

SYSTEM TRANSFORMATION TO ADVANCE RECOVERY AND TREATMENT

Los Angeles County's Substance Use Disorder Organized Delivery System

ADULT SYSTEM OF CARE FACT SHEET

In August 2015, the Department of Public Health (DPH) Substance Abuse Prevention and Control (SAPC) initiated the first phase of the stakeholder process to provide input on Los Angeles County's Substance Use Disorder (SUD) transformation. Activities began with the Kick-Off meeting on August 13, 2015 and included nine regional meetings between September and October 2015, the online survey, and culminated in the Results Meeting on December 17, 2015. During this process, received substantial input and recommendations on how to improve SUD services for youth and adults residing in the County. Some of this feedback was incorporated into the Implementation Plan that was submitted to the State and Federal government on February 11, 2016. This plan, however, was only a broad overview of how the new system of care will look and function. SAPC is now in the second phase of the stakeholder process which involves constructing the details and requirements necessary to achieve what was outlined in the plan and to ensure improved health outcomes for those we serve. To achieve this, five advisory workgroups – 1. System of Care (Adult and Youth), 2. Integration of Care, 3. Quality Improvement and Utilization Management, 4. System Operations, and 5. System Innovations and Network Capacity Building – have been established to examine the different areas within the plan. SAPC has prioritized advisory workgroup topics based on what needs to be achieved upon approval of the Implementation Plan and the execution of the new State/County contract.

On March 3, 2016, SAPC began the next phase of the stakeholder process with the first two System of Care stakeholder workgroup meetings which discussed the Beneficiary Access Line and the Patient Flow. A third meeting on the Outpatient and Intensive Outpatient benefits was held on March 24th. Meetings for the Residential and Opioid Treatment Program-Medication Assisted Treatment benefits were held on May 19th and May 26th, respectively. The System of Care workgroups provide stakeholders with the opportunity to offer input and recommendations on how the new services will be designed and the clinical expectations associated with these services. Below are key points from the first three workgroup meetings.

BENEFICIARY ACCESS LINE

The purpose of the 24/7 toll-free Beneficiary Access Line (BAL) is to connect eligible beneficiaries with substance abuse disorder (SUD) treatment needs with services included in the Los Angeles County SUD benefit package. The BAL is one entry into the SUD Continuum of Care within the County's SUD service delivery system. The BAL provides assessments and referrals to individuals seeking treatment services for their SUDs.

PATIENT FLOW

Substance use disorder treatment will be delivered across a continuum of services that reflect illness severity and the intensity of services required. One of the key goals of START-ODS is to ensure that clients receiving SUD services in Los Angeles County receive the right service, at the right time, for the right duration, in the right setting. While the levels of care are presented as discrete hierarchies, they should be viewed as points along a continuum of treatment services, each of which may be provided in a variety of settings. Patients should transition from one level of care to another and navigate the mental health, physical health, and social service delivery systems while engaged in the County's SUD service delivery system, as appropriate.

OUTPATIENT/INTENSIVE OUTPATIENT BENEFITS

Outpatient Services (ASAM Level 1) are appropriate for patients who are stable in regard to acute intoxication/withdrawal potential, biomedical, and mental health conditions (please refer to ASAM Dimensions 1-6 for detailed descriptions) and who primarily require motivational enhancement therapies. For adults, up to 9 hours of services may be provided per week and are billed in 15-minute increments.

Intensive Outpatient Services (ASAM Level 2.1) are appropriate for patients with minimal risk in regard to acute intoxication/withdrawal potential, biomedical, and mental health conditions (please refer to ASAM Dimensions 1-6 for detailed descriptions) motivational enhancement therapies, and close monitoring and support several times a week. Services for adults are provided for a minimum of 9 hours and a maximum of 19 hours per week and are billed at a day rate.

The expanded benefits of Outpatient and Intensive Outpatient include: *Intake, Assessment, Individual Counseling, Group Counseling, Patient Education, Family Therapy, Medication Services, Collateral Services, Crisis Intervention Services, Treatment Planning and Discharge Services.*

MEDICATION-ASSISTED TREAMENT AND OPIOID TREATMENT PROGRAM BENEFITS

Research has demonstrated that for the treatment of addiction, a combination of medications and behavioral therapies is more successful than either intervention alone. Medication- Assisted Treatment (MAT) is an evidence-based treatment that can improve outcomes and the likelihood of recovery when deemed clinically appropriate. MAT should be provided in conjunction with counseling and other behavioral therapies, and needs to be part of a comprehensive, whole-person approach to the treatment of SUDs. Medication-assisted treatment is available in various treatment settings and can be provided in Opioid Treatment Program (OTP) settings and at all ASAM levels of care aside from ASAM level 0.5. The medications used to achieve treatment goals in MAT include methadone, buprenorphine, naltrexone tablets, and extended-release injectable naltrexone. Naloxone is used for opioid overdose prevention, and acamprosate and disulfiram for alcohol use disorder. These are all FDA-approved for use in the treatment of substance use disorders.

Opioid Treatment Programs constitute a level of care within the ASAM continuum and provide MAT and psychosocial services such as counseling for individuals diagnosed with opioid use disorders, as well as other SUDs and/or co-occurring physical and mental health conditions. Depending on the unique circumstances of each case, patients who are diagnosed with an opioid use disorder may benefit from OTP services and should have access to this level of care.

Additional services expectations for MAT and OTP include:

- Medical Evaluation
- Culturally Competent Services
- Evidenced Based Practices (EBP)
- Field Based Services (FBS)
- Case Management
- Recovery Support Services
- and adherence to all Documentation requirements.

Services for all levels of care must be provided by staff who are licensed, registered, certified, or recognized under California State scope of practice statutes. Professional staff shall provide services within their individual scope of practice and receive supervision as required under their respective scope of practice laws.

CONTACT:

Yanira A. Lima, MPA, MHM Interim Chief, Adult System of Care <u>ylima@ph.lacounty.gov</u> (626) 299-3202

Loretta L. Denering, DrPH, MS Family Services Manager, Adult System of Care Idenering@ph.lacounty.gov (626) 299-4522

Valerie Sifuentes, MAS Criminal Justice Unit, Adult System of Care <u>vsifuentes@ph.lacounty.gov</u> (626) 299-3214

To join the stakeholder process complete the following survey (some meeting dates have/will change): <u>https://www.surveymonkey.com/r/START_Stakeholder_Survey</u> To access all System of Care Workgroup documents: <u>http://publichealth.lacounty.gov/sapc/HeathCare/HCRWorkGroup/HCRWorkGroupMeeting.htm</u> To join the START-ODS listserv, send an email to: <u>SUDtransformation@ph.lacounty.gov</u>