:30 pm 5:00 pm
 - Wed, 3/13/24: 3:30 pm 5:00 pm
 - Wed, 6/5/24: 2:00 pm 3:30 pm
- <u>Optimizing Operationalization of **30- and 60-day Engagement Policy** (SAPC lead: Dr. Hurley)</u>
 - Wed, 11/15/23: 11:00 am to 12:30 pm (during Utilization Management Meeting)
 - Wed, 1/17/24: 11:00 am to 12:30 pm (during Utilization Management Meeting)
 - Wed, 3/10/24: 11:30 am to 12:30 pm (during Utilization Management Meeting)
 - Wed, 4/10/24: 3:30 pm 5:00 pm
 - Wed, 5/8/24: 3:30 pm 5:00 pm
 - Wed, 5/15/24: 11:00 am to 12:30 pm (during Utilization Management Meeting)



Reaching the 95% (R95) Workgroup Structure & Calendar

<u>Workgroup 2</u>: Lowering Barriers to Care

Focus Areas:

- Lowering Barriers for Admissions & Discharge Policies (SAPC lead: Michelle Gibson)
 - Tues, 11/07/23: 1:30 pm 3:30 pm
 - Tues, 11/14/23: 11:00 am 12:30 pm
 - Wed, 2/14/24: 3:30 pm to 5:00 pm
- Service Design for Lower Barrier Care (SAPC lead: Antonne Moore)
 - Wed, 1/31/24: 3:30 pm to 5:00 pm
 - Wed, 3/27/24: 3:30 pm to 5:00 pm
 - Wed, 5/15/24: 3:30 pm to 5:00 pm
- <u>Bidirectional Referrals Between Harm Reduction and Treatment Agencies</u> (SAPC lead: Dr. Hurley)
 - Wed, 11/15/23: 11:00 am to 12:30 pm (during Utilization Management Meeting)
 - Wed, 1/17/24: 11:00 am to 12:30 pm (during Utilization Management Meeting)
 - Wed, 2/28/24: 3:30 pm to 5:00 pm
 - Wed, 3/10/24: 11:30 am to 12:30 pm (during Utilization Management Meeting)
 - Wed, 4/24/24: 12:00 pm to 1:30 pm
 - Wed, 5/15/24: 11:00 am to 12:30 pm (during Utilization Management Meeting)
 - Wed, 6/26/24: 3:30 pm to 5:00 pm



Capacity Building And Reimbursement

Daniel Deniz Division Chief, Finance Services Substance Abuse Prevention and Control Bureau Los Angeles County Department of Public Health





Finance Services Division – Invoice #1 Update

Invoice #1: Capacity Building Start-Up Funds Attestation

- Workforce Development:
 - 1C-1 and 1D-1
- Access to Care Reaching the 95%:
 - 2A-1, 2A-2, 2A-3, 2B-1, 2C-1, 2E-1, 2E-2, 2E-3, 2F-1
- Fiscal and Operational Efficiency:
 - 3A-1 and 3B-1

Reimbursement based

- Provider Tier Level
- Approved Categories



Finance Services Division – Invoice #1 Update

Invoice #1: Capacity Building Start-Up Funds Attestation

72 Providers submitted invoices

- 57 Approved for Payment
 - Payment to be received by end of October
- 15 Processing/Review

Common Questions/Issues

- Staff who did not meet requirements
 - Will be referred to Tuition Incentive Program
 - Additional guidance to be provided
- Sites not on contracts
 - Can be submitted later once certified/contracted



Finance Services Division – Invoice #1 Update

Invoice #1: Capacity Building Start-Up Funds Attestation

Attestation



Deliverable

- Providers who missed deadline may still benefit from funding opportunities.
- Submit invoice along with supporting documentation.

Questions/Issues

<u>SAPC-CBI@ph.lacounty.gov</u>



Focus Area 1: Outreach and Engagement New Partnerships (2A-1, 2A-2, 2A-3)

Yanira Lima Division Chief, Systems of Care Bureau of Substance Abuse Prevention and Control Los Angeles County Department of Public Health



2A Outreach and Engagement – Capacity Building Deliverable



Meetings with New Partners/Developing New Partnerships

- Due Date: 12/31/2023



Outreach and Engagement Plan

- Due Date: 12/31/2023



Memorandum of Understandings (MOU) for Referrals – **Due Date: 12/31/2023**

1. https://store.samhsa.gov/sites/default/files/pep22-06-01-005.pdf 2. https://www.cdc.gov/chinav/tools/engage.html

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Focus Area 1: Outreach and Engagement Field Based Services (2B-1, 2B-2)

Yanira Lima Division Chief, Systems of Care Substance Abuse Prevention and Control Bureau Los Angeles County Department of Public Health



2B Field-Based Services – Capacity Building Deliverable



- Set up MOU with organizations to provide Field-Based Services (FBS)
 - Review SAPC Bulletin 19-06 for guidance on applying for FBS
- Due date: 12/31/2023



Verify claims for new admissions at FBS site(s) 6 months after signed MOU

- Due date: 06/30/2024



Updated Policy for Field-Based Services



Proposed Lower Barriers

- Adjust minimum requirements for staff experience
- No cap on number of FBS sites
- Streamlined application and renewal process
- Introduces IN-HOME FBS services as a mode of service to increase access to care



Documentation

Place of service codes for claims and progress notes



Focus Area 2: Lowering Barriers to Care Bidirectional Referrals Between Harm Reduction & Treatment Programs (2F-1, 2F-2)

Dr. Brian Hurley Medical Director and Division Chief, Clinical Services Bureau of Substance Abuse Prevention and Control Los Angeles County Department of Public Health



Harm Reduction Services



- <u>GOAL</u> \rightarrow Meeting people where they are, both figuratively and literally
 - While brick and mortar locations are needed, mobile services that go out to people who are unlikely to go to brick and mortar locations are also needed



HARM REDUCTION SYRINGE SERVICE PROGRAMS

Harm Reduction Syringe Services Programs

Harm reduction syringe services programs provide access to naloxone, safer injection and smoking supplies, and education which:

- Reduces the risk of fatal overdose
- Reduces the risk and spread of HIV infection
- Reduces the risk and spread of Hepatitis C
- Connects people to treatment and provides a gateway to recovery

Call to find out hours and days of operation.



Harm Reduction | Top 5 Myths | Overdose Epidemic | Accessing Naloxone | Finding Services | Resources | FAO | Contact Us



Finding Harm Reduction Services

Engagement and Overdose Prevention (EOP) Hubs

The Engagement and Overdose Prevention (EOP) Hubs are LA County contracted syringe service providers who provide harm reduction services, peer-led education, and peer-led support services. Harm reduction services include conducting syringe exchanges, providing safer use supplies including safer smoking equipment, distributing naloxone overdose reversal kits, and connecting participants to other important services and programs such as:

- Education about overdose prevention and harm reduction practices.
- Naloxone distribution and education.
- · Screening, care, treatment for viral hepatitis and HIV.
- Referrals to medications for addiction treatment, and other medical, mental health, and substance use disorder (SUD) treatment services.
- · Fentanyl test strips distribution and education.

LA County EOP Hubs

Click here to view EOP Hub Program Schedule (PDF)

http://publichealth.lacounty.gov/ sapc/public/overdoseprevention.htm



Los Angeles County Engagement and Overdose Prevention (EOP) Hubs Schedule Harm Reduction Syringe Service Programs

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
LA Community Health Project (CHPLA) 1151 N Western Blvd. Los Angeles, CA 90029 Website: http://chpla.org/ Email/Contact Info: Info@chpla.org Phone: 323.380.5469 M-F Sam-Spm	Hollywood 1625 N. Schrader Blvd. Los Angeles, CA 90028 7gm –10pm	Skid Row Downtown Los Angeles South Side of 6th S. between Wall and San Julian Sam - 11am Watts 94th & Zamora St. 9401 Zamora Are. Los Angeles, C \$0059 3pm-5pm		South Los Angeles Spectrum Community Clinic at Drew University 1731 W. 120th Sz, Building M, LA, CA 90059	Hollywood 1625 N. Schrader Blvd. Los Angeles, CA 90028 (Parking lot behind LA LGBT Center) 7pm -10pm	Skid Row Downtown Los Angeles South Stie of 6th St. between Wall and San Julian 9am - 11am Boyle Heights BAART (Linic Boyle Heights 1701 Zonal Ave. Los Angeles, CA 90033 12pm-2pm	
Asian American Drug Abuse Program (AADAP) Health Intervention Program 652 E. Manchester Bivd., Inglewood, CA 90305 Website: https://aadapinc.org/healthinterventionprogram/ Email/Contact Info: treynolds@aadapinc.org Phome: 424.331.3799 M-F sam-Spm		660 E. Manchester Blvd. Inglewood, (A 50301 10am-Spm	BAART Medmark Clinic 11682.5. Atlantic Ave. Lynwood, CA 90262 Bam-Tlam	West County Medical Corporation 22/27 Pacific AC 80805 Every 118 & 30 Wednesday Barn-10am West County Medical Clinic 100 W. Market St. Long Beach, CA 90805 Every 2 and and 4th Wednesday 100am 12pm Medimark Clinic Viphile van in parking lot? 119005 Avalan Ave: Los Angeles, CA 90059 7-38am-10am	Lavndale Medical & Mental Health Services 4023 Marine Ava Lawndale, CA 90260 7am-10am	Hollywood Medical Clinic 5015 W. Rico Bivd Los Angeles, CA 90019 Bam-11 am	
Tarzana Treatment Center (TTC) 7101 Baird Avenue, Reseda CA 91335 Website: https://www.tarzanat.corg Phone: 818.342.5897 M-F 9am-5pm		11770 Black of Borden Ave. Pacoima, CA 91331 (Under 118 Freeway overpass) 1:30pm-6:00pm 7500 Block of Valjean Ave. Van Nurys, CA 91406 (Between Sherman Way & Satiosy) 4:30pm-6:00pm	6600 Block of Etron Ave. Canoga Park, CA 91303 (End of block) 9-30am-11:30am 12178 San Fernando Rd. Syrimar, CA 91342 (Parking Lot of the Loyal Order of Mosel 1:00pm-3:00pm	8741 Laurel Canyon Blod. Sun Valley, CA 91352 9:30am-11:00am 14500 Block of Hamlin St., Van Nuys, CA 91411 (Off of Van Nuys Blvd & Victory Blvd) 12:30pm-3:00pm			
Bienestar Human Services East Los Angeles Storefront 5314 East Beverly Blvd. Los Angeles CA 90022 Website: https://www.bienestar.org/syringe-exchange/ Email: ejalayer@bienestar.org Phone: 86.6590.6411 M-F 10am-2pm & 4pm-7pm		Coastal Recovery Center 117 E. Karry Bridges Bivd. Wilmington, CA 90744 10am-12pm Highland Park 5982 Arroyo Dr. Los Angeles, CA 90042 3:30pm-5pm	•	DTLA Olvera St. SZ7 N Spring St. Los Angeles, CA 90012 4:00pm-6:00pm	Tavarua 8207 Whittier Blvd. Pico Rivera, CA 90660 10-30am-12:00pm Lincoln Heights Correr of Albambta Ave 8 Johnston St. Las Angeles CA 90031 3:30pm-5:00pm		

http://publichealth.lacounty.gov/sapc/docs/public/overdoseprevention/EOP%20Hub%20Schedule.pdf





*Scheduled hours are subject to change without notice. Please contact the participating agency to confirm service hours and locations. This program is supported in part by the County of Los Angeles, Department of Public Health. Please contact Substance Abuse Prevention and Control (SAPC) at harmreduction@ph.lacounty.gov



http://publichealth.lacounty.gov/sapc/docs/public/overdoseprevention/EOP%20Hub%20Schedule.pdf

Cover or tes Avenue



MOU: Required Components

1. Establish Clear Communication Protocols

Designated key points of contact with scheduled meetings

2. Defined Referral Pathway

Agreed-upon process for low-threshold initiation of services

3. Cross-Agency Training

Enhance mutual understanding of services

4. Information Security

- Compliance with all applicable privacy regulations

5. Care Coordination

- Ensure coordination of care for individuals served by each agency.

6. Service Recipient Feedback

 Feedback regarding participant experiences (evoking successes and information about barriers) is obtained and applied to quality improvement



Better Blending Treatment & Harm Reduction

- We know recovery is a continuum, but the separation and programmatic divide between treatment and harm reduction services is often wide and needs to be addressed to better match the continuum of SUD services with client experience.
- Better integrating treatment and harm reduction services within agencies is both a <u>cultural</u> and <u>operational</u> issue, with the cultural issue being the more challenging to address.
 - Achieving this goal will require addressing this from both angles and will require agency-level interventions on top of what SAPC focuses on given that agencies have different cultures and agency leadership know their culture best.
- Ingredients for culture change at the agency-level
 - Knowing what we're dealing with Opening the door for discussions to explore staff thoughts/feelings around this topic (e.g., individual/supervision/staff meetings, office hours, etc.) --> ESSENTIAL FOCUS!
 - 2. Leadership making the end goal clear Aligning the agency and staff
 - 3. Evaluating progress How do we know when treatment and harm reduction service are more integrated?
 - 4. Adjusting approaches as needed Our evaluations will allow us to modify our interventions to more effectively achieve this integration



Focus Area 1: Outreach and Engagement 30- & 60-Day Engagement (2C-1, 2C-2)

Dr. Brian Hurley Medical Director and Division Chief, Clinical Services Substance Abuse Prevention and Control Bureau Los Angeles County Department of Public Health



Initial Engagement Authorizations for Non-Residential Levels of Care

- Submit a Full (Standard) Authorization When Medical Necessity Has Been Established
 - No <u>need</u> to wait 30/60d before submitting a full authorization request, but provides <u>flexibility for patients</u>
- For initial engagement authorizations prior to establishing medical necessity
 - Make explicit via designated PCNX radio button
 - Conduct an ASAM assessment when the patient is ready to participate, prior to submitting the auth request for the balance of the authorization duration

See DHCS Behavioral Health Information Notice (BHIN) 23-001: <u>http://www.dhcs.ca.gov/Documents/BHIN-23-001-DMC-ODS-Requirements-for-</u> <u>the-Period-of-2022-2026.pdf</u>



Authorization Periods – Patients Aged 20 and Under or PEH



*Total time will equal 6 months for outpatient services

^{**}Total time will equal 12 months for OTP services



Authorization Periods – All Other Patients Aged 21 and Over that are **Not Homeless**

ASAM

Medical Necessity

Oct 23, 2023 Nov 22. 2023 **Initial Engagement Authorization Period** 30 days

For NON-RESIDENTIAL SERVICES, initial authorizations for patients aged 21 and over who are not homeless will be set at 30 days while they are being engaged and medical necessity is being established.

Initial 30-Day Engagement Authorization Period

- Patient must be LA County Resident
- Must meet SAPC Financial Eligibility requirements
- Does NOT need to meet medical necessity

New Authorization Period – Approval Process Remains the Same

Providers:

 Should be engaging patient to try to complete ASAM assessment and establish medical necessity throughout the initial 30-day authorization, but if this is not possible, the timelines for ASAM assessments and establishing medical necessity are the same as previously:

• 7- or 14-days to complete ASAM assessment upon the end of the initial 60-day authorization period depending on clients who are 21 and over (7-days) or aged 20 and under (14-days); and

30 days to submit all documentation to establish medical necessity and submit complete member authorization.

New Authorization Request submitted following initial 30-day authorization. In this example, the second authorization would begin November 22, 2023 and provider will have 7- or 14-days (depending on age of patient) to finalize the ASAM assessments and 30 days to submit all necessary documentation to establish medical necessity, as per current requirements.

Total Authorization Length

- Outpatient Services $* \rightarrow$ 30 days for the initial authorization period for those aged 21 and over who are not homeless, and then 5 months for the new authorization once medical necessity is established (in this example, it would end on April 22, 2024)
- OTP Services** → 30 days for the initial authorization period for those aged 21 and over who are not homeless, and then 11 months for the new authorization once medical necessity is established (in this example, it would end on Oct 22, 2024)

*Total time will equal 6 months for outpatient services

**Total time will equal 12 months for OTP services



PCNX Authorization Requests

SERVICE AUTHORIZATION RE	EQUEST				Submit	Disc	ard Add to Fa	worites
Member Service Authorization FY 23/24+ Authorizations	~							
Member Service Authorization 21- 40 Care Manager	Brief Member Review	Member Authorization History		Authorization Number				
Diagnosis Comments	Initial or Continuing Authoriz	ation 🖓						
Provider Search Doc Request Date		○ Continuing						
Online Documentation	Funding Source Authorization	s For *		Begin Date Of Authorization *				
	Select		× ~				• • • • • • •	
	Provider To Be Authorized			End Date Of Authorization *				
	Contracting Provider Program	•						
	Select		× ~					
	Current Authorization Status	•						
	Approved	O Denied Pending						

http://publichealth.lacounty.gov/sapc/providers/sage/sage-pcnx.htm Sage-PCNX Service Authorization Request Guide



PCNX Authorization Requests

~		
Initial Engagement * 😵		
0.0		
⊖ Yes	⊖ No	
	✓ Initial Engagement * ♀ ○ Yes	Initial Engagement * 🖓

Doc Request Date					
Initial Engagement	 Required. Select Yes if the authorization is a Non-Residential initial authorization where the patient is in the initial assessment period and medical necessity has not yet been established. 				
	 Select No if This is a Residential Authorization This is a Withdrawal Management Authorization or Medical necessity has been established 				



Attestation of Compliance

- Attestation that treatment staff have be trained on the relevant notices and agency has established protocols for initiating treatment and offering patients treatment up to 30 days (for patients aged 21 and over who are not experiencing homelessness) or up to 60 days (for patients aged 20 and younger and/or who are experiencing homelessness) from the initial date of service to establish medical necessity for treatment at non-residential levels of care.
- Agency staff have reviewed <u>the SAGE Provider Communication release</u> <u>dated 07/28/23 for guidance on how to indicate in PCNX whether an</u> <u>authorization is an Initial Engagement Authorization upon submission</u> using the "Initial Engagement" radio button.



Focus Area 2: Lowering Barriers to Care Service Design for LBC (2E-1, 2E-2, 2E-3)

Antonne Moore Division Chief, Strategic and Network Development Substance Abuse Prevention and Control Bureau Los Angeles County Department of Public Health



Service Design Requirements – deliverables due 6/30/24

Purpose: To expand access to services for people who want treatment but are not yet ready to maintain abstinence.

- <u>2E-1 Service Design*</u>
 - Complete service plan expectations
- <u>2E-2 Customer Walk-Through (# of sites in attestation)</u>
 - Complete assessment of customer service experience
 - Conduct a walk-through
- <u>2E-3 Service Design Implementation/Investment Plan</u>
 - Submit service design plan that outlines organizational changes/investments in design that lower barriers to care.



SAPC Support for Service Design Requirements

Purpose: Support providers in meeting deliverables in adapting service design to lower barriers to care.

- Service Design Kick- off meeting
- Individualized TA to identify strategies for service design model.
- Service Design Plan Kit*
 - Customer walk-through template
 - Customer experience assessment/survey
 - Improvement/investment plan template
- Two (2) Collaborative Service Design workshops

*Required for those who submitted service design attestation



Focus Area 2: Lowering Barriers to Care Update Admission & Discharge Policies (2D-1, 2D-2, 2D-3)

Michelle Gibson Deputy Director Substance Abuse Prevention and Control Bureau Los County Department of Public Health





Discussion

Visit <u>RecoverLA.org</u> on your smart phone or tablet to learn more about SUD services and resources, including a mobile-friendly version of the provider directory and an easy way to connect to our Substance Abuse Service Helpline at 1-844-804-7500!