

R95 WITH JUSTICE-INVOLVED CLIENTS

REACHING THE 95% - Enhancement incentive eligible









Agenda

Incentive opportunities and provider support resources

Overview of Reaching the 95%

Panel discussion

Open discussion





R95 Incentives FY 25-26

Agency with <u>no</u> prior R95 policy and agreement adoption

Agency with <u>some</u> prior R95 policy and agreement adoption

Agency with <u>complete</u> prior R95 policy and agreement adoption

Payment Reform | Value-Based Incentives (VBI)

3-G R95 Policies and Agreements

\$40,000

All five (5) approvals this fiscal year

\$20,000

Fewer than five (5) approvals to complete package

3-F R95 Champion

\$40,000

R95 policies and agreements

+

At least one (1) eligible MAT activity (3-A, 3-B, 3-C)

R95 Enhancement Activity

R95 pathway

\$20,000

85% of all client-facing staff attend at least one (1) eligible meeting or training

Harm reduction pathway

\$20,000

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R95 Support for Treatment Agencies

R95 101 Training for Frontline Staff

In-person trainings per agency to address staff questions and concerns about real life application of R95 principles

Request by email or through **Booking**

R95 Value-Based Incentive TA

Virtual meeting to discuss specific R95 topics and/or Value-Based Incentive deliverables

Request by email or through **Booking**

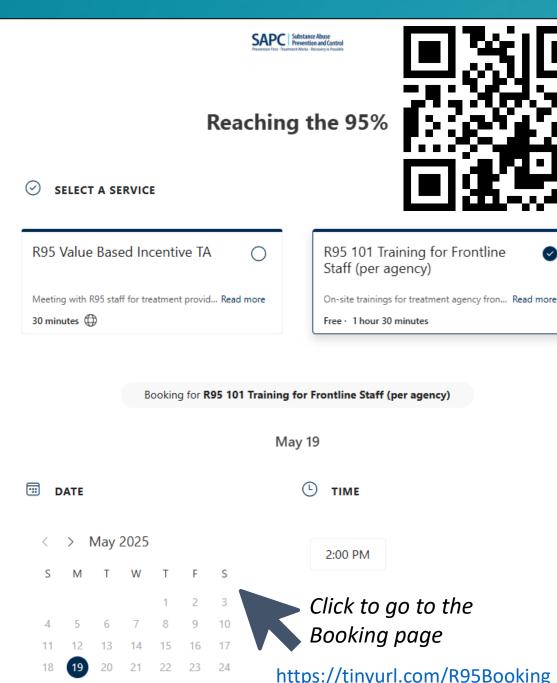
R95 Consultation Line for Providers

(626) 210-0648

M-F 8:30am-5:00pm, excluding County holidays

R95 Virtual Monthly Office Hour (3rd W, 9:00am)

Monthly Teams meeting with R95 overview and updates with dedicated time for agency questions







Month	Meeting/Training	Details	R95 Enhancement Activity eligibility	
			Harm reduction	R95
Oct	Harm Reduction and	Topic: Training for treatment staff on how to integrate harm reduction approaches to meet patient needs	Yes	No
	Treatment Integration	throughout the recovery journey		
	meeting	Date: Wednesday, October 22, 2:00pm-4:00pm		
		Location: Child & Family Center, Education Building, 21545 Centre Point Pkwy, Santa Clarita, CA 91350		
		Registration: https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=215		
	Virtual office hour	Topic: 15-minute R95 overview, followed by 15-minute open, provider-led discussion about compliant	No	No
	3 rd Wednesdays	policies and agreements, clinical considerations, etc. Bring questions and hear from other agencies.		
	9:00am-10:00am	Add series to calendar		
Nov	Workgroup: Mixed	Topic: Discussion of opportunities and challenges of separating readiness for treatment from readiness for	No	Yes
	Recovery Goal	complete abstinence		
	Communities	Date: Wednesday, November 6, 2:00pm-3:30pm		
		Location: Zev Yaroslavksy Family Support Center, Joshua and Sequoia Room Combo, 7555 Van Nuys Blvd,		
		Van Nuys, CA 91405		
		Registration:		
		https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=209		
	Virtual office hour	Topic: 15-minute R95 overview, followed by 15-minute open, provider-led discussion about compliant	No	No
	3 rd Wednesdays	policies and agreements, clinical considerations, etc. Bring questions and hear from other agencies.		
	9:00am-10:00am	Add series to calendar		
Dec	Due December 31, 2025: R95 Value Based Incentive Policy and Agreements			

<u>R95 FY 25-26 Calendar</u>

Overview of the R95 lower barrier philosophy







Reaching the 95% Initiative

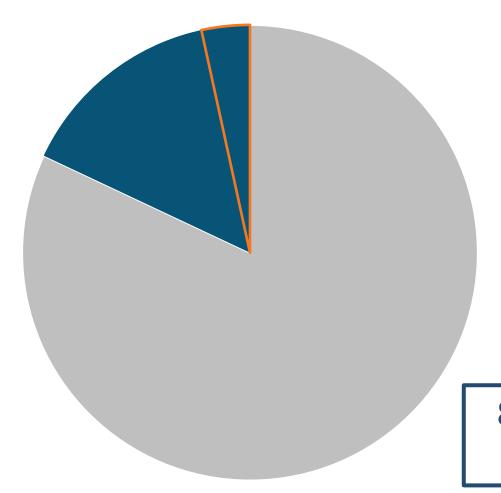
Fundamental R95 Goals

- 1. Ensure specialty SUD systems are designed not just for the ~5% of people with SUDs who are already interested in treatment, but also the ~95% of people with SUDs who are not.
- 2. To lower barriers to care in the hearts and minds of the SUD community and public by disconnecting readiness for treatment from abstinence.
- 3. To communicate through words, policies, and actions that people with SUD are worthy of our time, attention, and compassion, no matter where they are in their readiness for change or recovery journey.

The R95 Initiative was launched by the Los Angeles County Department of Public Health's Substance Abuse Prevention and Control (SAPC) in 2023 to reach more people by expanding outreach and lowering barriers to care



Very few people with SUD seek treatment



18% of people age 12+ in the U.S. have a SUD (+1% from 2023)

19% of those received treatment when including all settings, such as specialty treatment, primary care, telehealth, withdrawal management, prison, jail, or juvenile detention center

81% of people age 12+ in the U.S. with SUD received no treatment in the past year





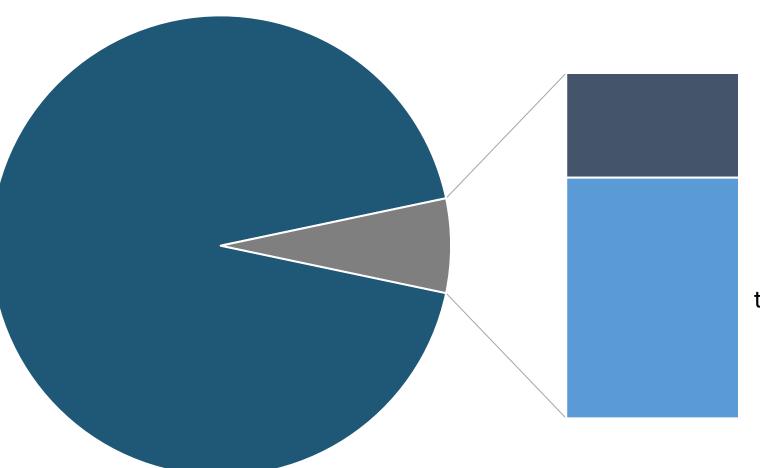


It's time to improve access by reaching out to those we've missed

Of people age 12+ with SUD that did not access treatment...

93% did not seek treatment and did not think they needed treatment

(-2% from 2022)



2% thought they should get treatment and unsuccessfully sought treatment (+1% from 2022)

5% thought they should get treatment but **did not seek** it (+1% from 2022)







Lower barrier care

Traditional Approach

- Defining readiness for treatment as readiness for abstinence
- Focusing on program rules to define the terms of treatment engagement
- Discharging clients who relapse

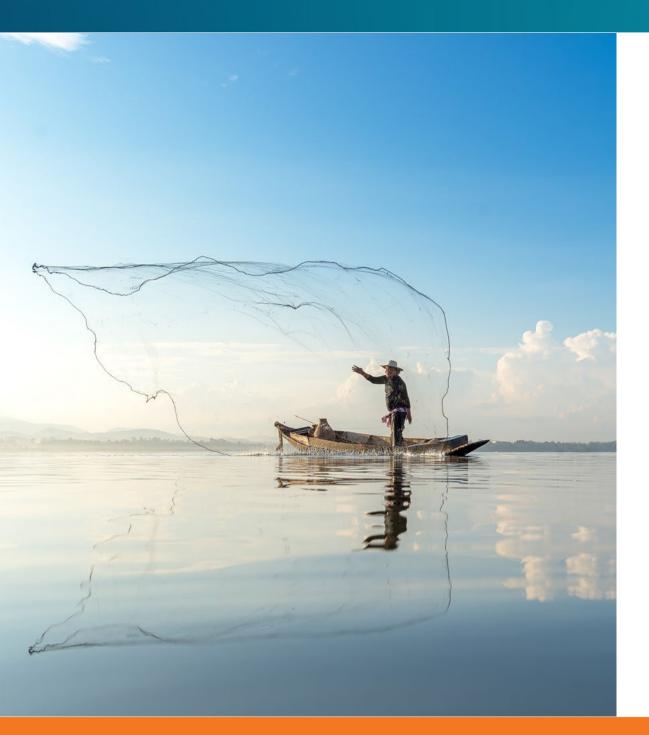


R95 Approach

- Being open to admitting people into treatment who are interested in care, even if they may not be ready for complete abstinence
- Focusing on client preferences to inform the terms of treatment engagement
- Looking for ways to maintain clients in treatment who relapse







Enhancing outreach and engagement

- Expanding field- and street-based services
- Increasing efforts to interface with other areas of health and social systems
- Expanding low barrier and low judgement services such as harm reduction
- Expanding offerings of Addiction Medication (Medications for Addiction Treatment (MAT))
- Optimizing reimbursable outreach and engagement services for people prior to formal diagnoses or assessments







Establishing lower barrier care

- Performing customer experience assessments at the SUD provider level to focus on implementing strategies to make the care environment more inviting
- Lowering the bar of admissions policies to expand the spectrum of readiness levels of people admitted into SUD treatment
- Raising the bar of discharge policies so that there are more nuanced considerations before someone is discharged from treatment because of relapse, which is a symptom of addiction
- Strengthening bidirectional referrals between harm reduction and SUD treatment agencies





R95 approach to: Admissions



• We welcome clients with a range of treatment goals, wherever they are on their treatment journey.



• Toxicology tests and results are not required for admission, whether positive or negative.



Whenever possible, we provide same day admission and services.



• Agencies are truly **accessible** through language assistance, cultural competency, non-judgmental language, and responsive approaches.



• Clients are admitted even if **Medi-Cal** is not active or assigned to LA County, as this can be done during/after admission using the reimbursable care coordination benefit.





R95 approach to: Discharges



 Clients are not automatically discharged only because of a positive toxicology test result.



• Clients are not discharged when **health benefit lapses** for those that remain eligible. Provider agencies should use the care coordination benefit to help prevent clients from losing Medi-Cal during the treatment episode.



• Provider agencies ensure a warm handoff when clients step up or down levels of care.



• Provider agencies provide informational materials at discharge about overdose prevention and safe use, including naloxone.





R95 approach to: Toxicology testing



• Toxicology tests are clinical tools to gather **information** and facilitate discussion with clients around their substance use, triggers, treatment progress, and linkage to additional supports.



• A **positive** toxicology test result or **refusal** to submit a sample for testing is not a reason for automatic discharge.



• Toxicology testing is grounded in a **trauma-informed**, **culturally responsive** approach that prioritizes respect, safety, and accuracy.



• Providers will **inform clients** about the testing process, the benefits of testing, client expectations, client rights, and potential consequences.

The R95 approach with our justice-involved clients







Welcome, panelists!

Morgan Edwards, Pax House

Fraissy Guijarro, Safe Refuge

Bill Tarkanian, Los Angeles Center for Drug and Alcohol Abuse

Rocio Quezada, Helpline Youth Counseling





Panel discussion



Demographics: What does your client community look like?

How many are justiceinvolved (Probation, DCFS, etc.)?



Policies: How have you navigated implementation with LA County Departments?

How did the R95 policies impact your justice-involved clients, specifically the toxicology and discharge policies?



Relationships and retention: How has the R95 approach impacted your therapeutic relationship with your clients?



Additional questions?

DON'T FORGET TO SIGN IN

Scan with your phone camera or use a web browser: forms.office.com/g/jd39MSBEat







Reaching the 95% resources

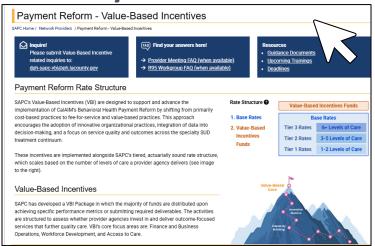




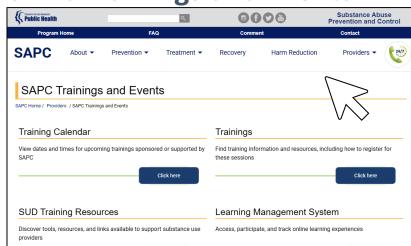
(626) 210-0648 M-F 8:30am-5:00pm, excluding County holidays

R95 Consultation Line

SAPC Payment Reform VBI



SAPC Trainings and Events



NEW: Electronic Deliverable Submission Form



Email

R95: SAPC-R95@ph.lacounty.gov

Payment Reform (VBI): DPH-SAPC-VBI@ph.lacounty.gov







Thank You!





About SAPC

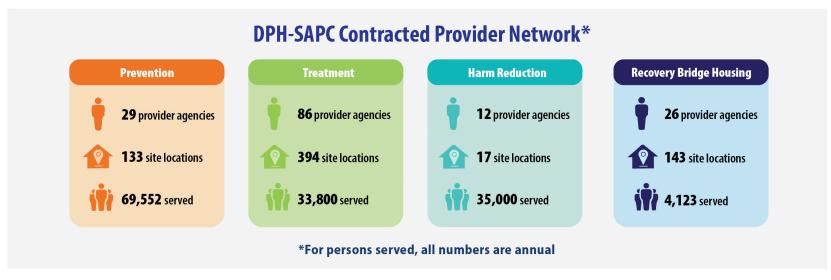
• The Department of Public Health's Bureau of Substance Abuse Prevention and Control (DPH-SAPC) oversees the most diverse and comprehensive continuum of SUD services in California.







• SAPC is committed to innovative, equitable, and quality-focused substance use **prevention**, **harm reduction**, **treatment**, and **recovery services**.



SAPC Website: ph.lacounty.gov/sapc/ | SAPC Strategic Plan - 2023-2028: ph.lacounty.gov/sapc/docs/providers/SAPC-Strategic-Plan-2023-2028.pdf