

Connecticut Medicaid Substance Use Disorder Demonstration Waiver

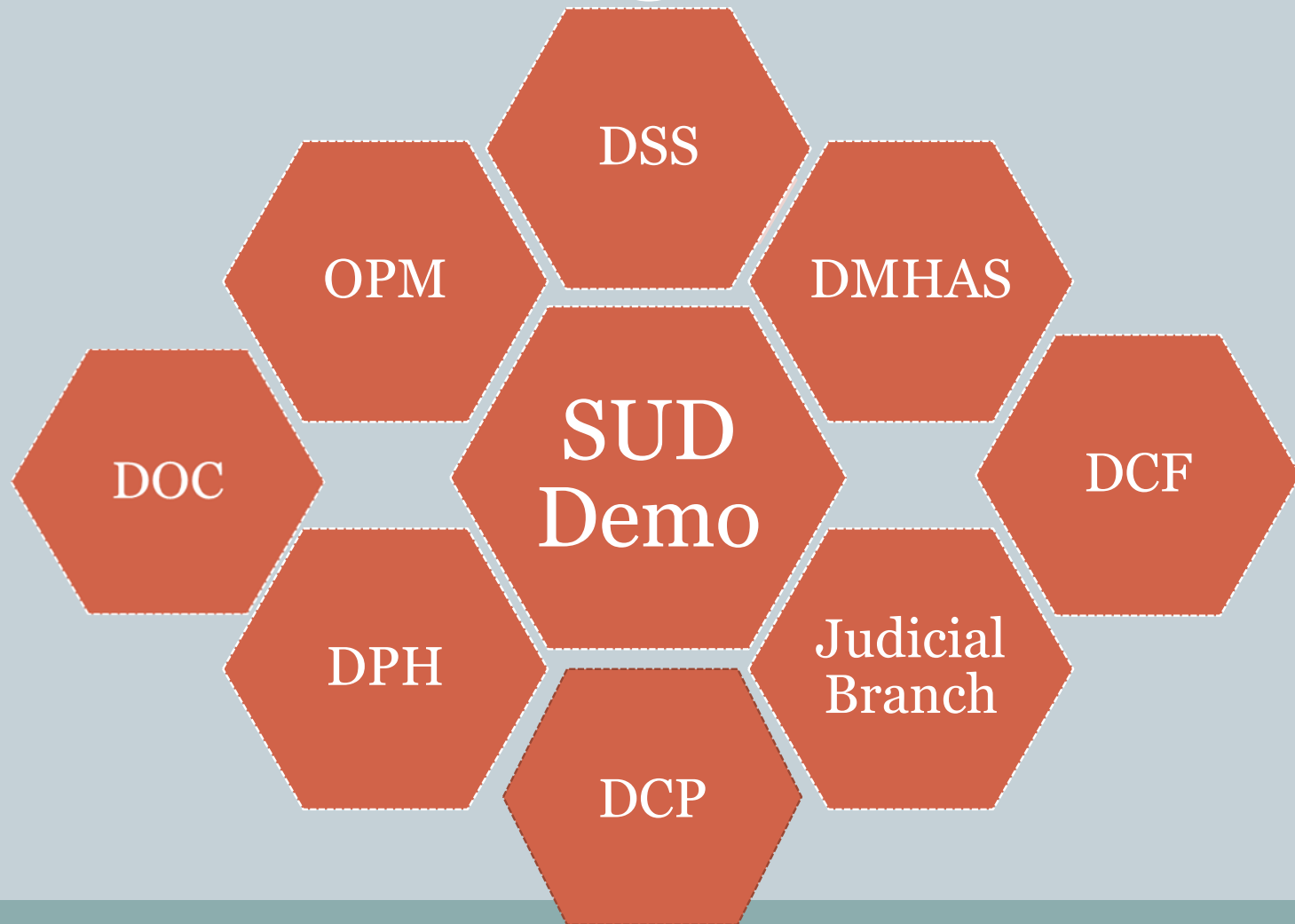


**BEHAVIORAL HEALTH PARTNERSHIP OVERSIGHT COMMITTEE
APRIL 12, 2023**

**DEPARTMENT OF SOCIAL SERVICES
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
DEPARTMENT OF CHILDREN AND FAMILIES
JUDICIAL BRANCH
DEPARTMENT OF CORRECTION
DEPARTMENT OF PUBLIC HEALTH
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OFFICE OF POLICY MANAGEMENT**

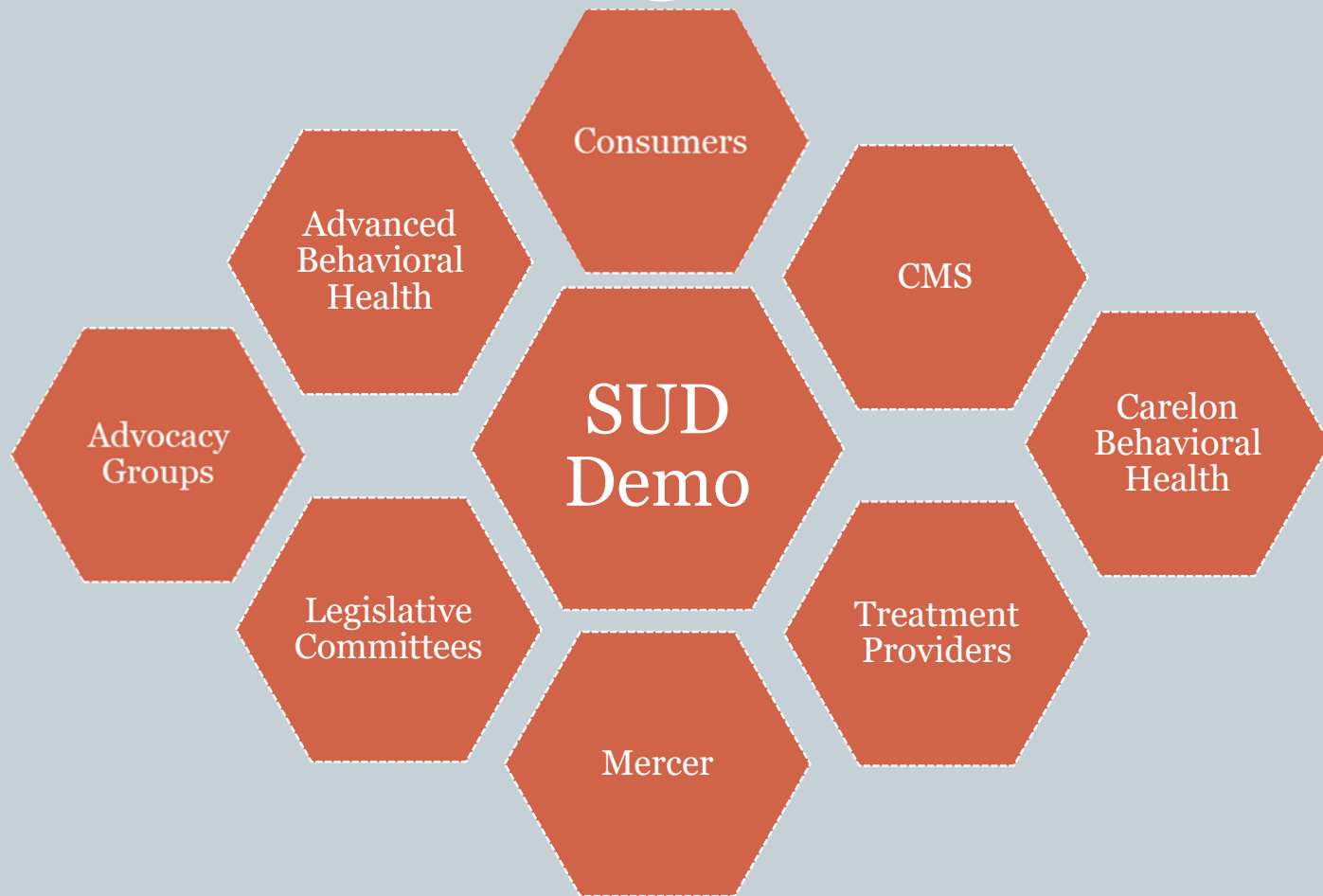
State Agency Collaboration

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Stakeholder Input

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Background and Purpose of SUD Demo Waiver

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- As part of the U.S. Department of Health and Human Services' effort to combat the ongoing opioid crisis, the Centers for Medicare & Medicaid Services (CMS) created an opportunity under the authority of section 1115(a) of the Social Security Act for states to demonstrate and test flexibilities to improve the substance use disorder (SUD) service system for beneficiaries.
- The purpose of this waiver is to allow coverage of residential and inpatient SUD services under HUSKY Health that have previously been excluded due to longstanding federal policies.
- Connecticut received CMS approval of the waiver on April 14, 2022 with a Demonstration approval period through March 2027.

State Objectives

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- The intent of this Demonstration is to provide critical access to a full array of SUD treatment services for Connecticut HUSKY Health members and improve the delivery system for these services to provide more coordinated and comprehensive SUD treatment.
- With first-time federal funding of these treatment services, the state is reinvesting in the services system by way of increased provider payment rates and provider standards to improve the quality of care all treatment recipients receive.

State Objectives Continued

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- The goals and objectives for this Demonstration include:
 - Increased rates of identification, initiation and engagement in treatment for opioid use disorder (OUD) and other SUDs;
 - Increased adherence to and retention in treatment for OUD and other SUDs;
 - Reductions in overdose deaths, particularly those due to opioids;
 - Reduced utilization of emergency departments and inpatient hospital settings for OUD and other SUD treatment where the utilization is preventable or medically inappropriate through improved access to other continuum of care services;
 - Fewer readmissions to the same or higher level of care where readmissions are preventable or medically inappropriate for OUD and other SUDs; and
 - Improved access to care for physical health conditions among beneficiaries with OUD and other SUDs.

Eligibility

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- This Demonstration removed Medicaid payment barriers for SUD residential and inpatient treatment, ensuring critical access for all coverage groups:
 - HUSKY A—Medicaid for children, teens, parents, relative caregivers and pregnant women;
 - HUSKY B—Children’s Health Insurance Program for children and teens up to age 19;
 - HUSKY C—Medicaid for adults 65 and older and adults with disabilities, including long-term services and supports and Medicaid for Employees with Disabilities;
 - HUSKY D—Medicaid for low-income adults without dependent children.

Impact to Members

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- Improved access to SUD residential and outpatient services
- Improved treatment services through higher clinical standards
- Individualized treatment planning and treatment services
- Focus on key healthcare outcomes related to SUD:
 - Follow up after emergency room visits to make sure someone entered treatment
 - Follow up after hospitalization to make sure someone connects to the next level of care
- Access to Medication for Addiction Treatment

ASAM Certification Development and Monitoring

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Implementation Phases

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- **Phase 1** → SUD Inpatient Treatment at State Operated and Private Psychiatric Hospitals – April 15, 2022
- **Phase 2** → SUD Residential Treatment at Free-Standing Residential Treatment Facilities – June 1, 2022
- **Phase 3** → SUD Intermediate Levels of Care at Behavioral Health Clinics, Enhanced Care Clinics and Outpatient Drug and Alcohol Abuse Centers – November 15, 2022
- **Phase 4** → SUD Intermediate Levels of Care at Outpatient Hospitals – March 1, 2023
- ON THE HORIZON: OTPs/OBOTs, Implementation with FQHCs, Outpatient Redesign, Early Intervention.

Implementation Activities

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- Updated the DMHAS Bed Tracking Website to reflect ASAM language.
- Tracking data on authorizations for the residential levels of care since October 2022. The currently available data shows that agencies providing ASAM 3.7 (including the co-occurring enhanced programs) may be having difficulty either identifying appropriate members for admission and/or are having difficulty supplying sufficient information at the time of the authorization request with the Behavioral Health Administrative Services Organization, Carelon Behavioral Health (“Carelon”).
- Meetings were recently held with individual residential agencies to review their specific authorization data and outcomes of the first round of monitoring visits performed by Advanced Behavioral Health (“ABH”).
- The State has provided an opportunity for agencies to “flex down” and provide lower levels of care for individuals when opportunities for treatment at these lower levels of care are not presently available. This opportunity will begin on May 1, 2023 and hopes to mitigate potential capacity gaps at some of the lower levels of care and ensure members receive treatment services consistent with the level of care needed.
- Six-month monitoring visits for the Phase 3 Ambulatory providers will be beginning soon. ABH will be scheduling these with provider agencies.

Notable Enhancements

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Under this Demonstration, the State anticipates:

- The use of common language that is evidence-based to guide treatment services across levels of care. Use of the ASAM Criteria is considered to be effective in preventing under- and over-treatment of SUD.
- Individualized lengths of stay that are clinically driven and outcomes driven.
- Moving away from using “treatment failure” as an admission prerequisite.
- Moving towards an interdisciplinary, team approach to care that includes licensed and unlicensed staff – including certified peers and service coordinators.
- Increased coordination between levels of care to improve transitions.

Additional Resources

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- Information about this Demonstration is posted to the DSS website at this link: <https://ct.gov/dss/SUD1115>
- Subscribe to updates on this Demonstration

Section 1115 Demonstration Waiver for Substance Use Disorder (SUD) Treatment

Overview

Goals and Milestones

Meeting Schedule

Related Resources

Overview

Submission to the Centers for Medicare & Medicaid Services (CMS) - Substance Use Disorder (SUD) Section 1115 Demonstration Waiver

[Click this link to subscribe to updates regarding this project.](#)

Thank you!

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QUESTIONS AND COMMENTS

