



The Indiana Family and Social Services Administration

Medicaid Advisory Committee,
August 2021



Agenda

- Background and Overview
- SUD/SMI Workgroup
- SUD Waiver Goals and Data
- SMI Waiver Goals
- 2020 Year in Review
- 2021 Focus Areas
- Reminder: Fall 2021 Stakeholder Meeting August 27th!



Indiana SUD and SMI Waivers

General Overview

- These waivers allow the State to receive federal financial participation (FFP) for short-term inpatient and residential stays for individuals aged 21-64 in qualified facilities that are considered Institutions for Mental Disease (IMDs) under federal law.
- State commits to making continued progress toward a variety of waiver goals and milestones for the duration of waiver approval.
- The waivers also require robust federal monitoring and evaluation requirements to measure the success of waiver implementation.

February 1, 2018

Indiana's §1115 SUD Demonstration Waiver goes live and is approved until December 31, 2020

October 26, 2020

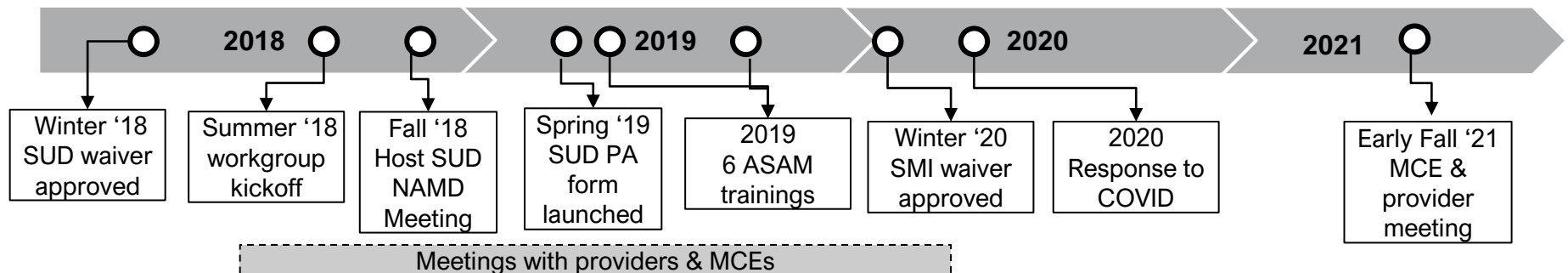
Indiana's §1115 SUD and SMI waivers renewals approved for an additional 5 years until December 31, 2025.



SUD/SMI Workgroup

- Several months after the launch of the SUD 1115 waiver, FSSA convened a group of OMPP & DMHA staff to identify key areas for enhanced collaboration. Providers and managed care entities gave feedback through a series of focused discussions.
- The initial work immediately led to process improvements around prior authorizations and State-provider-MCE communications.
- DMHA and OMPP staff have continued monthly, intentional collaboration. SMI work was integrated during the SMI waiver rollout.

Select Workgroup Highlights





Indiana SUD Waiver Goals

Purpose of Goal:

Expand availability of SUD services/ providers

- Increase rates of identification, initiation, and engagement in treatment
- Reduce utilization of emergency departments and inpatient settings
- Reduce overdose deaths

Increase utilization of evidence-based treatment methods

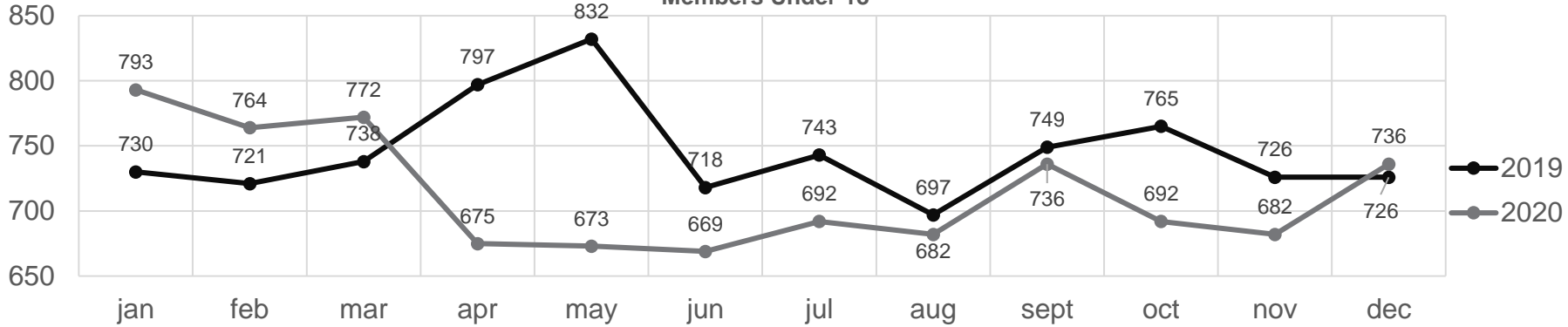
- Fewer readmissions to the same or higher level of care where the readmission is preventable or medically inappropriate
- Improve access to care for physical health conditions among beneficiaries
- Improve care coordination and transitions of care

Administrative improvement and simplification

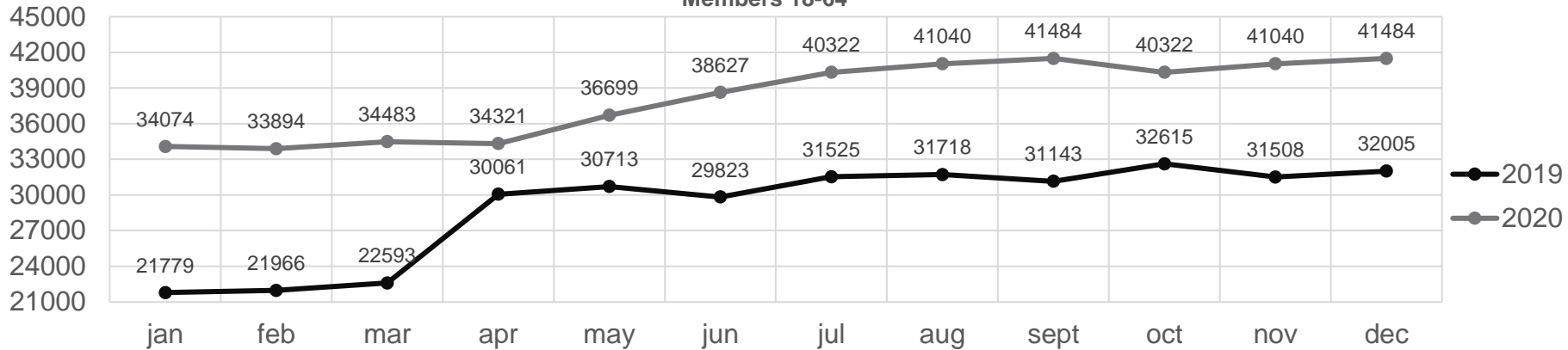
- Increase provider networks and participation
- Assure consistency with better provider education and guidance

SUD Waiver Reporting Data: Members Receiving SUD Treatment 2019 vs. 2020

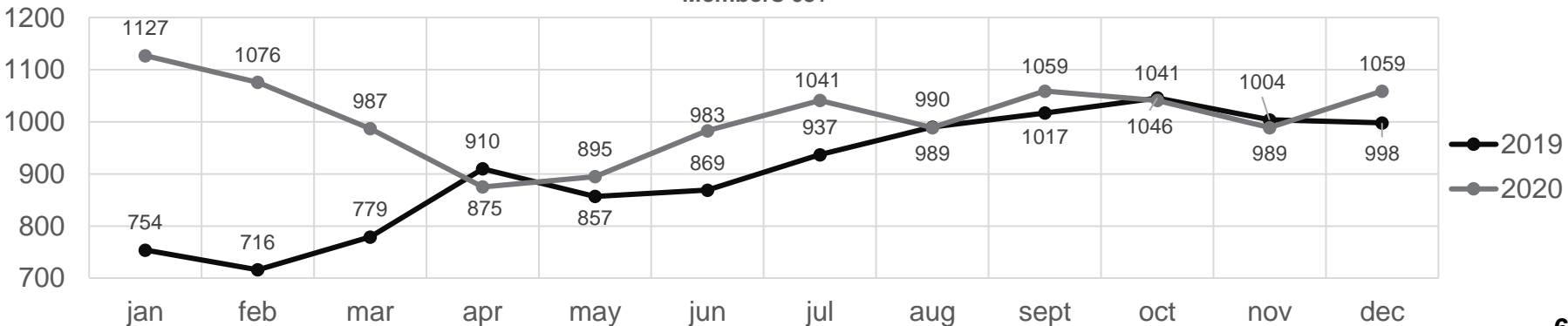
Members Under 18



Members 18-64

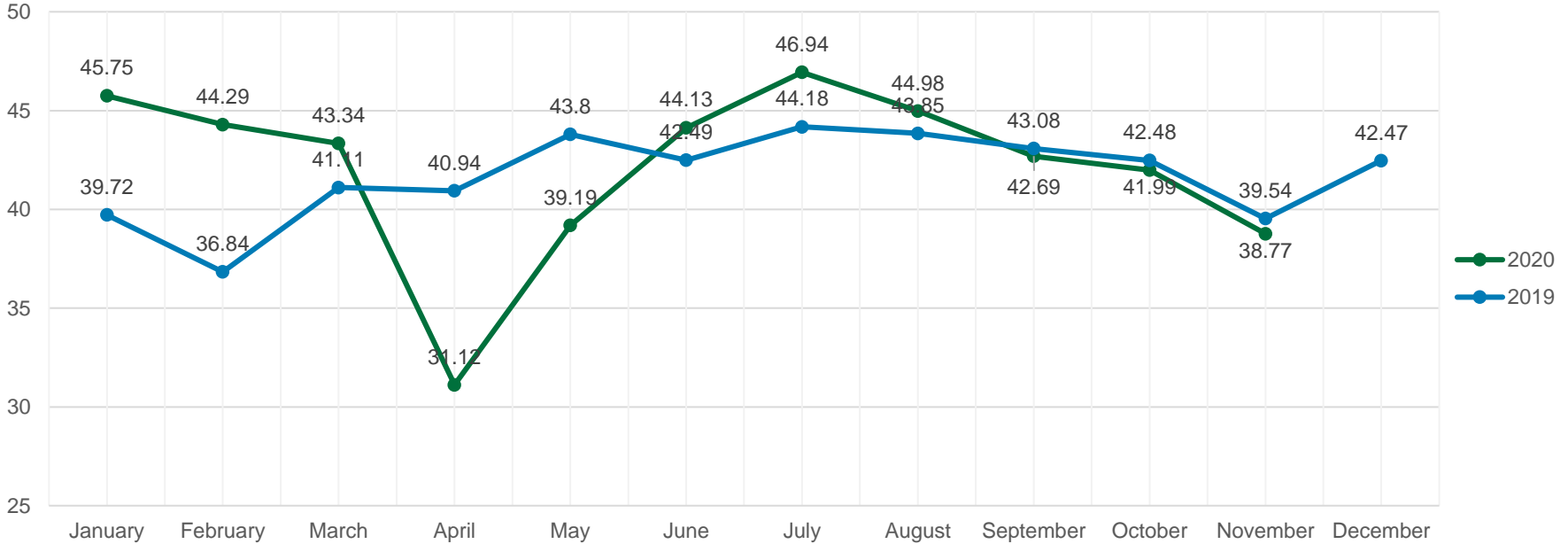


Members 65+

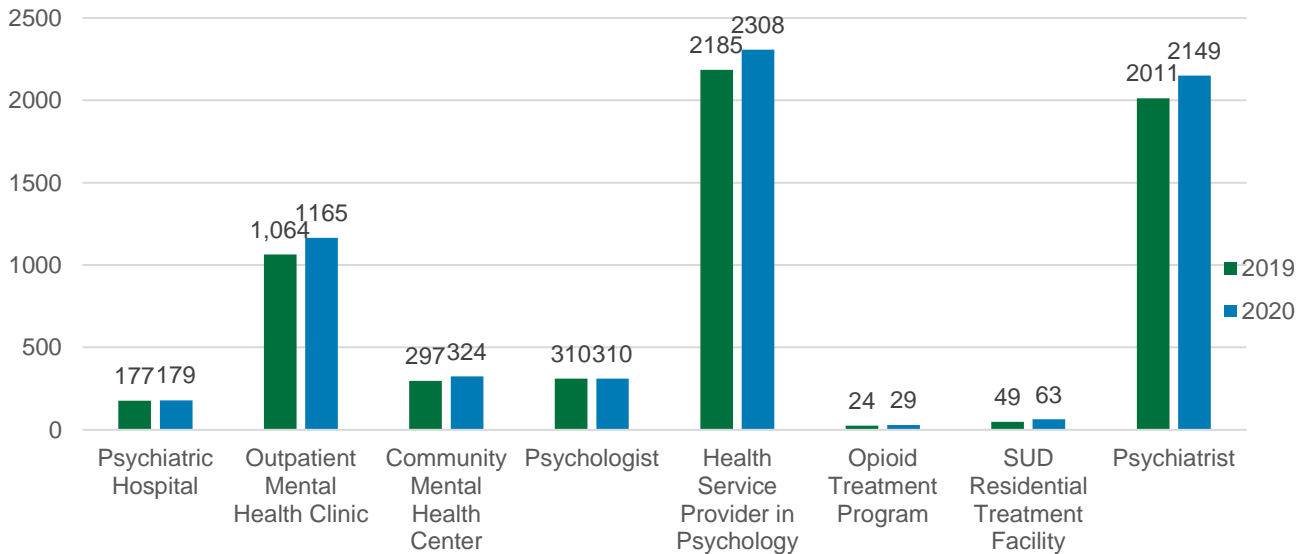


SUD Waiver Reporting Data: ED Visits, 2019 vs. 2020

ED Visits per 1000 Enrolled Members



SUD Behavioral Health Providers



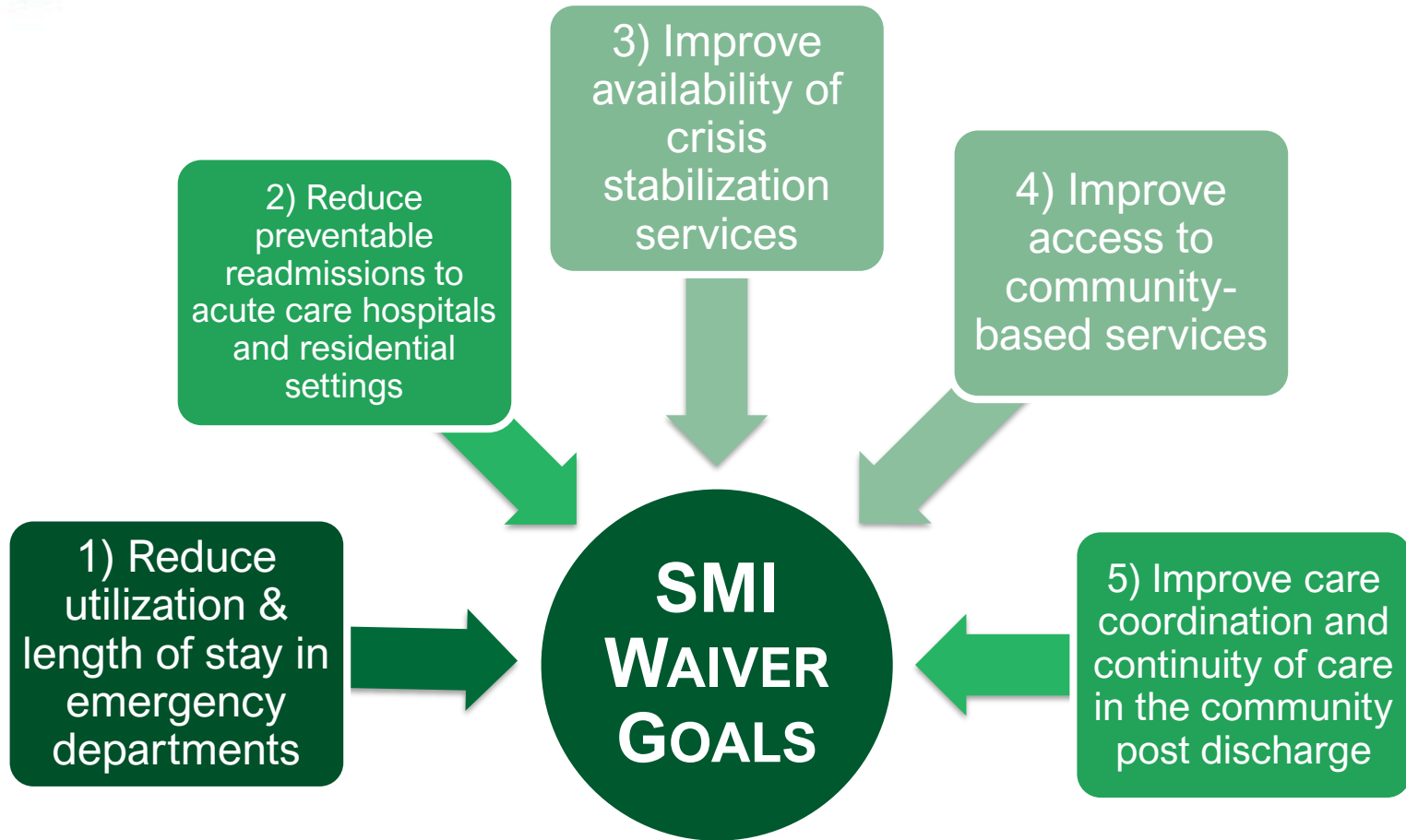
November 1, 2020, IHCP expanded eligible providers to include licensed behavioral health professionals:

 **1937**

Mid-level providers enrolled between Nov 2020-April 2021



Indiana SMI Waiver

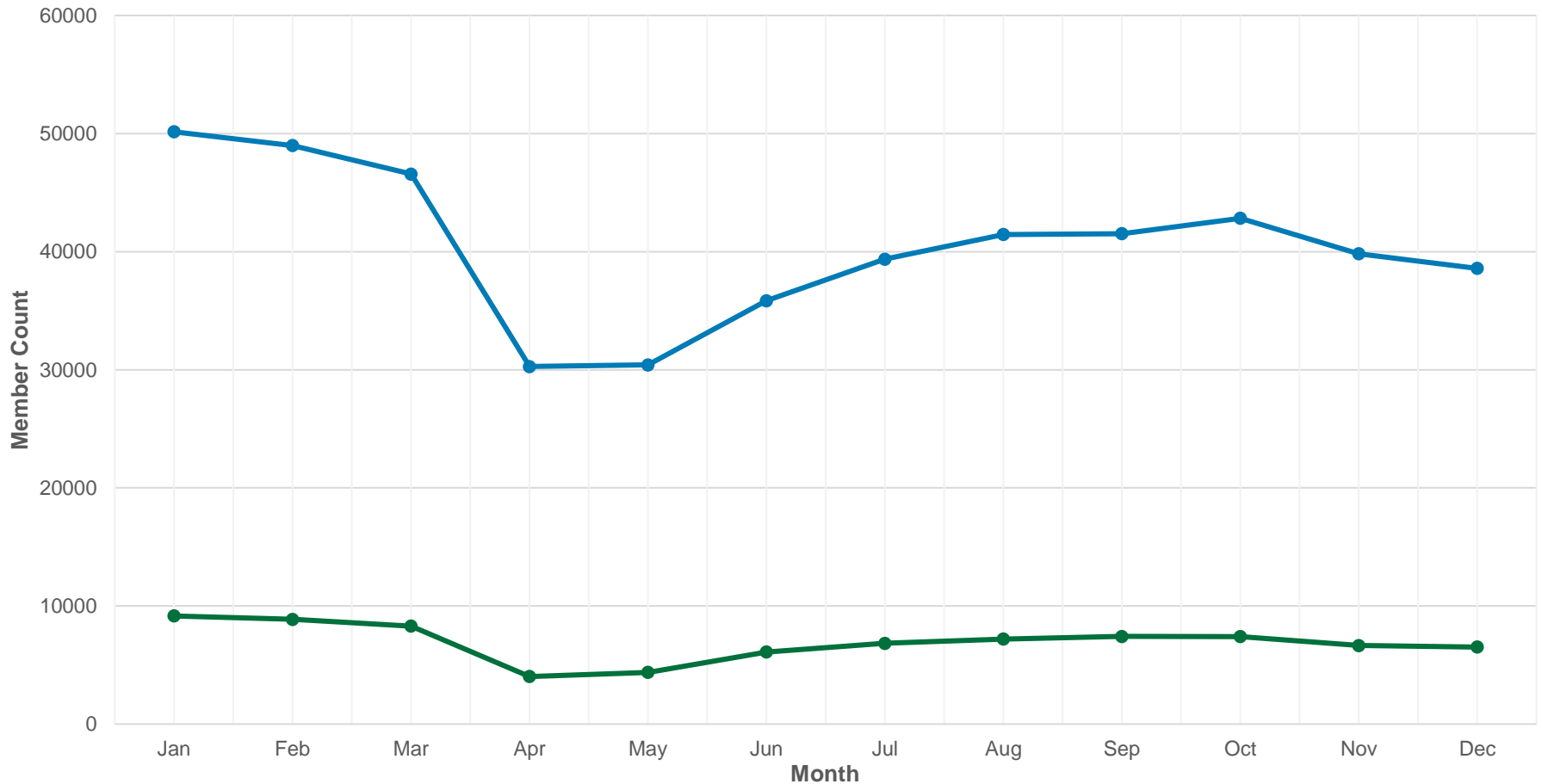




SMI Waiver Reporting

Outpatient BH Service Utilization

—●— Medicaid Population —●— Waiver Population

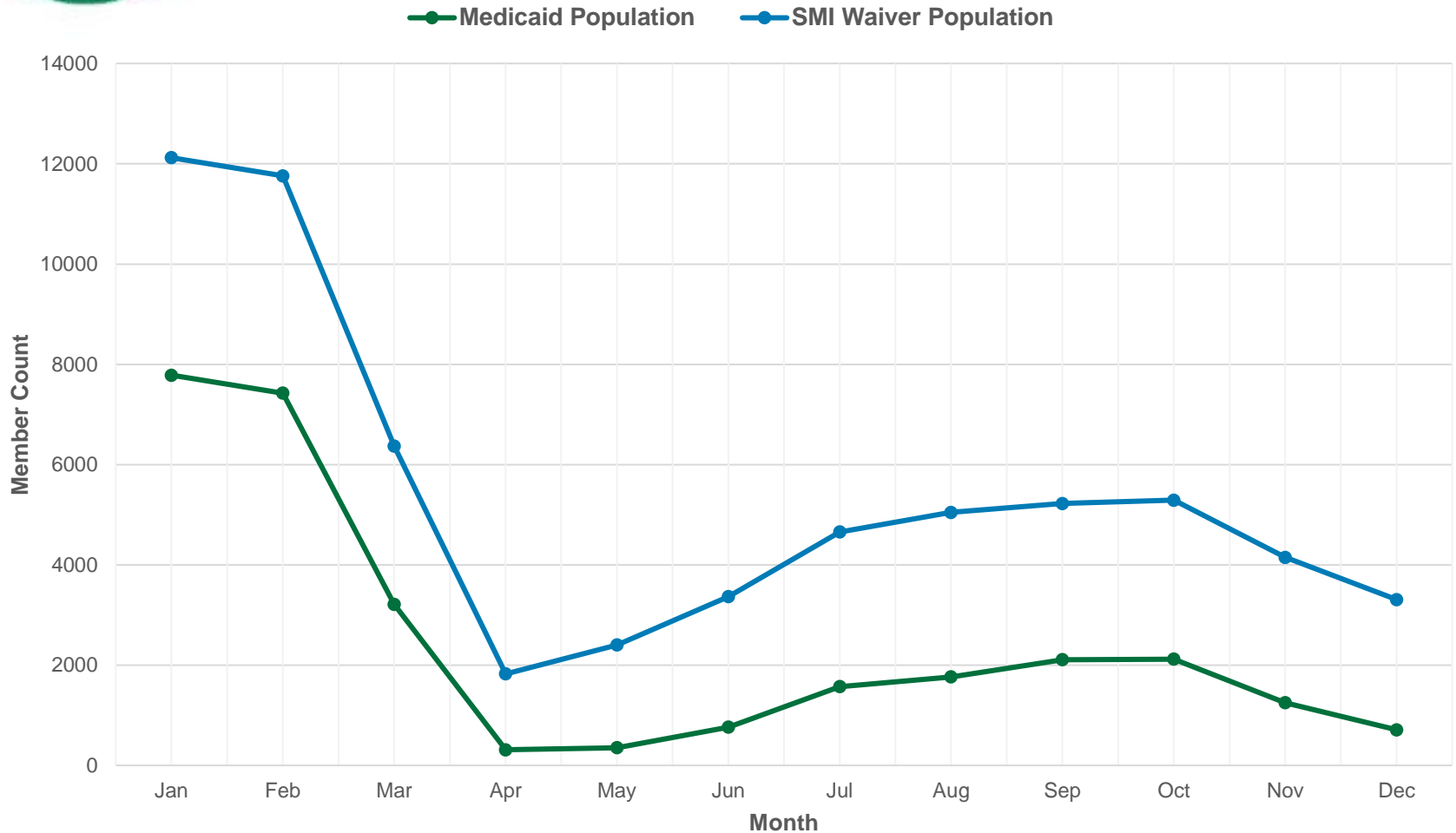


All data is from CY2020.



SMI Waiver Reporting





Emergency Dept. Utilization



All data is from CY2020.

2020 in Review – SUD/SMI Workgroup Accomplishments

The OMPP and DMHA Workgroup for Substance Use Disorder (SUD) treatment achieved notable improvements in the SUD treatment system in the midst of the on-going COVID-19 crisis.

Accomplishments	Description
<p>COVID-19 Response</p> 	<ul style="list-style-type: none"> Worked with providers & MCEs to adapt SUD treatment delivery during the COVID-19 pandemic so that individuals could continue to access treatment in a rapidly changing environment. Adaptations included: <ul style="list-style-type: none"> Prior authorizations modifications for certain SUD treatment Efforts to adopt telehealth treatment options
<p>Modifications to Telehealth</p> 	<ul style="list-style-type: none"> Expanded types of providers permitted to administer telehealth services for Medicaid funded SUD treatment. Many types of treatment were included in this expansion, and the temporary changes resulted in support for legislation during the 2021 legislative session to revise the Indiana Code.
<p>EMS for Naloxone Coverage</p> 	<ul style="list-style-type: none"> Indiana adopted CMS’s Emergency Triage, Treat, and Transport Model to allow for reimbursement to transport patients to non-emergency room treatment such as: <ul style="list-style-type: none"> Substance use disorder treatment Necessary emergency care (i.e., administration of naloxone)
<p>Licensed Behavioral Health Provider Enrollment Expansion</p> 	<ul style="list-style-type: none"> Made several modifications to the requirements for behavioral health treatment providers, incl. expanding the provider specialties eligible for enrollment.

2020 in Review – SUD/SMI Workgroup Initiatives

In 2020, the Workgroup focused on key initiatives to increase coverage for and access to SUD treatment.

Initiatives	Description
Credential Change for Addiction Counselor in Training II (ACIT II)	<ul style="list-style-type: none"> Worked on ACIT II credential requirements to encourage expanded workforce in OTPs and continuing professional development.
SUPPORT Act Grant	<ul style="list-style-type: none"> Interfaced with the grant team through assessment of provider capacity during COVID-19, data alignment efforts, and provider focus groups. Activities will continue into 2021 due to a six-month extension of the grant.
OpenBeds Treatment Connection	<ul style="list-style-type: none"> OpenBeds introduced a self-screening portal in February of 2020. Continued partnership between OpenBeds and Indiana 2-1-1 to help individuals find treatment for SUD.
Coverage of Medicare Opioid Treatment Program (OTP) Codes	<ul style="list-style-type: none"> Aligning with Medicare to cover the Medicare OTP bundled procedure codes (incl. buprenorphine and naltrexone) outside of OTP settings to increase access to care.
Alignment of Program Metrics for Dashboard	<ul style="list-style-type: none"> A working group has been conducting alignment efforts to bring metrics about SUD treatment, SMI treatment, and the Maternal Opioid Misuse Initiative into a dashboard to track program coverage and utilization.
Medication Assisted Treatment (MAT) Policy	<ul style="list-style-type: none"> Developed a written policy, as required by CMS, to document coverage of Medication Assisted Treatment coverage.
Safe Care for Infants Universal SUD Screening in Pregnancy	<ul style="list-style-type: none"> A working group presented their plan for universal SUD screening in pregnancy to the Indiana Perinatal Network. This plan integrates medical prenatal care and SUD treatment.

2021 Focus Areas

The workgroup is currently engaging in discussions and planning for 2021 initiatives to improve the access and delivery of SUD & SMI treatment.

Committee continues to examine bundling certain definitive urine drug screens & covering OTP bundles outside of the OTP setting (buprenorphine & naltrexone).

OTP Policies

Telehealth

Specialty work group has been convened to resolve issues with telehealth treatment & provide direction for future telehealth initiatives, incl. input during the 2021 legislative session.

Committee continues to examine ways to facilitate continuity of care as patients transition between providers or levels of SUD treatment.

Transitions of Care

Committee discussed access to SUD treatment for pregnant women & parents with dependent children in 2020. Interested in exploring partnerships & initiatives to enhance access.

Parents Receiving SUD Treatment

Improved Access & Delivery of SUD Treatment

Group discussed availability & utilization of early intervention treatment (ASAM Levels .5 & 1.0). SUPPORT Act group will further investigate in 2021.

Early Intervention Work

Group has been examining demand for & limited coverage of ASAM Level 3.1 services, incl. factors such as rates & approved lengths of stay.

Length of Stay & Rate Differences (ASAM 3.1 and 3.5)

ASAM Levels of Care Guidelines

DMHA released draft Levels of Care guidance & sought provider input in 2020. DMHA is drafting guidelines to incorporate standards into administrative rule in late 2021.



Questions?