SUBSTANCE USE DISORDER TREATMENT AND REFERRAL PROCESS

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Substance Abuse Prevention and Control (SAPC)
CONTENT OVERVIEW

• SAPC’s Role and Scope
• SUD Prevalence Among Homeless Individuals
• New SUD Treatment Delivery System
  – Benefits
  – How Measure H will be utilized
  – Key Requirements
• SUD Treatment Entryways and Referral Process
• Questions
SUBSTANCE ABUSE PREVENTION AND CONTROL (SAPC)

SAPC leads and facilitates the delivery of a full spectrum of prevention, treatment, and recovery support services proven to reduce the impact of substance use disorders (SUD).

– SAPC contracts out the majority of its SUD services; only one County-run residential and OP facility (Antelope Valley Rehabilitation Centers)
– Over 150 contracted community-based SUD providers who provide services at over 300 sites throughout LA County
– Currently serving about 60,000 people annually

• Mission
  – Reduce community and individual problems related to alcohol and drug abuse through evidence-based programs and policy advocacy.

• Vision
  – Provide countywide access to “Precision Addiction Medicine” → the right service, at the right time, for the right duration, in the right setting.
SUD AMONG HOMELESS INDIVIDUALS

• Homeless patients made up 16.8%, or 10,035 individuals, of those admitted into SUD treatment in Fiscal Year 2014-15*.

• At discharge from SUD treatment:
  – 58.4%, or 3,705 individuals identified as still homeless
  – 34.1%, or 2,163 individuals were not homeless

• On average, about 1/3 of patients who were homeless at admission were assisted in securing housing at discharge.

*Source: DPH-SAPC Annual Treatment Report for Fiscal Year 2014-2015
The Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver is the greatest opportunity in recent history to design and implement an SUD system of care that has the financial and clinical resources to more fully address the complex and varied needs of individuals with SUDs.
Expansion of SUD Services under ACA

- **March 23, 2010:** President Obama Signs the Affordable Care Act (ACA) to Achieve the “Triple Aim”
  1. Improving the Individual Experience of Care
  2. Improving the Health of Populations
  3. Reducing the Per Capita Costs of Care for Populations

- **January 1, 2014:** Medi-Cal Eligibility Expansion
  New beneficiaries now include single adults without children with income up to 138% Federal Poverty Level (FLP)

- **December 30, 2015:** Approval of California’s Medi-Cal 2020 Demonstration
  CMS extended California’s Bridge to Reform waiver for another 5 years to support value not volume of care, better integration of care and adoption of alternative payment methodologies

- **August 13, 2015:** Approval to Amend California’s Bridge to Reform Demonstration
  Added the Drug Medi-Cal Organized Delivery System (DMC-ODS) component that expands available levels of care, adopts ASAM Criteria, supports quality improvement and utilization management

- **May 1, 2016:** Medi-Cal Eligibility Expansion
  Children under 19 are eligible for full-scope Medi-Cal regardless of immigration status, if other eligibility requirements are met

- **July 1, 2016:** My Health LA SUD Expansion
  Substance use disorder (SUD) treatment services available to individuals eligible for My Health LA (except OTP/MAT)

- **July 1, 2017 (Target):** Launch New SUD System
  Transform LAC’s SUD system of care and launch single benefit package for eligible beneficiaries that includes new DMC benefits
OLD SYSTEM
Contracts by Funding Sources

- CalWORKs
- GPS
- GR
- AITRP
- AB 109
- DMC
- Other Special Projects
- Drug Court

NEW SYSTEM
DMC as Primary Payer of Services

- No more funding-specific contracts. However, non-DMC-covered services will be paid through other SAPC funding sources.
Benefits

START-ODS expands the available services to patients in order to create a fuller continuum of care.

**Old DMC-SUD System**
- ☑ Outpatient
- ☑ Intensive Outpatient
- ☑ Residential (Perinatal Patients Only)
- ☑ Opioid Treatment Program
- ☑ Individual Sessions (Crisis Only)
- ☑ Group Sessions

**New DMC-SUD System for Youth and Adults**
- ☑ Outpatient
- ☑ Intensive Outpatient
- ☑ Residential (All Populations – 3 Levels of Care)
- ☑ Opioid Treatment Program
- ☑ Additional Medication-Assisted Treatment
- ☑ Withdrawal Management (Detox)
- ☑ Individual Sessions (No Limits)
- ☑ Group Sessions
- ☑ Family Therapy
- ☑ Case Management/Care Coordination
- ☑ Recovery Support Services
- ☑ Field-Based Services
- ☑ Recovery Bridge Housing
Benefits for Homeless Individuals

START-ODS expands the available services to homeless patients in order to address their homelessness status.

**Recovery Bridge Housing**

- Type of abstinence-based, peer supportive housing that provides a safe interim living environment for patients who are homeless or in unstable housing while receiving treatment in outpatient, intensive outpatient, opioid treatment program, or outpatient withdrawal management
- Stays of up to 90 days
- 500 beds funded by Measure H
- 250 beds funded by other non-DMC funds

**CENS in Permanent Supportive Housing**

- SUD screenings, referrals, and service navigation to residents at project-based and scattered site PSH housing throughout Los Angeles County
- CENS will refer residents to treatment providers using the Service and Bed Availability Tool (SBAT)
- Funded by Measure H
How Measure H will be Utilized

Strategy B7 - Interim/Bridge Housing for those existing institutions

• Recovery Bridge Housing (RBH) for up to 90 days.
• RBH will be available to homeless clients who are still homeless at treatment discharge and choose abstinence-based housing.
• Require concurrent participation in outpatient, intensive outpatient counseling, or opioid treatment program services.
• Proposed Annual Funding - $6,202,665.

Strategy D7 - Provide services and rental subsidies for Permanent Supportive Housing

• Outreach and engagement services to residents in permanent supportive housing.
• Provide SUD screening and referral to SUD treatment services.
• Funding will support the onsite CENS at selected permanent supportive housing facilities.
• Proposed Annual Funding - $562,500.
Key Requirements of DMC-ODS

• **Patient Eligibility**
  – Medi-Cal or My Health LA-eligible, which includes those who have not completed the application
  – Verifiable residence in Los Angeles County (LAC), including benefits assigned to LAC if a Medi-Cal beneficiary
  – AB 109 or drug court participant who is not Medi-Cal or My Health LA eligible, and LAC resident
  – Meets medical necessity criteria for SUD services

• **Service Authorizations**
  – Adult: residential, recovery bridge housing
  – Youth: residential, withdrawal management, medication-assisted treatment
Key Clinical Requirements of DMC-ODS

• **Assessment Tools**
  – American Association of Addiction Medicine (ASAM) Triage Tool
  – ASAM Continuum
  – Diagnostic and Statistical Manual of Mental Disorders (DSM) for Substance-Related and Addictive Disorders, with the exception of Tobacco-Related Disorders and Non-Substance-Related Disorders

• **Evidence-Based Practices**
  – Motivational Interviewing (MI)
  – Cognitive Behavioral Therapy (CBT)
  – Relapse Prevention
  – Trauma-Informed Treatment
  – Psycho-Education
MAIN ENTRYWAYS INTO THE SPECIALTY SUD SYSTEM

**Specialty SUD System**

1. **Substance Abuse Service Helpline (SASH)**
   - Responsible for initial screening and referral to SUD provider

2. **Client Engagement & Navigation Services (CENS)**
   - SUD assessors and navigators at co-located State, County and city sites; and SPA-based Offices

3. **Direct-to-Provider**
   - Responsible for delivery of SUD services

*No wrong door approach*
Entryway #1: Substance Abuse Service Helpline (SASH)

The SASH is a toll-free call line that helps connect individuals (youth, young adults, and adults), providers and other stakeholders who are seeking specialty SUD services with appropriate SUD providers throughout Los Angeles County.

- Number: 1-844-804-7500
- Services:
  - SUD Screening
  - SUD Treatment Referral (Provisional Level of Care)
  - Patient Engagement
  - Patient Eligibility Check
  - Ancillary Referrals and Linkages
- Staffed by LPHAs and SUD counselors 24/7/365
- Operated by Department of Health Services
SUD SCREENING
Determine most appropriate provisional ASAM level of care
- Young Adults/Adults
  ASAM Triage Tool
- Youth/Parent
  Youth Engagement Screener

FIND PROVIDER
Use Service & Bed Availability Tool (SBAT) to identify SUD provider that offers necessary services that match individual service preferences.

REFER & LINK
Schedule an intake appointment with the identified provider within timely access standards (3 business days).

RESPONSIBILITIES OF THE SASH

ENGAGEMENT
Use Motivational Interviewing techniques to support completion of the screening and ultimately connect with the treatment provider.

ELIGIBILITY
Ask basic Medi-Cal or My Health LA eligibility, and Los Angeles County residency review to detect if likely eligible for services.

RESOURCES
Provide other resources to callers as needed, particularly if the purpose of the call is not for SUD services.
Entryway #2: Client Engagement and Navigation Services (CENS)

CENS targets populations involved with state, County and city entities, including individuals who are criminal justice-involved, uninsured, homeless, and/or have a co-occurring disorder.

Services:
• Outreach and Engagement
• Eligibility and Enrollment for Medi-Cal or My Health LA
• SUD Education
• SUD Screening
• SUD Treatment Referral (Provisional Level of Care)
• Service Navigation
• Ancillary Referrals and Linkages
• Agency and Community Education
Entryway #2: CENS Locations

CENS Area Offices:
- One CENS Area Office in each SPA
- Receives referrals from DPSS CalWORKs and General Relief
- Receives referrals from DCFS
- Receives referrals from the Superior Court

Co-Located Sites:
- Probation Department HUBS and Area Offices
- Sheriff’s Department Jails
- Los Angeles Superior Courts
- Mental Health: Urgent Care Centers, Psychiatric Emergency Room
- Physical Health: FQHCs, Hospital Emergency Rooms
- Homeless: Encampments, Permanent Supportive Housing
What about the Community Assessment Services Centers (CASC)?

As of July 1, 2017, only 8 of the 19 CASC Area Offices have remained to provide in-person screening and referral services.

Screening functions have transferred to the SASH, CENS, and Provider sites.

The helpline (1-888-742-7900) has rolled over to SASH.
SUD SCREENING
Determine most appropriate provisional ASAM level of care
- Young Adults/Adults
  ASAM Triage Tool
- Youth/Parent
  Youth Engagement Screener

FIND PROVIDER
Use Service & Bed Availability Tool (SBAT) to identify SUD provider that offers necessary services that match individual service preferences.

REFER & LINK
Schedule an intake appointment with the identified provider within timely access standards (3 business days).
Remind and confirm if appointment is kept, and assist if not.

RESPONSIBILITIES OF THE CENS

ENGAGEMENT & OUTREACH
Use Motivational Interviewing techniques to support screening completion and connection to treatment provider. Field outreach may be needed for hard-to-reach clients.

ELIGIBILITY & ENROLLMENT
Conduct Medi-Cal or My Health LA eligibility, and LAC residency determination, and initiate new or transfer of benefits if needed. Assist with Medi-Cal or MHLA application.

RESOURCES & EDUCATION
Provide ancillary referrals to clients as needed, including education on SUD-related topics to clients, agencies and communities.
Entryway #3: Direct-to-Provider

If Provider offers the full continuum of care:
● Full ASAM Assessment
● Medical Necessity Determination for Services

If Provider does not offer the full continuum of care:
● SUD Screening
● SUD Treatment Referral (Provisional Level of Care)

Included Services:
● Patient Engagement
● Eligibility and Enrollment
● Ancillary Referrals and Linkages
SUD SCREENING
Determine most appropriate ASAM level of care
- Young Adults/Adults
  ASAM Triage Tool
- Youth/Parent
  Youth Engagement Screener

FIND PROVIDER
If the individual needs a level of care that is not offered by the agency or an agency that better matches the individual’s service preferences - use the SBAT.

REFER & LINK
If the individual needs to be referred to another agency, help schedule an intake appointment within timely access standards (3 business days).

RESPONSIBILITIES OF THE PROVIDER

ENGAGEMENT
Use Motivational Interviewing techniques to support completion of the screening and/or assessment.

ELIGIBILITY & ENROLLMENT
Conduct Medi-Cal or My Health LA eligibility, and LAC residency determination, and initiate new or transfer of benefits if needed. Assist with Medi-Cal or MHLA application.

RESOURCES
Provide other resources and referrals to clients as needed using the case management benefit for individual who meet medical necessity.
Service & Bed Availability Tool (SBAT)

- Publicly accessible, web-based dashboard of intake appointment slots and bed availability

- The SBAT will be the primary means by which appropriate SUD referrals are identified.

**Purpose:** To provide the general public, SASH, CENS, and providers an inventory of available treatment slots and beds in order to more easily coordinate along the SUD care continuum essential to achieve a truly organized system of SUD care.
Service & Bed Availability Tool (SBAT)

• Workflow for the 3 Entryways
  – General Public
    : Call SASH or access the SBAT to identify an appropriate SUD provider directly
  – SASH
    : Perform screening via phone to identify provisional LOC needed
    : Utilize SBAT to identify appropriate providers who meet the needs of the patient, and arrange appointment (OP/IOP) or reserve bed (Res/Res WM/RBH) according to patient preference
    : 1-844-804-7500
  – CENS
    : Perform screening face-to-face to identify needed provisional LOC, then use SBAT to identify an appropriate SUD provider
Service & Bed Availability Tool (SBAT)
START-ODS RESOURCES

SAPC Website: http://publichealth.lacounty.gov/sapc/


SAPC Adult Systems of Care Email: SAPC_ASOC@ph.lacounty.gov
QUESTIONS?