California’s Medication Assisted Treatment Service Delivery Model

Marlies Perez, MA
Division Chief, Substance Use Disorder Compliance Division, California Department of Health Care Services
1115 SUD Waiver & Medication Assisted Treatment (MAT) Services

• Narcotic Treatment Programs Required Services
  • Required Medications: Methadone, Buprenorphine, Oral Naltrexone, Disulfiram, and Naloxone
  • Optional Medications: All other FDA approved MAT
  • Counseling mandatory
  • American Society of Addiction Medicine (ASAM) assessment for other services needed

• Additional MAT services through SUD providers, coordination with EDs, mandated in contracts, telehealth and upon release from jail

• Other Fee-For-Service MAT Benefits
  • Regional assessment centers
  • Brief ASAM screen then full assessment at the provider
  • CONTINUUM software
# Medi-Cal Coverage of MAT

<table>
<thead>
<tr>
<th>DMC-ODS Pilot Program</th>
<th>Standard Drug Medi-Cal Program</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opioid (Narcotic) Treatment Program (methadone, buprenorphine, naloxone, disulfiram)</td>
<td>Narcotic Treatment Program (methadone)</td>
<td>Medi-Cal Fee-For-Service Medical Benefit (physician administered) (buprenorphine, injectable naltrexone – with TAR)</td>
</tr>
<tr>
<td>Additional MAT (all medications for SUD)</td>
<td>Naltrexone Treatment (oral for opioid dependence)</td>
<td>Medi-Cal Pharmacy Benefit (buprenorphine, naloxone, injectable naltrexone – with TAR, disulfiram, acamprosate – with TAR)</td>
</tr>
<tr>
<td>Medication services as a component of Withdrawal Management</td>
<td></td>
<td>Narcotic and non-narcotic drugs (other than methadone) used for outpatient heroin or other opioid detoxification services.</td>
</tr>
</tbody>
</table>
CA’s State Targeted Response (STR) to the Opioid Crisis Grant

• California’s Focus
  • Rural areas without a Narcotic Treatment Program in their geographic area
  • Increasing the availability and utilization of buprenorphine statewide
  • Improving MAT access for CA’s American Indian and Native Alaskan tribal communities

• California’s MAT Expansion Projects
  • Implementation of the CA Hub and Spoke System (CA H&SS)
  • Developing the Indian Health Program MAT Project
  • Offering training and mentoring from the California Society of Addiction Medicine
Opioid STR and Medicaid

• Leveraging Medicaid
  • Complements 1115 DMC-ODS waiver MAT expansion efforts
  • Mandating providers in CA Hub and Spoke System MediCal certified

• Vermont Hub and Spoke Model
  • Vermont SME’s assisting with CA project
  • Utilizing Treatment Needs Questionnaire and OBOT Stability Index

• CA Hub and Spoke System
  • Awarded 19 statewide CA H&SS
  • Learning Collaborative and Clinical Trainings by UCLA
  • Systems operational in late August 2017
CA H&SS
Hubs and Spokes

<table>
<thead>
<tr>
<th>Network #</th>
<th>Hub location</th>
<th>Spokes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Lake County (1)</td>
<td>Mendocino County (2)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nevada County (1)</td>
</tr>
<tr>
<td>2</td>
<td>Siskiyou County (2)</td>
<td>Trinity County (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Del Norte County (1)</td>
</tr>
<tr>
<td>3</td>
<td>El Dorado County (1)</td>
<td>Placer County (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nevada County (1)</td>
</tr>
<tr>
<td>4</td>
<td>Butte County (2)</td>
<td>Lassen County (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Tehama County (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Plumas County (1)</td>
</tr>
<tr>
<td>5</td>
<td>Humboldt County (6)</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>San Joaquin County (1)</td>
<td>Stanislaus County (1)</td>
</tr>
<tr>
<td>7</td>
<td>Contra Costa County (TBD)</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>San Francisco County (TBD)</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Sonoma County (1)</td>
<td>Lake County (TBD)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yolo County (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Colusa County (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Napa County (1)</td>
</tr>
<tr>
<td>10</td>
<td>Los Angeles County (10)</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Marin County (8)</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Yolo County (2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Sacramento County (1)</td>
</tr>
<tr>
<td>13</td>
<td>Santa Cruz - N County (6)</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Santa Cruz - S County (4)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>San Benito County (1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Monterey County (1)</td>
</tr>
<tr>
<td>15</td>
<td>Fresno County (TBD)</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Solano County (TBD)</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>San Diego County (7)</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Los Angeles County (10)</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>San Bernardino County (1)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Riverside County (6)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>San Diego County (2)</td>
</tr>
</tbody>
</table>
• **CA H&SS**: a model comprised of NTPs or Medication Units that serve as the Hubs and Data 2000 waivered prescribers who prescribe buprenorphine in office-based settings who serve as the Spokes.

• **Hub**: a Department licensed NTP or Medication Unit.

• **Spoke**: either (1) a federally waivered prescriber who prescribes and/or administers buprenorphine, or (2) one or more federally waivered prescribers and a MAT team. A Spoke may consist of individually waivered professionals, FQHCs, or SUD treatment providers.

• **MAT Team**: consists of a licensed health practitioner and/or licensed behavioral health professional to perform duties that do not require a prescribing license.
CA Hub and Spoke System Requirements

All CA H&SS must submit an Outreach Plan which includes how the system will participate and collaborate with the 36 local county opioid safety coalition networks.
CA Hub and Spoke System Requirements

Required Treatment Services

- Prescribe and dispense all FDA approved MAT for an OUD
- Counseling
- Provide naloxone and training
- HIV and HCV testing and referral to services
- Case management
- Professional medical, social work, and mental health services, offered to patients onsite or by referral
- Recovery and/or peer support services
- Local access to maternal addiction treatment
- Serve as the subject matter expert on opioid dependence and tx to the Spokes
- Utilize the OBOT Stability Index and the Treatment Need Questionnaire tool
Optional Treatment Services
• Re-entry services for clients leaving correctional facilities
• Neonatal abstinence syndrome treatment programs
• Patient transportation
• Telehealth infrastructure and services
• Implementation Infrastructure

Other Requirements
• Participation in one of five regional learning collaboratives
• Clinical trainings conducted by the University of California, Los Angeles
• Data collection, performance measures and UCLA evaluation
Lessons Learned

• Stakeholder Buy-In
  • Extensive provider outreach
  • Intensive stakeholder meetings for 1115 process

• Conduct a Gap Analysis
  • Analyzed MAT data with CMS (Medicaid Innovation Accelerator Program)
  • Statewide Mapping Project with Foundations/University of California, Los Angeles
  • CA Opioid Overdose Surveillance Dashboard
    https://pdop.shinyapps.io/ODdash_v1/

• Utilize Other Resources
  • California Health Care and Blue Shield Foundations as instrumental partners
  • Statewide Prescription Opioid Misuse and Overdose Prevention Workgroup comprised of over 20 California state departments impacted by opioids
Lessons Learned

• Leadership Champions
  • Early adopters at the state, county, provider and local levels

• Utilize the Media Interest
  • Reduce stigma and educate on MAT services

• Statewide Opioid Taskforce
  • Inter-departmental effort
  • Importance of education and information dissemination

• Dream Big
  • Collaborate with new partners
  • Utilize proven strategies and create/test new ones
Contact Information

Marlies Perez, MA
Substance Use Disorder Compliance Division Chief,
California Department of Health Care Services

marlies.perez@dhcs.ca.gov