

# Meeting Summary for BHP Adult Quality, Access & Policy Committee Zoom Meeting

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## Quick recap

The Adult Quality Access and Policy Committee meeting focused on reviewing Connecticut's 1115 Medicaid demonstration waiver for substance use disorder services, which has been implemented since April 2022 and is set to run through March 2027. The presentation covered various metrics and outcomes, including challenges in treatment engagement and bed capacity, while highlighting plans for reinvesting savings into substance use treatment and recovery services. The conversation ended with recognition of Beresford Wilson's contributions to behavioral health and mental health, along with discussions about sharing presentations and upcoming council meetings.

## Next steps

- State Agencies: Establish methodology for distributing funding to support 100 new SUD treatment beds across the continuum
- State Agencies: Develop corrective action plans to address decreasing metrics in adolescent substance abuse residential capacity, medication-assisted treatment providers, and engagement rates
- DMAS/DSS: Continue recruitment of providers for 3.1 level of care to address the gap between 3.5 and 3.1 levels
- State Agencies: Implement expansion of SRHS system to provide housing support to all HUSKY types
- Wheeler Clinic: Expand 24/7 access line services and transportation resources for substance use treatment
- State Agencies: Establish employment services programs in Regions 1, 3, and 5 to achieve statewide parity
- Rob Haswell (DMHAS): Follow up with Brenetta Henry to discuss improving transition processes from CVH back into the community
- Rob Haswell: Return to the committee in 2025 to present data on vacancy rates and bed forecasting across different levels of care
- Council Chairs: Recognize Beresford Wilson's contributions at tomorrow's main Oversight Council meeting

## Summary

### Medicaid Waiver Review Discussion

The Adult Quality Access and Policy Committee meeting begins with a discussion of the Medicaid 1115 Substance Abuse Waiver Midterm Review. Co-Chairs Sabrina Trocchi and Kelly Phenix emphasize the importance of this review and encourage providers and individuals experiencing waiver services to share their perspectives. Mercer and state agency partners from DMAS and DSS are present to lead the presentation, with Shawn Thiele Sacks (Mercer) sharing the screen and Brenda Jackson (Mercer) starting the discussion.

## **Connecticut Medicaid SUD Waiver Progress**

Brenda presented the results of Connecticut's 1115 Medicaid demonstration waiver for substance use disorder services, which was approved in April 2022 and runs through March 2027. The state has completed midpoint assessment activities and achieved several milestones, including implementing ASAM standards and expanding coverage for residential and inpatient substance use facilities. While some metrics showed decreases due to the public health emergency unwinding, particularly in overall Medicaid beneficiary numbers, there were positive outcomes in areas like continuity of pharmacotherapy for OUD and decreased emergency department utilization. The interim evaluation, which will account for three data anomalies, is scheduled for release in winter 2025.

## **Substance Abuse Treatment Declines**

Brenda presented data on various metrics related to substance abuse and mental health treatment, showing decreases in initiation of treatment, engagement, and follow-up after emergency room visits, except for a slight improvement in mental health metrics. She noted that these trends were concerning and opposite of the desired outcomes. Brenda mentioned that after adjusting for public health emergencies, Connecticut may need to implement a corrective action plan to improve these metrics.

## **Substance Use Disorder Treatment Integration**

The meeting focused on discussing the treatment of individuals with substance use disorders and mental health issues, particularly within the context of a demonstration project. Rob explained that providers are being trained to handle dual diagnoses and emphasized the need for integrated care across sectors to improve initial treatment engagement. Brenda highlighted that the demonstration has implemented required activities but is now evaluating outcomes to identify areas for improvement. The group discussed challenges such as bed vacancies in residential treatment facilities and the need for better support during transitions from prison to community-based care. Sabrina raised concerns about areas where the state did not meet targets, and Brenda confirmed that corrective action plans are being developed for these issues.

## **Connecticut Residential Treatment Bed Capacity**

Rob presented data on residential treatment bed capacity in Connecticut, showing a reduction from 1,167 beds in May 2022 to 1,093 beds in July 2023, with Connecticut Valley Hospital increasing from 102 to 152 beds during this period. He noted that while some providers reduced beds during the COVID pandemic due to staffing challenges, there is now growing interest in expanding services, particularly at the 3.1 and 3.5 levels of care. Rob explained that providers are making strategic decisions about service levels based on their ability to maintain quality care with available staff, and the demonstration project has led to increased licensing requirements for service providers.

## **Medicaid Savings for Recovery Services**

Rob presented a plan to reinvest \$21 million in savings from a Medicaid demonstration program into substance use treatment and recovery services over the next two years. The investments will support non-Medicaid populations, expand supported recovery housing, and increase access to treatment and employment services statewide. The funding will also establish a new 12-bed medically oriented recovery house, expand housing support to all HUSKY types, and continue existing programs like the Cornell Scott recovery shelter and the Wheeler clinic's access line.

## **Beresford Wilson's Recognition and Presentation Sharing**

The conversation ended with an acknowledgment of Beresford's significant contributions to the behavioral health and mental health field over 30 years, which was noted by Brenetta. Sabrina

and Kelly expressed regret for not recognizing him earlier and assured that he would be acknowledged at the upcoming Main Oversight Council meeting. The group also discussed the sharing of presentations by Rob and Shawn, with David requesting permission to publish them online, which was granted. The meeting wrapped up with a reminder about the Main Oversight Council meeting scheduled for the following day.