



Clinical Services Division: Utilization Management & Quality Improvement Updates

Los Angeles County Department of Public Health
All Provider Meeting March 5, 2024
Substance Abuse Prevention & Control





Agenda



Addiction Medication Services

SAPC IN 24-01 Reminder

NEW R95 Capacity Building 1E Workforce
Development Capacity Building Start-Up
Funding



Clinical Documentation Standards

When Authorization is Required During
Patient Engagement



Manuals & Guides

Bulletins

Clinical

Beneficiary

Contracts & Compliance

Finance

CRLA

Contract Bulletins

<http://publichealth.lacounty.gov/sapc/providers/manuals-bulletins-and-forms.htm?tm#bulletins>

Open All

Bulletins 2024

Subject	Date
24-01 - Addiction Medication Access in the SAPC Treatment Network <i>(New - January 2024)</i>	 01/05/24
- Attachment A - Patient Information About Addiction Medications <i>(New - January 2024)</i>	 01/05/24
- Attachment B - Required Addiction Medications <i>(New - January 2024)</i>	 01/05/24
- Attachment C - Patient Eligibility for Addiction Medications <i>(New - January 2024)</i>	 01/05/24
- Attachment D - Administration, Storage, and Disposal of Addiction Medications <i>(New - January 2024)</i>	 01/05/24
- Attachment E - Addiction Medication Training Requirements for Staff <i>(New - January 2024)</i>	 01/05/24
- Attachment F - Accessing Addiction Medications in Los Angeles County <i>(New - January 2024)</i>	 01/05/24
- Attachment G - Incidental Medical Services <i>(New - January 2024)</i>	 01/05/24
- Optional Policy Template A for Non-Residential Non-OTP Treatment Sites <i>(New - January 2024)</i>	 01/05/24
- Optional Policy Template B for Residential and Inpatient Treatment Sites <i>(New - January 2024)</i>	 01/05/24
- Optional Policy Template C for Opioid Treatment Program Sites <i>(New - January 2024)</i>	 01/05/24



January 5, 2024

SAPC INFORMATION NOTICE 24-01

Supersedes IN 22-04

TO: Substance Use Disorder
Contracted Treatment Provider Agencies

FROM: Gary Tsai, M.D., Bureau Director *GT*
Substance Abuse Prevention and Control Bureau

SUBJECT: **Addiction Medication Access in the SAPC Treatment Network**

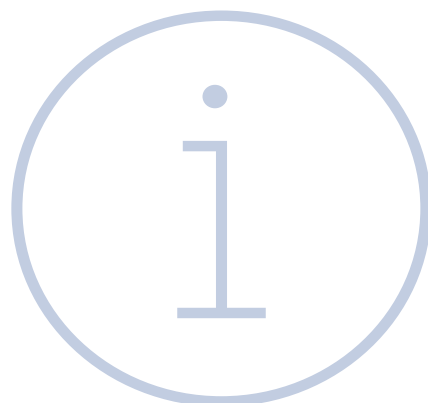
The Department of Public Health's Bureau of Substance Abuse Prevention and Control (SAPC) is releasing this Information Notice to update our requirements for contracted substance use treatment provider agencies (subsequently referred to as treatment agencies) to provide services related to addiction medications (also known as Medications for Addiction Treatment or MAT) for all patients, either directly or through referral. Addiction medications treat substance use disorders (SUDs), are an evidence-based treatment option, and are a key component of the full spectrum, biopsychosocial approach to the treatment of SUDs.

Treatment agencies are required to create and update as necessary active policies and procedures related to the provision of addiction medications either directly to their patients or via linkage with other providers (e.g., federally qualified health centers [FQHCs], primary care providers) that offer addiction medication services. SAPC encourages formal arrangements such as memorandums of understanding (MOUs) between agencies in order to optimize referral relationships and processes.

This information notice updates prior guidance in accordance with California Health and Safety Code Sections 11831.1 and 11834.28 and California Department of Health Care Services (DHCS) Behavioral Health Information Notice 23-054.

Treatment agency practitioners shall provide patients and any adult collateral contacts (including but not limited to adult family members) with information about addiction

<http://publichealth.lacounty.gov/sapc/providers/manuals-bulletins-and-forms.htm?tm#bulletins>



Provide Information
About Addiction
Medications



Ask About Problem Substance Use

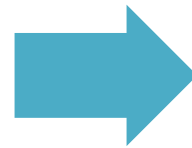
- **Opioid, Alcohol, Tobacco,** Stimulants, Cannabis
- DSM-5 Checklist
- Within 24 hours of initial date of service



Offer Addiction Medication Evaluation

- Directly
OR
- Through Coordinated Referral
- If accepted, plan should be in place within 24 hours of initial DOS.

If Patient is Currently Treated with a Controlled Substance



Policies and Procedures for Administering / Storing / Disposing of Controlled Substances



Staff Training Requirements

- Schedule for medication evaluation (directly or through referral)
- Medical treatment should be adjusted based upon an individualized determination of the risk/benefits for each patient

- All agencies should support treatment with all addiction medications, including methadone and buprenorphine, when medically appropriate (based upon the patient's individualized medication evaluation)

- All agencies are required to educate staff about addiction medications and about their addiction medication policies



Referral Options for Off-Site Addiction Medication Evaluation

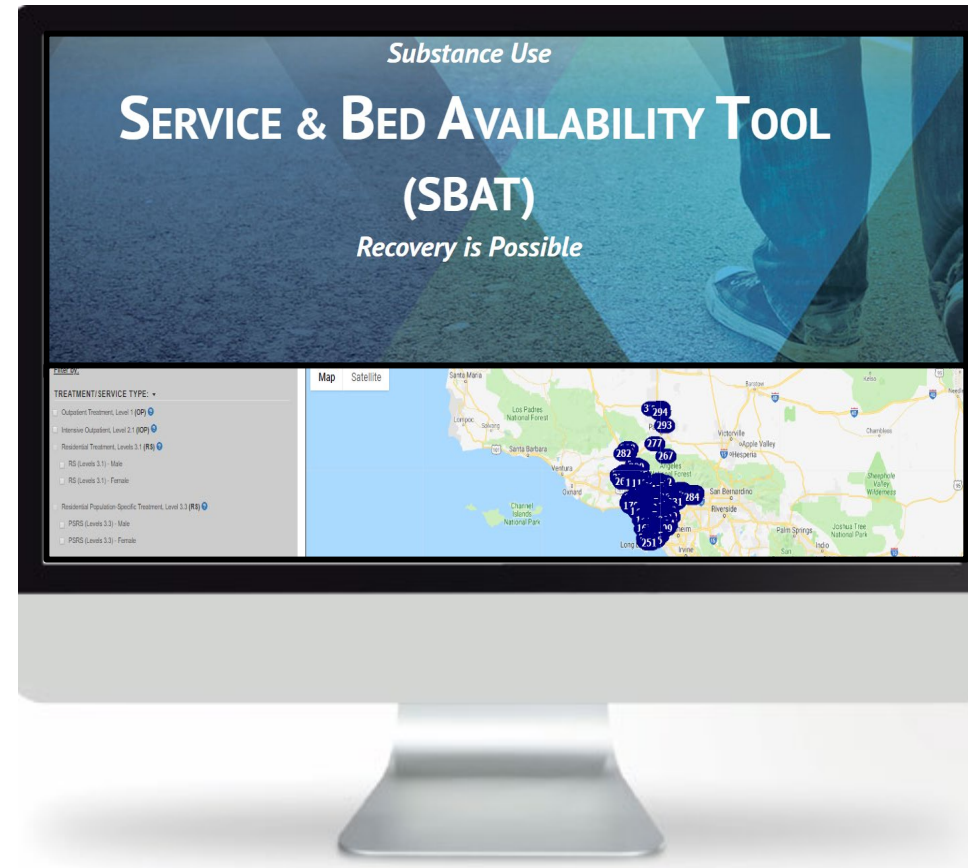
- Service and Bed Availability Tool: Lists all SAPC-Contracted OTPs (which offer medications for opioid use disorder)
- MAT LA Clinic Directory: <http://losangelesmat.org>
 - Lists Community Health Centers that offer addiction medications
- LA County MAT Consultation Line: **213-288-9090** (open from 8a-12a seven days a week, on-demand addiction medication evaluation)

Service & Bed Availability Tool (SBAT)

The SBAT Website allows anyone with an Internet connection to find SUD treatment services and site contact information.

Filter by:

- Distance
- Treatment/Service Type
- Languages Spoken
- Clients Served (e.g. youth, perinatal, disabled, LGBTQIA, homeless, re-entry, etc.)
- Night/Weekend availability



<http://sapccis.ph.lacounty.gov/sbat>



MAT LA CLINIC DIRECTORY

**Medications for Addiction Treatment (MAT)
Clinic Searchable Directory**

<http://LosAngelesMAT.org>



MATLA | Medications For Addiction Treatment
CLINIC DIRECTORY | Los Angeles Community Clinic Directory

Home FAQ Resources ▾ [Find a Clinic](#) [Add a Clinic](#)

English

Need help finding a clinics near you? Email Us: LAMAT@dhs.lacounty.gov

Find Clinic

Complete One Required Field

5-digit Zip Code OR Service Planning Area

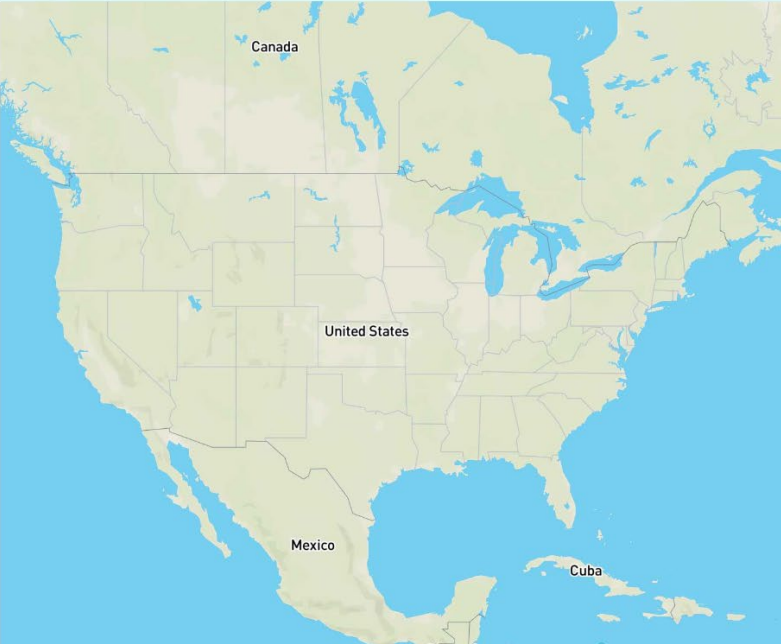
Optional Fields

Search Radius (OPTIONAL)

Medications (OPTIONAL)

- Acamprosate tabs (Campral)
- Buprenorphine long acting injection (Sublocade)
- Buprenorphine / Naloxone Sublingual (Suboxone)
- Disulfiram (Antabuse)
- Naltrexone long acting injection (Vivitrol) (AUD)
- Naltrexone long acting injection (Vivitrol) (OUD)
- Naltrexone tabs (Revia)

[Search for Clinics](#)



<http://LosAngelesMAT.org>



Ambulatory Care Network
HEALTH SERVICES • LOS ANGELES COUNTY

Addiction Medication (MAT) Consultation

Support Available 7 days per week, 8a-12a

- *Addiction medications can be started in **any setting**. Safe via telehealth. Save lives, improve health and social functioning.*
- *On-call providers help you start MAT for patients with **alcohol/opioid/meth/cannabis/tobacco use***
- *Patients benefit, **even if not yet ready to quit** using*
- *Reminder: **offer Narcan/Naloxone** to everyone that uses drugs*

MAT Consult Line:

(213) 288-9090



Health Services
LOS ANGELES COUNTY

3/4/2024

Sponsored by LAC+USC Medical Center Foundation, Inc in partnership with Los Angeles County and CA Bridge

Addiction Medication Prescribing Clinician Funding Opportunity

- **New** R95 Capacity Building 1E Payment: **Optional and strongly recommended**. This project is for start-up funds. Providers will be paid once an addiction medication (MAT) prescribing clinician implementation plan has been submitted and approved and can be paid before the implementation has been initiated / completed.
- To receive advance funds, complete and submit the designated invoice **along with** the required implementation plan.
- Agencies will need to submit quarterly addiction medication (MAT) prescribing clinician implementation updates for approval to avoid recoupment. Expenditure verification is not required.

Addiction Medication Prescribing Clinician Funding Opportunity

- R95 1E start-up funding is available to all SAPC-contracted treatment agencies
 - Ratio of \$200,000 **per** 1.0 Full Time Equivalent Prescribing Clinician
 - \$200,000 **per** FTE one-time start up funding spread over two years:
 - \$150,000 **per** FTE during Year 1 (FY23-24)
 - \$50,000 **per** FTE during Year 2 (FY24-25)
- Designed to be combined / matched with local agency funds, and sustained beyond two years through SAPC billing for medication services
- Currently capped at a max of \$200,000 (1.0 FTE) per agency (regardless of Tier)

Addiction Medication Prescribing Clinician Requirements

- Prescribing clinician(s) works as a member of the agency care team
- Can include more than one practitioner
 - For example, 1.0 FTE can include two 0.5 FTE eligible practitioners
- The clinicians' medication services are billed through SAPC (not through a managed care plan or other payer)
- Must provide the full range of *applicable* addiction medication services as described within [SAPC Information Notice 24-01](#)
 - Methadone cannot be prescribed through pharmacies; non-OTP clinicians are not expected to provide prescriptions for methadone to treat OUD



Forthcoming Dates

- Draft Invoice and Implementation Plan template released for comment by 2nd week of March
- Finalized / published week of March 25, 2024
- April 12, 2024 due date for R95 1E Addiction Medication Prescribing Clinician Funding Invoice and Implementation Plan
 - Extensions available on request **and**
 - Goal is first round of 1E start-up funds disbursed prior to June 30, 2024



Technical Assistance

- SAPC will publish suggested duty statement for addiction medication prescribing clinicians and recommendation for implementation plan components
- Recruitment resources:
 - CSAM Career Center <http://careers.csam-asam.org>
 - ASAM Career Center <http://careers.asam.org>
- IMS Resources Published through SAPC-IN 24-01 [Attachment G - Incidental Medical Services](#)
- Additional funding for external consultants forthcoming, and technical assistance is available upon request

When Authorization is Required During Patient Engagement

Single Screening Visit

- Co-triage documented
- **No request for authorization required; billed through p-auth**
- No CalOMS required

Recovery Services

- Includes assessment, care coordination, counseling (individual and group), family therapy, recovery monitoring, relapse prevention
- Full ASAM not required (although welcomed)
- **No request for authorization required; billed through p-auth**
- **Pre-admission engagement of patients** → no CalOMS required
- Once admitted to a formal course of treatment → CalOMS required within 7 days of date of admission

ASAM 0.5, 1.0, 2.1, OTP LOCs → Initial Engagement Authorizations

- A formal admission that includes assessment, care coordination, counseling (individual and group), family therapy, medication services (including MOUD / MAUD / Rx for other SUDs), patient education, SUD crisis intervention services
- CalOMS required within 7 days of admission
- Initial engagement authorization available for 30d (housed patients 21 years old and older) / 60d (PEH and/or age 20 years old and younger) during which a **full ASAM is not required**



Timing for Submission Auth Requests

- Providers should hold request for authorization until the patient's clinical trajectory and financial eligibility has been established.
- For Medi-Cal members who became disenrolled, provider agencies should use care coordination to re-enroll patients in Medi-Cal and hold the auth submission until the patient's Medi-Cal eligibility has been re-established.
- Establishing financial eligibility is one of the permitted exceptions to the 30 days rule governing timeliness of authorization submissions.



Timeliness of Authorization Submissions

- Member authorizations and reauthorizations must be submitted to the SAPC Quality Improvement and Utilization Management Unit within thirty (30) calendar days of admission or within thirty (30) calendar days of the first date of service.
- Four exceptions to the 30 days rule – authorization submissions should be held pending the establishment of financial eligibility in the following circumstances:
 1. Outside Los Angeles county beneficiary pending transfer
 - *Prospective policy change if LA County Residency following transfer is sufficient*
 2. An individual who applied for Medi-Cal but has not established DMC benefits yet
 3. Awaiting receipt of an Other Health Coverage denial
 4. Pending resolution of SAGE technical issue that prevented authorization submission (providers must document SAGE Help Desk Ticket Number related to the technical issue)
- All service authorization requests, including those delayed due to establishment of financial eligibility, must adhere to and meet Medi-Cal standards and requirements for timelines of clinical assessment.

30d Timeliness of Authorization are required as of 11/1/2020:

<http://publichealth.lacounty.gov/sapc/bulletins/START-ODS/20-11/SAPCIN20-11MemberAuthorizationSubmission.pdf>

Discussions/Questions



“The opposite of addiction is not sobriety; the opposite of addiction is **connection.”**

- Johann Hari