

VIRGINIA MEDICAID ADDICTION AND RECOVERY TREATMENT SERVICES (ARTS)

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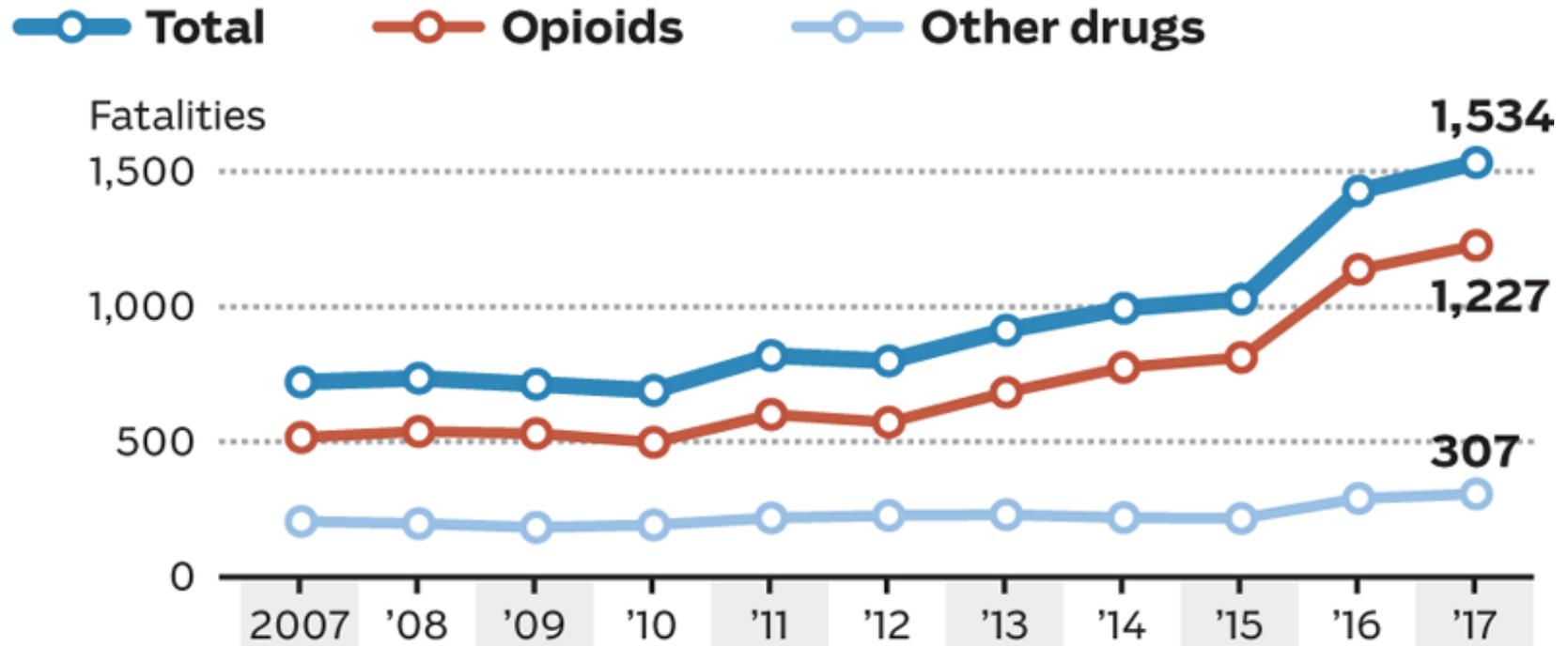
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Virginia's Opioid Epidemic

Fatal opioid overdoses vs. other drug overdose deaths*



Sources: Virginia Department of Health, Daily Press Analysis

Medicaid Ill-prepared for OUD

Before ARTS

Incomplete Care Continuum

Limited Coverage

- Residential treatment not covered for non-pregnant adults
- Pregnant women lose eligibility and coverage for treatment 60 days after delivery
- Substance use disorder treatment is separated from mental and physical health services

Lack of Providers

- Providers not getting reimbursed for the actual cost of providing care.
- System severely limits number of providers willing to provide services to Medicaid members.
- Providers struggle to understand billing.
- Consumers do not know where to seek services.

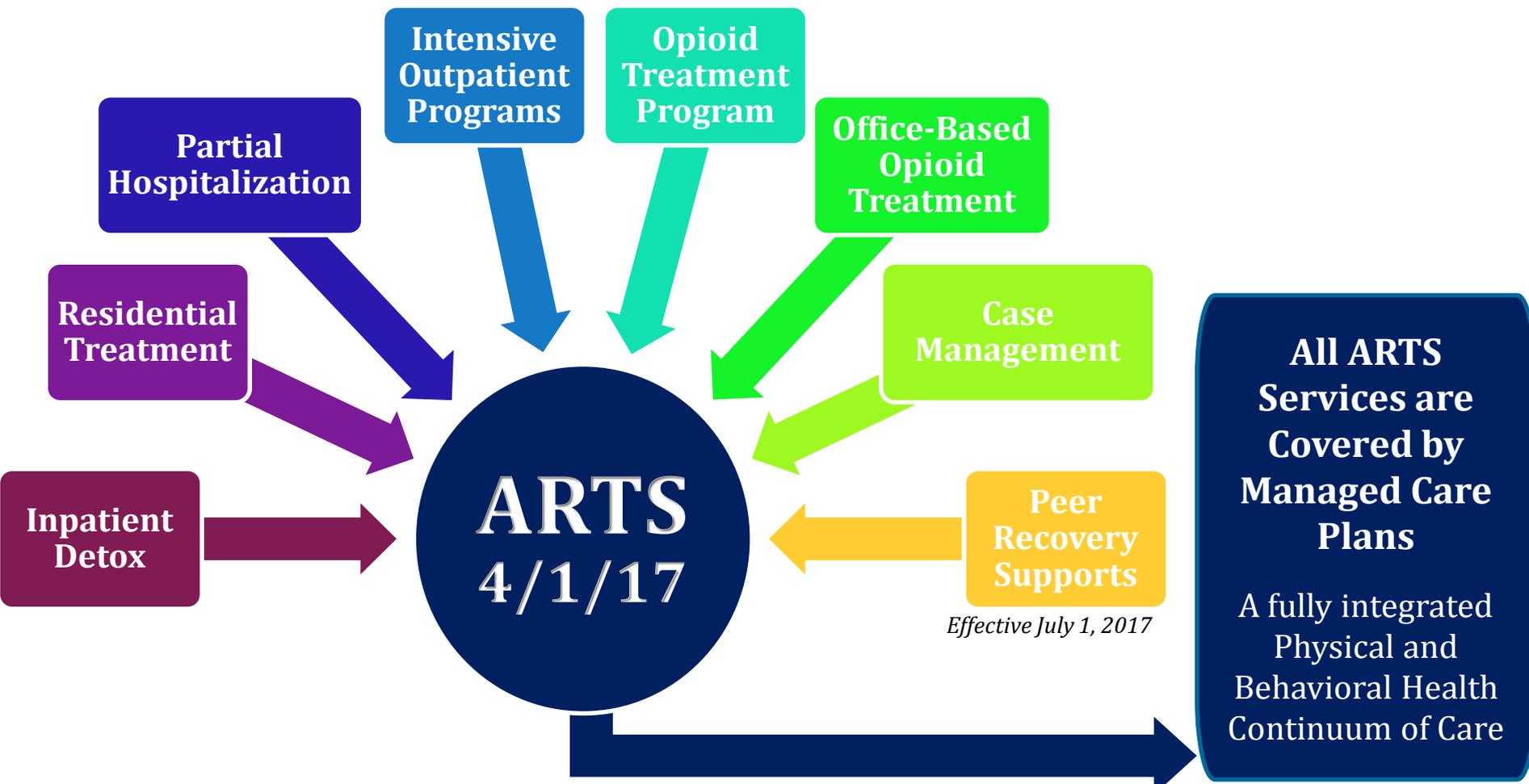
Poor Access to Services

Generating Political Will

- ✓ Governor McAuliffe's Executive Order 29 "Governors Task Force of Prescription Drug and Heroin Abuse"
 - Co-chaired by Secretariat; 32 members including legislators, law enforcement, and providers
 - Four legislative initiatives passed in 2015 GA
 - Five meetings between November 2014 and September 2015, resulting in 51 recommendations
- ✓ Centers for Medicare and Medicaid Services (CMS) State Medicaid Directors Letter, July 27, 2015 re: New Service Delivery Opportunities for Individuals with Substance Use Disorder
- ✓ State Health Commissioner declared a Public Health Emergency for Virginia as result of the opioid addiction epidemic: November 21, 2016



Virginia Medicaid Addiction and Recovery Treatment Services (ARTS) Waiver



Approach: Alternative Payment Model (APM) for Preferred Office-Based Opioid Treatment Model

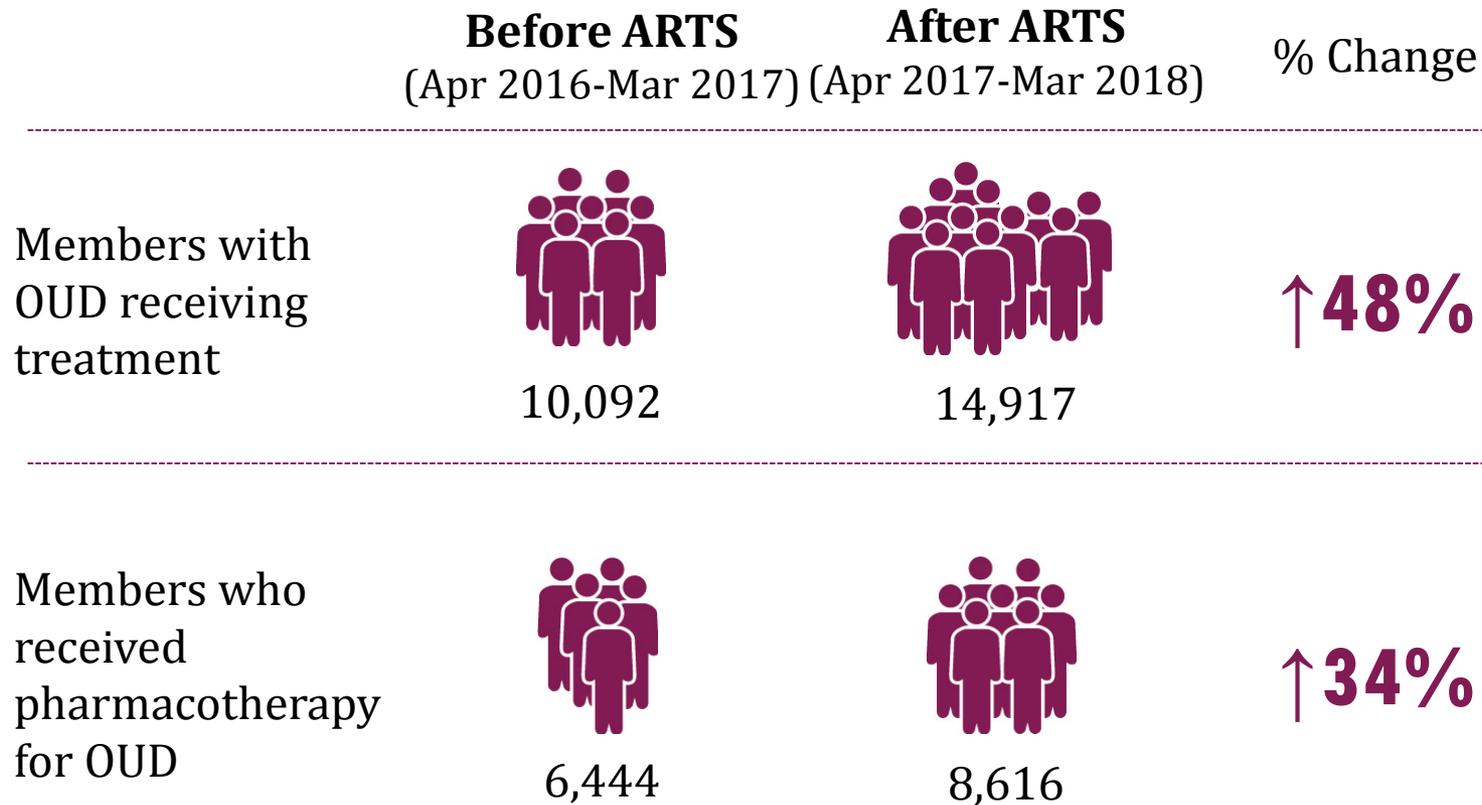
Code	Service	Who Can Bill?	Unit	Rate/Unit
H0014	Medication Assisted Treatment (MAT) induction	Buprenorphine Waivered Practitioner	Per encounter	\$140
H0004	Opioid Treatment – individual and family therapy	Credentialed Addiction Treatment Professional	1 unit= 15 min	\$24
H0005	Opioid Treatment – group therapy	Credentialed Addiction Treatment Professional	1 unit = 15 min (per patient)	\$7.25
G9012	Substance Use Care Coordination	Buprenorphine Waivered Practitioner or Credentialed Addiction Treatment Professional	1 unit = 1 month	\$243



- Enhanced OBOT payments support infrastructure and operational changes necessary to delivery high-quality care (HCPLAN Category 2A)
- Expected move to accountability for performance measures in 2019
- Other ARTS provider types, including Intensive Outpatient and Partial Hospitalization providers, will also be evaluated against performance criteria in coming years

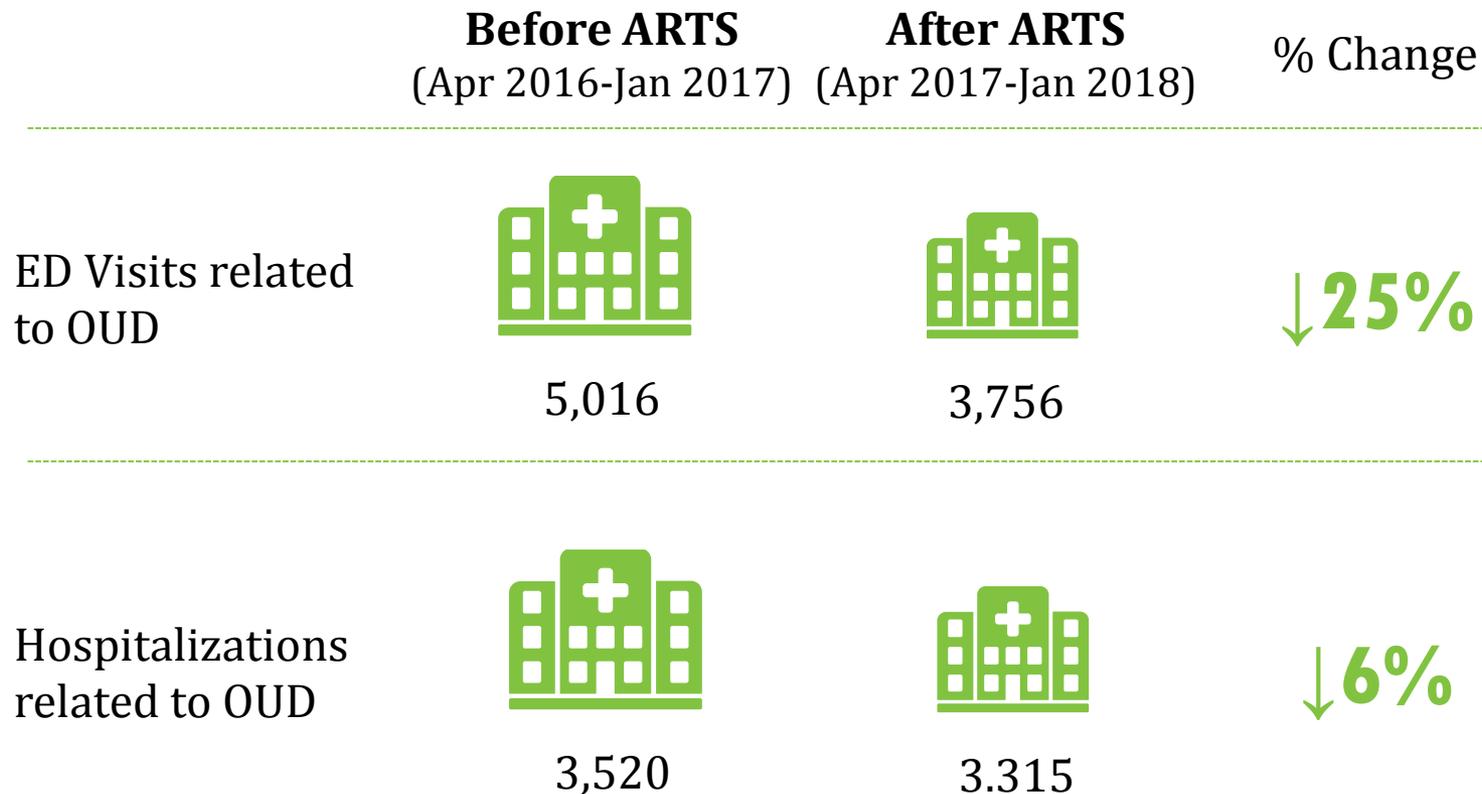
VCU Evaluation: Outcomes From First Year of ARTS

More members are receiving treatment for Opioid Use Disorder (OUD)



VCU Evaluation: Outcomes From First Year of ARTS

Fewer Emergency Department (ED) visits and hospitalizations related to Opioid Use Disorder (OUD)



Critical Elements of Successful Implementation

Political Will

- High-level support from Governor's Executive Leadership Team on Opioids & Addiction

Stakeholder Engagement

- MCOs, state agencies, and providers

Shared Agenda

- Clear goals around access, quality, utilization, and mortality

Data

- Independent evaluation and regular quality meetings

Medicaid Support

- Increased reimbursement and technical assistance on billing

Collaboration Across State Agencies



- Virginia Department of Health
 - Trained over 850 providers in Addiction Disease Management
 - Project ECHO ARTS Preferred OBOT Learning Collaborative
 - Project ECHO buprenorphine waiver training
- Department of Behavioral Health and Developmental Services
 - Trained over 400 providers in ASAM criteria
 - Trained over 1,000 Peer Recovery Support Specialists
- Department of Health Professions
 - Boards of Medicine, Nursing, and Dentistry implemented opioid prescribing regulations based on CDC Guidelines
- Department of Corrections
 - Project ECHO buprenorphine waiver training to DOC staff
 - Collaborating on MAT Summit for DOC clinicians and staff

VCU Evaluation: Outcomes From First Year of ARTS

Increase in total number of Opioid Use Disorder Outpatient Providers

	Before ARTS (Apr 2016-Mar 2017)	After ARTS (Apr 2017-Mar 2018)	% Change
Total number of OUD Outpatient Providers	570	1,352	↑ 137%
By Provider Type Physicians	128	586	↑ 358%
NP	13	66	↑ 408%
Counselors and SW	142	236	↑ 66%
Other	287	464	↑ 62%

Lessons Learned and Future Plans

- ✓ Office of Licensing and American Society of Addiction Medicine
- ✓ Medication Assisted Treatment and Levels of Care
- ✓ Under-utilization of peer support services
- ✓ Leveraging Managed Care Contracts
- ✓ Removal of Prior Authorization Requirement
- ✓ Value Based Purchasing
- ✓ Medicaid and Criminal Justice System

Resources

Daily Press Graphics

<http://www.dailypress.com/dp-chart-opioid-overdose-deaths-in-virginia-20180504-htmlstory.html>

DMAS ARTS website with application for Preferred OBOTs:

<http://www.dmas.virginia.gov/#/artscredentialing>

VCU evaluations and policy briefs on the ARTS program:

<https://hbp.vcu.edu/policy-briefs/arts-policy-briefs/>

Please email questions regarding the ARTS program to:

sud@dmas.virginia.gov

2016 General Assembly Mandate

Changes to DMAS's Substance Use Disorder (SUD) Services for Medicaid and FAMIS Members

- 1 Expand short-term SUD inpatient detox to all Medicaid /FAMIS members
- 2 Expand short-term SUD residential treatment to all Medicaid members
- 3 Increase rates for existing Medicaid/FAMIS SUD treatment services
- 4 Add Peer Support services for individuals with SUD and/or mental health conditions
- 5 Require SUD Care Coordinators at DMAS contracted Managed Care Plans
- 6 Provide Provider Education, Training, and Recruitment Activities