

Provider Advisory Committee Meeting

The Alhambra, 1000 S. Fremont Ave., Bldg. A9 East Microsoft Teams March 8, 2022 2PM – 4PM



Welcome Yanira Lima, Chief, Systems of Care, DPH-SAPC



Approval of Meeting Minutes January 27, 2022 Meeting Kyle Kennedy, Systems of Care, DPH-SAPC



SAPC Announcements Yanira Lima, Chief, Systems of Care, DPH-SAPC

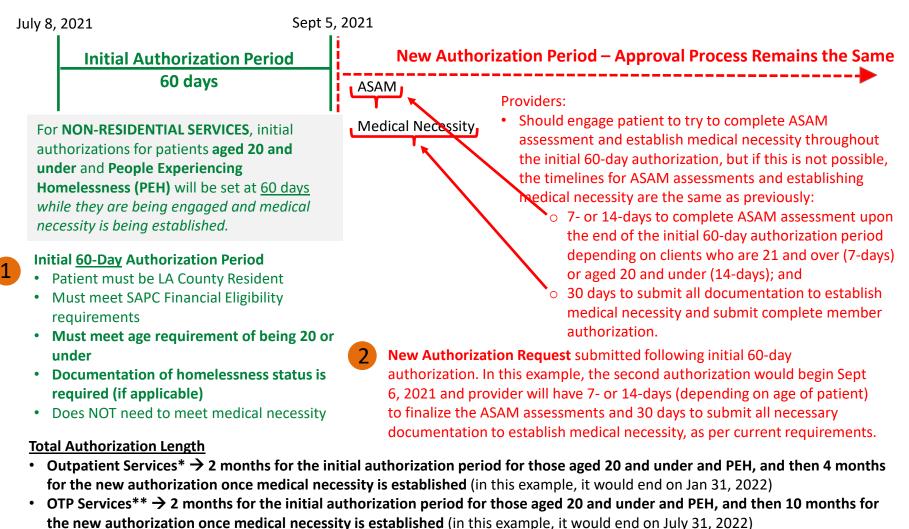


Announcements

 30 and 60 Day Policies Around Reimbursement Engagement



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

July 8, 2021 Sept 5, 2021 Initial Authorization Period 30 days AS

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

Initial <u>30-Day</u> 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 August 7, 2021 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* → 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 Jan 31, 2022)
- 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 July 31, 2022)

*Total time will equal 6 months for outpatient services

**Total time will equal 12 months for OTP services



Co-Chair Announcements Kathy Watt, Van Ness Recovery House



PAC Member Items Kathy Watt, Van Ness Recovery House



PAC Member Item

SAPC Sponsored Bill



PAC Workgroup Updates Funding Utilization Busines Technology

PAC Public Health Funding Utilization Subcommittee

Co-Chairs: Shelly Wood, JD & Christina Gonzales, MA, Ed.,

* Staff Retention Strategies

*Addressing/Working Denials

*Secondary/Alternative Funding Sources





Business Technology Workgroup

 Initial Workgroup Meeting Scheduled for March 16, 2022 from 11 a.m. – 12:30 p.m.



Contingency Management Pilot Program Glenda Pinney Systems of Care, DPH-SAPC



Contingency Management (CM) Overview

- Funding Source: Part of California Advancing and Innovating Medi-Cal (CalAIM) Home and Community-Based Services Spending Plan in the American Rescue Plan Act.
- **Target Population:** Medi-Cal enrollees with stimulant use disorder (StimUD).
- Phase I Pilot Period: July 1, 2022 to March 31, 2024.
- **Goal:** determine how to scale an evidence-based treatment for StimUD to address SUD crisis in a large, complex state.



Contingency Management (CM) Overview

- **Objective:** harm reduction approach that promotes low-barrier access to treatment.
- Framework: structured 24-week outpatient CM program followed by 6 months or more of recovery support services.
- Motivational Incentives: up to \$599 in gift card incentives per calendar year for nonuse of stimulants evidenced by negative drug tests.



Participant Eligibility Criteria

- Diagnosed with qualifying moderate or severe StimUD
- Assessed and determined to have a StimUD for which CM is medically appropriate
- Reside in a participating DMC-ODS county that is approved to pilot CM
- Have an ASAM assessment within 30 days (or within 60 days if under 21 or PEH) following first visit with LPHA or registered/certified counselor that indicates they can be treated in outpatient treatment setting
- Not enrolled in another CM program
- Receive services from a non-residential provider that offers CM



Required Provider Activities

- Targeted Technical Assistance: DHCS-conducted trainings, initial readiness review and technical assistance
- Assessment and Treatment Documentation: screen and assess beneficiaries using ASAM assessment within 30 days of admission (up to 60 days under 21 and PEH)
- Eligibility Verification: verify Medi-Cal at least weekly
- Service Delivery: have a dedicated CM coordinator to provide CM to all qualified participants
- Reporting: provide data for monitoring and evaluation, including claims data for reporting and reimbursement



CM Components

- **Care Planning:** include other behavioral interventions like MAT.
- Education: participant orientation and consent to conditions of the CM program, including the following:
 - ✓ schedule of visits
 - ✓ urine drug testing procedures
 - ✓ incentives
 - ✓ agreement



CM Coordinator Core Competencies

- Excellent organizational skills
- Effective skills in following laboratory and specimen handling/disposal procedures
- Good computer skills and ability to learn new programs and computer-related tasks
- Excellent communication skills, including the ability to effectively communicate information with participants in the orientation session



Youth Enhancement Services Bulletin Elizabeth Norris-Walczak, Systems of Care, DPH-SAPC

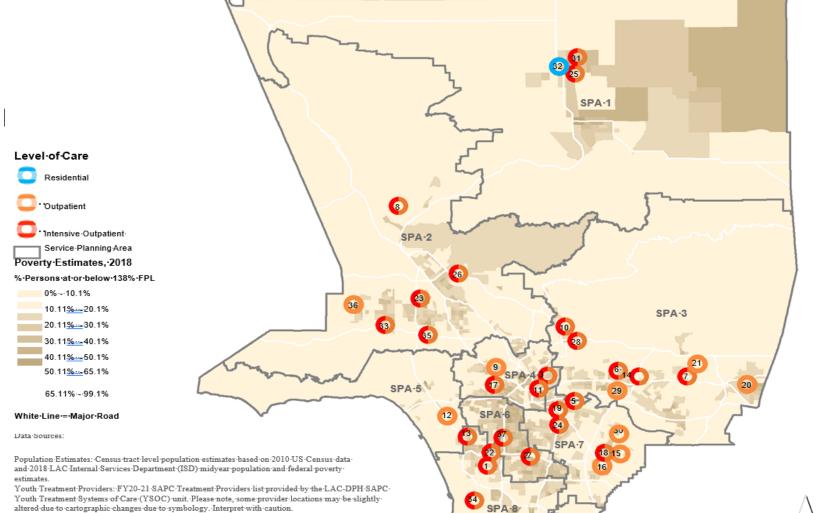


Youth Services Unit

- Youth Services (YS) Unit manages a network of specialized youth providers that provide a full spectrum of substance use disorder early intervention and treatment services to:
 - Youth (ages 12-17) and
 - Young adults (ages 18-20)
- YS network comprises:
 - 26 specialized youth treatment providers at 42 sites across Los Angeles County

by Level of Care





GIS Data: Los Angeles County GIS Repository data layers for Service Planning Area (SPA) boundaries.

Map developed and updated by the Health Outcomes and Data Analytics (HODA), Substance Abuse Prevention and Control. Los Angeles County Department of Public Health, September 2020.

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YES – Youth Enhancement Services Program



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	LJ	

- In FY 2019-2020, SAPC launched the Youth Enhancement Services Program (YES) to serve youth (12-17) at risk of entry into the juvenile justice system
- YES expanded coverage for youth-centric, non-DMC reimbursable early intervention and treatment services for youth
- Supported by the Juvenile Justice Crime Prevention Act (JJCPA) and the Substance Abuse Block Grant (SABG) adolescent set aside

YES Pilot – Youth Enhancement Services





Identify and encourage youth to take advantage of early intervention and treatment services including:

- SUD screening and appointment services
- Brief advice and patient education
- Care coordination and collateral services

Positive Youth Development Programs Strengths-based prosocial group activities targeting

Strengths-based prosocial group activities targeting the development of social, ethical, emotional, physical, and cognitive competencies in early intervention and treatment settings, e.g.:

- Mindfulness and art therapy
- Resume building and employment coaching
- Recreational activities

Transportation

Public transportation fares or provider vehicle costs to support attendance at SUD, mental health, physical health and other appropriate services





YOUTH DEVELOPMENT SPECIALIST POSITION

Effective March 1, 2022 – SAPC IN 22-05

Dedicated part-time staff to support providers to deliver enhanced youth services including :

- Outreach and engagement
- Screening and brief intervention
- SUD treatment referral and linkages
- Care coordination
- Collateral services
- Patient education
- Recreational activities
- Therapeutic activities
- Transportation
- Community outreach



System of Care Youth and Family Services

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Duy Tran, M.P.H Program Manager, Youth Services	<u>dutran@ph.lacounty.gov</u>		



New Amendment Process for Contracts Daniel Deniz, Finance Services, DPH-SAPC



Funding Utilization Monitoring

- Contract allocation reverts to original amount at start of every fiscal year.
- A new request will need to be submitted once 70% utilization is reached.
- Refer to SAPC IN 22-03



Network Provider Name:					Contra	act #	
Contract Type:		CENS	RBH	Preventio	n		CPS
Service Planning Area(s):			Supervis	orial Distri	ct(s):		
Service City(ies)/Community(ies):					•	
Treatment Levels of Care:	□ 1.0 □ 2.1 □ 3.1 □ 3.3 □ 3.5 □ OTP						
	□ 1-WM □ 2-WM □ 3.2-WM □ 3.7-WM □ 4-WM						



Fiscal Year:		_		
Contract Amount:	\$		-	
Amount Expended:	\$ Percent Expended:	%	chan	nder: FY allocation ges. Confirm
Amount Requested:	\$ Percent Increase:	%	sendi	mation prior to ing. Id match SAPC's
Additional Site(s) Address:			recor • Inclue	ds de for all requests
Additional Service Description:			_	



Considerations

- Confirmation of contract utilization.
 - Future activities that may impact utilization.
 - Confirm the year to be augmented.
- Is this related to a newly added site or level of care?
 - Include relevant licenses/certifications.
- Does SBAT show providers in the same geographic area?
 - Same population?



The "95%" Daniel Deniz, Finance Service, DPH-SAPC Yanira Lima, Systems of Care, DPH-SAPC



PAC Member Terms Ending June 2022 and Process for New Selection Kyle Kennedy, Systems of Care, DPH-SAPC



PAC Members terming out and selection process

Group	Name of Applicant	Term End Date
В	Baldomero Gonzalez	6/30/2023
В	Brandon G. Fernandez	6/30/2023
В	Christina Lynn Gonzales	6/30/2023
В	Claudia Murillo	6/30/2023
А	Cory Brosch	6/30/2022
В	Deena T. Duncan	6/30/2023
В	Denise Shook	6/30/2023
А	Edgar U. Sebastian	6/30/2022
В	Edith Urner	6/30/2023
А	Elan Javanfard	6/30/2022
А	Felipe Kaiser	6/30/2022
А	JoAnn M. Hemstreet	6/30/2022
В	Jonathan Higgins	6/30/2023
В	Kathy Watt	6/30/2023
А	Ken Bachrach	6/30/2022
А	Lisa K. Campana	6/30/2022
В	Nora O'Connor	6/30/2023
А	Rocio Quezada	6/30/2022
А	Shelly D. Wood 6/30/2022	
А	Tenesha Taylor 6/30/2022	
В	Wendie Warwick 6/30/2023	
А	William V. Tarkanian 6/30/2022	

*Highlights indicate members with term ending FY2022



PAC Members terming out and selection process (cont.)

- 50% of PAC members (Group A) will term out 6/30/22
- Will use a similar application and selection process
- The PAC Selection Committee will be led by the PAC Co-Char and be made up of 4 PAC members and 5 SAPC Staff
- Staff from any SAPC network provider, with approval from their Executive Director or designee, may apply for membership
- Applications will be available electronically and submitted to the Selection Committee via email
- SAPC staff will confirm receipt of all applications via email



PAC Members terming out and selection process (cont.)

- SAPC staff will review all applications to ensure candidates meet established criteria (refer to PAC bylaws) and advance each completed application to the PAC Selection Committee for review
- Each completed application will be considered and discussed by the PAC Selection Committee
- SAPC staff will notify all applicants of final selection decision



Brainstorm Topics for Elevation at Future Meetings Emily Caesar, Systems of Care, DPH-SAPC



Meeting Wrap-up:

Review Decisions/Next Steps

Meeting Evaluation



Public Comments Yanira Lima, Systems of Care, DPH-SAPC



Adjourn Next PAC meeting: May 10, 2022 2PM