

R95 Workgroup Meeting & Discussion Virtual Meeting

December 21, 2023

Substance Abuse Prevention and Control Bureau
Los Angeles County Department of Public Health



Agenda

R95 WORKGROUP MEETING
Thursday December 21, 2023
2:00 pm – 3:30 pm

- 2:00 pm** **Welcome** - Dr. Gary Tsai
- 2:10 pm** **R95 Updates Forthcoming Revisions** – Michelle Gibson
- Calendar Due Dates
 - Tier Levels for 2E-2
 - Capacity Building Incentives Package
- 2:20 pm** **Focus Area 1:**
- **Outreach & Engagement**
 - New Partnerships [2A-1, 2A-2, 2A-3] - Yanira Lima
 - Strategies for Identifying New Partners - Yanira Lima
 - How to Strengthen Stakeholder Engagement
- 2:55 pm** **Focus Area 1:**
- **Outreach & Engagement**
 - 30- and 60-day Engagement Policy [2C-1] - Dr. Brian Hurley
- 3:10 pm** **Focus Area 2:**
- **Lowering Barriers to Care**
 - Bidirectional Referrals between Harm Reduction Agencies & Treatment Agencies [2F-1] - Dr. Brian Hurley
- 3:20 pm** **Next Steps**
- 3:30 pm** **Adjourn**

Purpose of the Reaching the 95% (R95) Initiative

- **Goals**

- 1. To ensure that we are designing a specialty SUD system that is focused not just on the ~5% of people with SUDs who are already receiving and open to treatment, but also the ~95% of people with SUDs who do not receive treatment for any reason.**
- 2. To communicate – through words, policies, and actions – that people with SUD are worthy of our time and attention, no matter where they are in their recovery journey or their stage of readiness for change.**
- 3. To sow the seeds to disconnect readiness for treatment from abstinence in the hearts and minds of the SUD community and general public.**

Provider R95 Meeting Calendar and Due Dates

SAPC R95 Workgroup and Deliverables Calendar – December 21, 2023

Workgroup 1 (W1): Outreach and Engagement (2A/2B/2C) Workgroup 2 (W2): Establishing Lower Barrier Care (2D/2E/2F)		SAPC KEY DATES	PROVIDER KEY DATES
Provider Meeting: November 7, 2023 - 1:30 to 3:30 PM <ul style="list-style-type: none"> Spirit of R95 in Residential Settings Updates: Reimbursement Update, Focus Area 1 and 2 Breakout Sessions: Outpatient or Residential 	Almanson Court 700 South Almanson Street Alhambra, CA 91801 <i>In-Person Only</i>	Week of 11/6/23 – SAPC Emails <ul style="list-style-type: none"> R95 FAQ from 10/23/23 meeting Calendar of meeting and due dates Slides and notes from 11/7/23 meeting 	Email Deliverables and Invoices to sapc-cbi@ph.lacounty.gov with the designated subject line for faster processing. Some dues are revised from the original Information Notice. If you didn't receive start-up funds for a project and now want to participate, submit the Deliverable and updated Invoice 2 for payment. 11/1/23 Submit 1 st feedback Admission Policy (2D-1) <ul style="list-style-type: none"> Use Email Subject: "2D A&D Policy"
R95-W2 November 14, 2023 - 11:00 to 12:30 PM <ul style="list-style-type: none"> Final Comments on Admission Policy (2D-1) Draft New Comments on Discharge Policy (2D-2) Draft Preview of New Partnership (2A-1, 2A-2) Templates 	Click here to join the meeting Meeting ID: 231 447 910 16 Passcode: wHe8Vu Audio Only: 1-323-776-6996 Phone Conf. ID: 855 633 04#	Week of 11/13/23 – SAPC Emails <ul style="list-style-type: none"> 2nd draft Admission Policy (2D-1) for comment Partner Entity Meeting template (2A-1) for use Partnership Plan template (2A-2) for use 	11/22/23 Submit 2 nd draft 2D-1 Admission Policy Feedback 01/22/24 (Revised) Submit Draft 2D-2 Discharge Policy Feedback <ul style="list-style-type: none"> Use Email Subject: "2D A&D Policy"
Provider UM Meeting November 15, 2023 - 11:00 to 12:30 PM <ul style="list-style-type: none"> Includes Engagement (2C-1, 2C-2) and Bidirectional Harm Reduction Referrals (2F-1, 2F-2) Other items based on feedback, questions and concerns 	Click here to join the meeting Meeting ID: 245 124 579 669 Passcode: aBzYXx Audio Only: 1-323-776-6996 Phone Conf. ID: 137 406 457#	Week of 12/11/23 – SAPC Emails <ul style="list-style-type: none"> Final Admission Policy (2D-1) for use New FBS requirements (2A-3) for use MOU requirements (2A-3, 2B-1, 2F-1) for use 	11/22/23 Submit 2 nd draft 2D-1 Admission Policy Feedback 01/22/24 (Revised) Submit Draft 2D-2 Discharge Policy Feedback <ul style="list-style-type: none"> Use Email Subject: "2D A&D Policy"
R95-W1 December 21, 2023 - 2:00 to 3:30 PM <ul style="list-style-type: none"> New Partnerships (2A-1, 2A-2, 2A-3) Discussion: Strategies for Identifying New Partners & How to Strengthen Stakeholder Engagement Overview 30-/60-Day Engagement Policy (2C-1) Discussion: Strategies to Maximize Patient Involvement 	Click here to join the meeting Meeting ID: 295 700 736 645 Passcode: Jombba Audio Only: 1-323-776-6996 Phone Conf. ID: 210 856 840#	Week of 12/25/23 - SAPC Emails <ul style="list-style-type: none"> Draft Engagement Policy (2C-1) for comment 	2/29/24 (Revised) Submit completed 2A-1 Partner Entity Meeting template and Invoice 2 to substantiate use of start-up funds. <ul style="list-style-type: none"> Use Email Subject: "2A New Partnerships"
Provider UM Meeting January 17, 2024 - 11:00 to 12:30 PM <ul style="list-style-type: none"> Includes Engagement (2C-1, 2C-2) and Bidirectional Harm Reduction Referrals (2F-1, 2F-2) Other items based on feedback, questions and concerns 	Click here to join the meeting Meeting ID: 245 124 579 669 Passcode: aBzYXx Audio Only: 1-323-776-6996 Phone Conf. ID: 137 406 457#	Week of 1/15/24 - SAPC Emails <ul style="list-style-type: none"> Service Design components (2E-1) for comment Draft Discharge Policy (2D-2) for comment 	2/29/24 (Revised) Submit completed 2D-1 Admission Policy and 2D-2 Discharge Policy and Invoice 2 for deliverable payment. <ul style="list-style-type: none"> Use Email Subject: "2D A&D Policy"
R95-W1 January 17, 2024 - 3:30 to 5:00 PM <ul style="list-style-type: none"> FBS Provider Orientation and Q&A (2B-1, 2B-2) <ul style="list-style-type: none"> Discussion: Elements of a Strong MOU 30-/60-Day Engagement Policy Feedback (2C-1) <ul style="list-style-type: none"> Discussion: Strategies for Implementing Engagement Policy 	Click here to join the meeting Meeting ID: 266 259 769 04 Passcode: WUQmww Audio Only: 1-323-776-6996 Phone Conf. ID: 403 707 356#	Week of 1/29/24 – SAPC Emails <ul style="list-style-type: none"> Discharge Policy (2D-2) for use Engagement Policy (2C-1) for use Claims Verification Form (2B-2, 2C-2, 2F-2) for use Service Design Kit (2E-2) for comment Improvement/Investment Plan template (2E-3) for comment 	1/5/24 Submit 1 st feedback Engagement Policy (2C-1) <ul style="list-style-type: none"> Use Email Subject: "2C Engagement"
R95-W2 January 31, 2024 - 3:30 to 5:00 PM <ul style="list-style-type: none"> Review and Discuss Service Design Components/Kit and Investment/Improvement Plan (2E-1, 2E-2, 2E-3) 	Click here to join the meeting Meeting ID: 245 015 511 863 Passcode: BEpEMx Audio Only: 1-323-776-6996 Phone Conf. ID: 672 922 12#	Week of 2/14/24 - SAPC Emails <ul style="list-style-type: none"> Admission/Discharge Training (2D-3) for comment 	1/12/24 Submit completed 2A-2 Partnership Plan template and Invoice 2 to substantiate use of start-up funds. <ul style="list-style-type: none"> Use Email Subject: "2A New Partnerships"
		Week of 2/14/24 - SAPC Emails <ul style="list-style-type: none"> Admission/Discharge Training (2D-3) for comment 	2/26/24 (Revised) Submit feedback on 2D-3 Admission & Discharge Policy training slides and attestation. <ul style="list-style-type: none"> Use Email Subject: "2D A&D Policy"

Focus Area 2: Lowering Barriers to Care

Update Admission & Discharge Policies

(2D-1, 2D-2, 2D-3)

Michelle Gibson
Deputy Director
Substance Abuse Prevention and Control Bureau
Los County Department of Public Health

Lowering Barrier to Care: Admission & Discharge Policies

- Deliverable (Templates, Guidance, Resources) & Due Dates:
 - 2D-1 R95 Admission Policy – Due 2/29/24 (REVISED)
 - Final Admission Policy available for use
 - 2D-2 R95 Discharge Policy – Due 2/29/24 (REVISED)
 - Draft Discharge Policy for Comment (Week of 1/15/24)
 - Final Discharge Policy for Use (1/29/24)
 - 2D-3 R95 Training Template – Due 3/31/24 (REVISED)
 - Admission/Discharge Training for Comment (Week of 2/14/24)
 - Admission/Discharge Training for Use (Week of 3/11/24)

Focus Area 1: Outreach and Engagement

New Partnerships (2A-1, 2A-2, 2A-3)

Yanira Lima
Division Chief, Systems of Care
Bureau of Substance Abuse Prevention and Control
Los Angeles County Department of Public Health



Outreach & Engagement: New Partnerships

- Deliverable (Templates, Guidance, Resources) & Due Dates:
 - 2A-1 New Partner Entity Meetings – Due 2/29/24 (REVISED)
 - New Partner Entity Meeting Log (*shared on 11/22/23*)
 - 2A-2 New Partnership Plan – Due 1/12/24 (REVISED)
 - New Partnership Plan Form (*shared on 11/22/23*)
 - New Partnership Plan Guidelines (*Coming*)
 - 2A-3 Executed MOU – Due 3/31/24 (REVISED)
 - MOU Requirements (*shared on 12/14/23*)



2A-1 New Partner Entity Log

- Provide a list of new organizations that your agency met with between July 1, 2023 and January 12, 2024
- Email the completed Partner Entity Log to sapc-cbi@ph.lacounty.gov with subject line “2A New Partnerships” by **2/29/2024**.

#	Meeting Date/Time	Partner Agency Name	Address	SPA	SD	Organization Type	Population (s) Served
1							
2							
3							



Outreach & Engagement: New Partner Log 2A-1

Department of Public Health, Substance Abuse Prevention and Control Bureau 2023-2024 Capacity Building: Reaching the 95% (R95) New Partner Entity Log (2A-1)

Provide a list of new organizations that your agency met with between July 1, 2023 and January 12, 2024 to develop new partnership agreements to expand access to services. This document is used to determine if start-up funds were utilized as attested to and/or if recoupment for incomplete deliverables is needed. Email the completed Partner Entity Log to sapc-cbi@ph.lacounty.gov with subject line "2A New Partnerships" by **2/29/24**.

Specify: a) Meeting date and time; b) Partner Name and address; c) Areas served (e.g., service planning area [SPA] and Supervisorial District [SD]); d) Type of organization (e.g., community-based organization, school, government agency, homeless services, etc.); and e) Populations to be served (e.g., young adults, persons experiencing homelessness, other underserved groups). Providers should connect with organizations serving individuals who are at varying stages of the readiness for treatment continuum, including those who are unsure if they want SUD treatment services and/or who may not be ready to cease all substance use.

#	Meeting Date/Time	Partner Agency Name	Address	SPA	SD	Organization Type	Population (s) Served
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

By signing, I confirm that the information reported is accurate, and acknowledge that we must adhere and are subject to all reporting, tracking, audits, and recoupment requirements described in SAPC Bulletin 23-07 – Fiscal Year 2023-2024 Rates and Payment Policy Updates.

Agency Name: _____ Agency Tier: Tier 1 Tier 2 Tier 3

Name: _____ Email: _____

Signature: _____ Date: _____

2A-2 New Partner Plan

- Outline New Partner Plan including:
 - Referral assessment and effort create partnerships
 - Identifying new partners
 - Partner education
 - Sustainability Plan
 - Recommendations



- Email the completed New Partnership Plan (2A-2) to sapc-cbi@ph.lacounty.gov with subject line “2A New Partnerships” by **1/12/2024**.

2A-3: R95 New Partner Agreement or MOU

- Complete and sign New Partner MOU 2A-3 Form
- Include copies of finalized MOU



Partner Name	Organization type	Population(s) Served	SPA	SD

2A-3 MOU Guidelines

MOU shall include:



- ✓ Purpose and Scope
- ✓ Roles & Responsibilities
- ✓ Proposed Service
- ✓ Rules & Regulations
- ✓ Information on confidentiality rules and regulations.
- ✓ Information on informed consent.
- ✓ Statement on non-discrimination in services.
- ✓ Conflict of interest.
- ✓ Procedures for addressing complaints and conflict resolution.
- ✓ Indemnification and insurance.
- ✓ Status as an independent contractor.
- ✓ Statement on non-exclusive agreement.
- ✓ Rights and responsibilities of records.
- ✓ Compensation, billing, and collection.
- ✓ Statement on compliance with laws and regulation.
- ✓ The term period of the MOU or termination or expiration of MOU.
- ✓ Arbitration.
- ✓ Signatures from authorized individual for each organization.



Outreach & Engagement: New Partner MOU 2A-3

Department of Public Health, Substance Abuse Prevention and Control Bureau
2023-2024 Capacity Building: Reaching the 95% (R95) New Partner MOU (2A-3)

Capacity Building 2A provides incentives to SAPC providers to conduct outreach and engagement activities to reach the 95% of people may need substance use disorder services but not currently receiving it. SAPC providers are encouraged to establish new partnerships as a strategy for connecting with the 95%. A memorandum of understanding (MOU) can be used to formally recognize a collaborative relationship and clarify roles and responsibilities of the partners. 2A-3 offers incentive payments for providers who setup a MOU with local health and social service providers to create a referral process. Email MOU(s) along with the completed 2A-3 Form to sapc-cbi@ph.lacounty.gov with subject line "2A-3 MOU" by **3/31/2024**.

To meet the deliverable for 2A-3 The MOU shall include:

- Purpose and scope that defines the terms of the referral process between partners, including:
 - Criteria for making referrals. The criteria for referrals shall reflect lower barriers to care, including those who are not yet ready for abstinence.
 - Procedures for making referrals.
- Clearly defined roles and responsibilities of each organization, including staff who will be making referrals and to whom.
- Proposed services and provisions for network providers to effectively conduct services.
- Information on confidentiality rules and regulations.
- Information on informed consent.
- Statement on non-discrimination in services.
- Conflict of interest.
- Procedures for addressing complaints and conflict resolution.
- Indemnification and insurance.
- Status as an independent contractor.
- Statement on non-exclusive agreement.
- Rights and responsibilities of records.
- Compensation, billing, and collection.
- Statement on compliance with laws and regulation.
- The term period of the MOU or termination or expiration of MOU.
- Arbitration.
- Signatures from authorized individual for each organization.

Providers are advised to speak with their legal counsel about the MOU.

Provide a list of new organizations that your agency has established a MOU to setup a referral system to expand access to services.

Partner Name	Organization type	Population(s) Served	SPA	SD

Include copies of your MOU(s) that you have executed with this form.

By signing, I confirm that the information reported is accurate, and acknowledge that we must adhere and are subject to all reporting, tracking, audits, and recoupment requirements described in SAPC Bulletin 23-07 – Fiscal Year 2023-2024 Rates and Payment Policy Updates.

Agency: _____ Name: _____ Email: _____

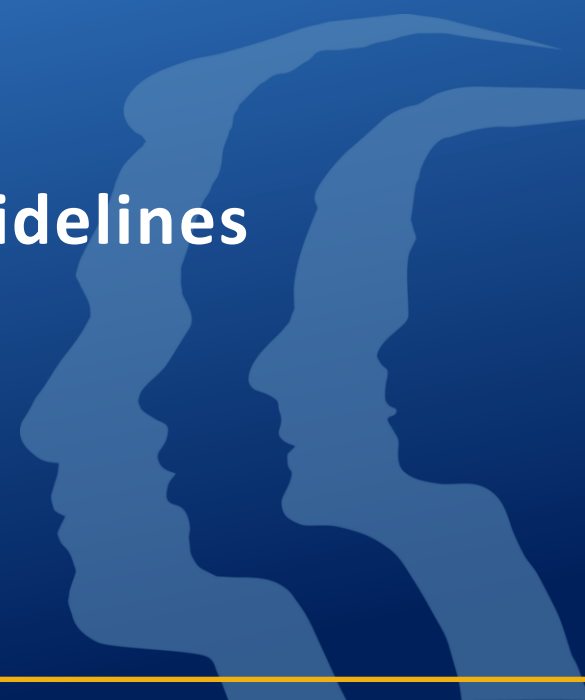
Signature: _____ Date _____



New Partner Plan Recommended Guidelines 2A-2

Bernie Lau

Bureau of Substance Abuse Prevention and Control
Los Angeles County, Department of Public Health





Setting a Goal for Stakeholder Engagement

- **Purpose & Goals**
 - Objectives (S.M.A.R.T.)
 - New partnerships
 - Access to care
 - Goals
 - R95
- **Scope**
 - # of projects
 - # of partnerships
 - Specific population



Stakeholder Engagement Strategies

- Understanding Partners
- Educating Partners
- Collaboration
- Formal Agreements
- Meetings



Partner Selection

1. Establish selection criteria
2. Conduct partner readiness assessment
3. Prioritize your partners to meet your goals



1. Establish New Partner Selection Criteria

- **Important question to consider are:**
 - What is your goal of stakeholder engagement?
 - How will a partnership help with achieving the goal?
- **Examples:**
 - Goal compatibility
 - Populations served
 - Target population
- **New partners to consider:**
 - Increase # of referrals from current partners
 - Identify new providers who may not know of your services



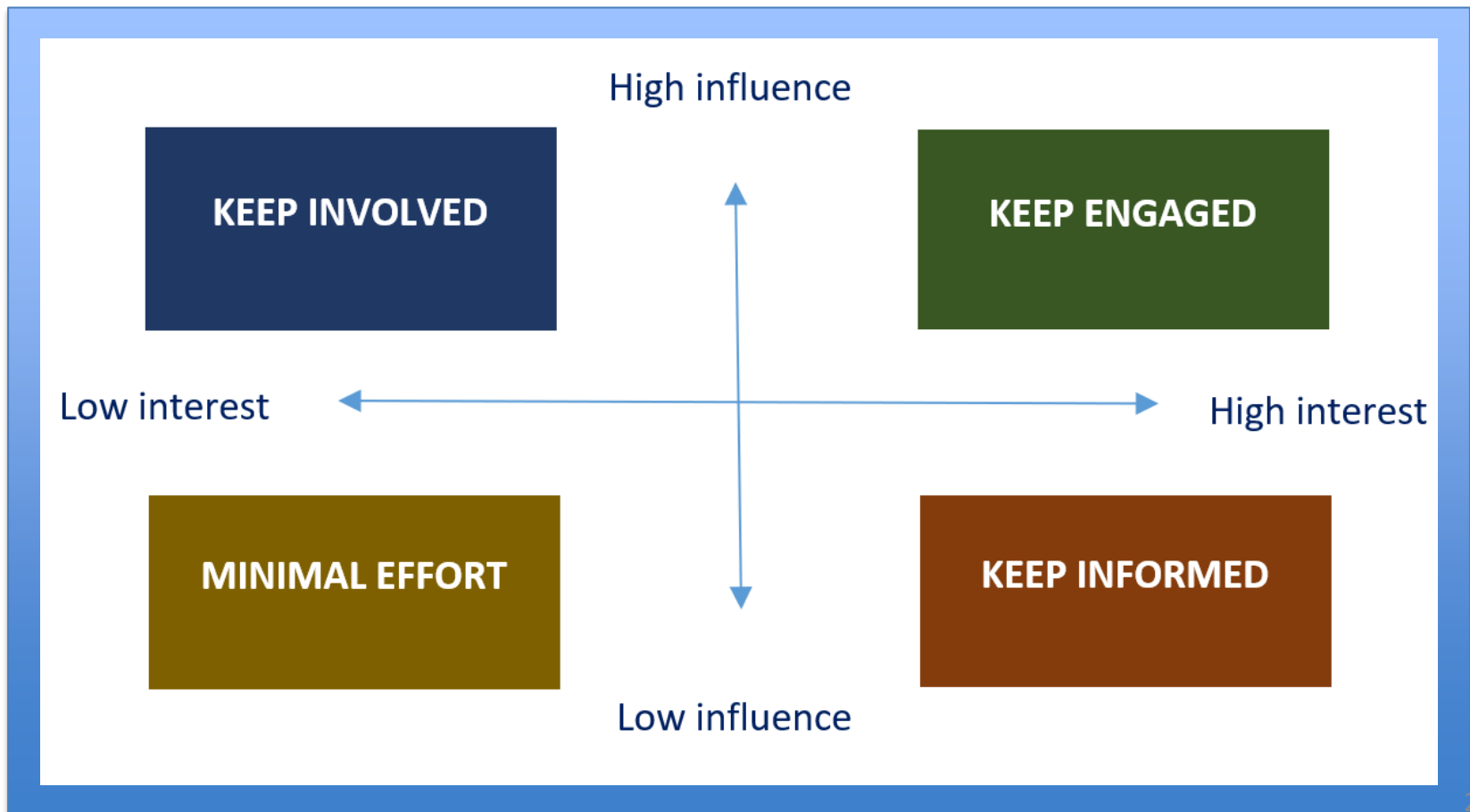


Readiness Matrix for Cross-Sector Collaboration

	Agency	
Partner	Commonalities	Differences
	Barriers	Areas of Collaboration

3. Prioritization: Conduct Partner Interest and Influence Assessment

Consider the following criteria to identify relevant stakeholders and the appropriate level of interaction to maintain



4. Communication Plan & Staff Responsibility



List specific stakeholders at each level of the organization

	E-mail	Meetings (virtual or in-person)	Conference Calls	Educational Materials	Website
Management & Leadership					
Liaison or Comms Manager					
Direct Care Staff					

Messaging Strategy

- **Recommended Messaging Strategy:**
 - Describe the current situation.
 - Outline the problem.
 - Propose the solution.



Example:

Situation: 95% of people who have SUD are not receiving services

Problem: CDC estimates 110,000 deaths/year from SUD

Solution: Expand eligibility of services to non-abstinent users

Sustainability Plan

- **Specify:**
 - What is the timeline for your engagement efforts?
 - What needs to be sustained? What can be discontinued?
 - What organizational changes will you make to maintain partnerships?
 - What type of policy or systems change have you made to support these efforts?
 - What are the current resources and capacity for engagement?
 - Include fiscal analysis of sustainability if available.



Questions?

Bernie Lau

blau@ph.lacounty.gov



Focus Area 1: Outreach and Engagement

30- & 60-Day Engagement (2C-1, 2C-2)

Dr. Brian Hurley
Medical Director and Division Chief, Clinical Services
Substance Abuse Prevention and Control Bureau
Los Angeles County Department of Public Health

Outreach & Engagement: 30- and 60-Day Engagement Policy 2C-1, 2C-2

- Deliverable (Templates, Guidance, Resources) & Due Dates:
 - 2C-1 Engagement Policy – Due 2/29/24 **(REVISED)**
 - Engagement Policy Draft for Comment (*to be shared 12/27/2023*)
 - Submit 1st feedback Engagement Policy (*due on 1/5/24*)
 - Engagement Policy provided for use (*week of 1/29/24*)
 - 2C-2 Verified Engagement – Due 6/30/24
 - Claims Verification Form (*to be shared week of 1/29/24*)

Outreach & Engagement: 30- and 60-Day Engagement Policy 2C-1, 2C-2

- What You Can Do Now:
 - 2C-1 Engagement Policy – Due 2/29/24 **(REVISED)**
 - Develop / Submit Patient Engagement Policy
 - Submit Attestation of Compliance with Initial Engagement Authorization Training Requirements
 - For agencies who offer a non-residential LOC → BOTH deliverables are required
 - For agencies with only residential LOCs → only the engagement policy is required
 - **After SAPC's guidance is published**, return your agency's engagement policy (and, when applicable, attestation) via email to sapc-cbi@ph.lacounty.gov by 2/29/2024 with email subjects:
 - "2C-1: Engagement Policy"
 - "Attestation 2C-1: Initial Engagement Authorizations"

Outreach & Engagement: 30- and 60-Day Engagement Policy 2C-1, 2C-2

- At the end of the fiscal year:
 - 2C-2 Verified Initial Engagement Authorizations – Due 6/30/24

2C-2	*Verified Engagement Auths (<i>*required to participate in the capacity building category</i>)	6/30/24	10	Tier 1 - \$500	Tier 1 - \$5,000
			15	Tier 2 - \$500	Tier 2 - \$7,500
			20	Tier 3 - \$500	Tier 3 - \$10,000

<http://publichealth.lacounty.gov/sapc/providers/manuals-bulletins-and-forms.htm?tm#bulletins> – SAPC FY 23-24 Capacity Building Package

<http://publichealth.lacounty.gov/sapc/providers/treatment-provider-meetings.htm> – R95 Workgroup Meetings

Outreach & Engagement: Draft Engagement Policy 2C-1 – Preliminary Preview

- Connection with Community Partners
- Responsiveness to Outreach
- Patient Rapport
- Patient Education
- Assistance with Overcoming Barriers to Treatment
- Social and Family Support
- Care Coordination to External Services
- Monitoring Patient Response to Adjust Engagement Approach
- Quality Improvement

Outreach & Engagement: Training Attestation 2C-1 – Preliminary Preview

- Attestation of Compliance with Initial Engagement Authorization Training Requirements
 - *Applicable to agencies who offer non-residential LOCs*
 - Attest to protocols for initiating treatment and offering patients treatment up to 30 days (for patients aged 21 and over who are not experiencing homelessness) or up to 60 days (for patients aged 20 and younger and/or who are experiencing homelessness) from the initial date of service
 - Prepared treatment staff through training on evidence-based interventions, including but not limited to Motivational Interviewing, and emphasized the importance of early care coordination and discharge planning as methods of supporting patient engagement in treatment during Initial Engagement Authorizations

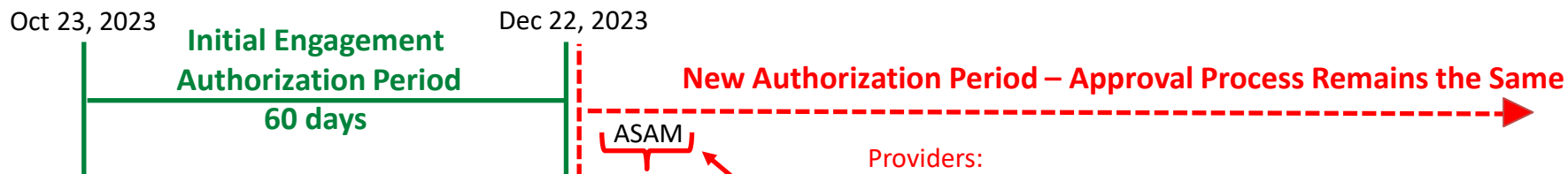
Initial Engagement Authorizations for Non-Residential Levels of Care

- **Submit a Full (Standard) Authorization When Medical Necessity Has Been Established**
 - No need to wait 30/60d before submitting a full authorization request, but provides flexibility for patients
- **For initial engagement authorizations prior to establishing medical necessity**
 - Make explicit via designated PCNX radio button
 - Conduct an ASAM assessment when the patient is ready to participate, prior to submitting the auth request for the balance of the authorization duration



See DHCS Behavioral Health Information Notice (BHIN) 23-001:
<http://www.dhcs.ca.gov/Documents/BHIN-23-001-DMC-ODS-Requirements-for-the-Period-of-2022-2026.pdf>

Authorization Periods – Patients Aged 20 and Under or PEH



For **NON-RESIDENTIAL SERVICES**, initial authorizations for patients **aged 20 and under** and **People Experiencing Homelessness (PEH)** will be set at 60 days while they are being engaged and medical necessity is being established.

Providers:

- Should engage patient to try to complete ASAM assessment and establish medical necessity throughout the initial 60-day authorization, but if this is not possible, the timelines for ASAM assessments and establishing medical necessity are the same as previously:
 - 7- or 14-days to complete ASAM assessment upon the end of the initial 60-day authorization period depending on clients who are 21 and over (7-days) or aged 20 and under (14-days); and
 - 30 days to submit all documentation to establish medical necessity and submit complete member authorization.

1 Initial 60-Day Engagement Authorization Period

- Patient must be LA County Resident
- Must meet SAPC Financial Eligibility requirements
- **Must meet age requirement of being 20 or under**
- **Documentation of homelessness status is required (if applicable)**
- Does NOT need to meet medical necessity

- ## 2 New Authorization Request
- submitted following initial 60-day authorization. In this example, the second authorization would begin Dec 22, 2023 and provider will have 7- or 14-days (depending on age of patient) to finalize the ASAM assessments and 30 days to submit all necessary documentation to establish medical necessity, as per current requirements.

Total Authorization Length

- **Outpatient Services*** → 2 months for the initial authorization period for those aged 20 and under and PEH, and then 4 months for the new authorization once medical necessity is established (in this example, it would end on April 22, 2024)
- **OTP Services**** → 2 months for the initial authorization period for those aged 20 and under and PEH, and then 10 months for the new authorization once medical necessity is established (in this example, it would end on Oct 22, 2024)

*Total time will equal 6 months for outpatient services

**Total time will equal 12 months for OTP services

Authorization Periods – All Other Patients Aged 21 and Over that are Not Homeless



For **NON-RESIDENTIAL SERVICES**, initial authorizations for patients aged 21 and over who are not homeless will be set at 30 days while they are being engaged and medical necessity is being established.

Providers:

- Should be engaging patient to try to complete ASAM assessment and establish medical necessity throughout the initial 30-day authorization, but if this is not possible, the timelines for ASAM assessments and establishing medical necessity are the same as previously:
 - 7- or 14-days to complete ASAM assessment upon the end of the initial 60-day authorization period depending on clients who are 21 and over (7-days) or aged 20 and under (14-days); and
 - 30 days to submit all documentation to establish medical necessity and submit complete member authorization.

- 1 **Initial 30-Day Engagement Authorization Period**
 - Patient must be LA County Resident
 - Must meet SAPC Financial Eligibility requirements
 - Does NOT need to meet medical necessity

- 2 **New Authorization Request** submitted following initial 30-day authorization. In this example, the second authorization would begin November 22, 2023 and provider will have 7- or 14-days (depending on age of patient) to finalize the ASAM assessments and 30 days to submit all necessary documentation to establish medical necessity, as per current requirements.

Total Authorization Length

- **Outpatient Services*** → 30 days for the initial authorization period for those aged 21 and over who are not homeless, and then 5 months for the new authorization once medical necessity is established (in this example, it would end on April 22, 2024)
- **OTP Services**** → 30 days for the initial authorization period for those aged 21 and over who are not homeless, and then 11 months for the new authorization once medical necessity is established (in this example, it would end on Oct 22, 2024)

*Total time will equal 6 months for outpatient services

**Total time will equal 12 months for OTP services

PCNX Authorization Requests

SERVICE AUTHORIZATION REQUEST
Submit Discard Add to Favorites

Member Service Authorization

- FY 23/24+ Authorizations
- Member Service Authorization 21-40
- Care Manager
- Diagnosis
- Comments
- Provider Search
- Doc Request Date
- Online Documentation

▼
Brief Member Review
Member Authorization History

Initial or Continuing Authorization ?

Initial
 Continuing

Authorization Number

Funding Source Authorization Is For *

Select x v

Begin Date Of Authorization *

calendar

T Y

Provider To Be Authorized

Q

End Date Of Authorization *

calendar

T Y

Contracting Provider Program *

Select x v

Current Authorization Status *

Approved
 Denied
 Pending

<http://publichealth.lacounty.gov/sapc/providers/sage/sage-pcnx.htm>
[Sage-PCNX Service Authorization Request Guide](#)

PCNX Authorization Requests

Member Service Authorization

FY 23/24+ Authorizations

Member Service Authorization 21-40

Care Manager

Diagnosis

Comments

Provider Search

Doc Request Date

▼

Initial Engagement * 🔔

Yes
 No

Doc Request Date	
Initial Engagement	<p style="color: red; font-weight: bold;">Required.</p> <ul style="list-style-type: none"> Select Yes if the authorization is a Non-Residential initial authorization where the patient is in the initial assessment period and medical necessity has not yet been established.
	<ul style="list-style-type: none"> Select No if <ol style="list-style-type: none"> 1. This is a Residential Authorization 2. This is a Withdrawal Management Authorization or 3. Medical necessity has been established

<http://publichealth.lacounty.gov/sapc/providers/sage/sage-pcnx.htm>
[Sage-PCNX Service Authorization Request Guide](#)

Attestation of Compliance

- Attestation that treatment staff have been trained on the relevant notices and agency has established protocols for initiating treatment and offering patients treatment up to 30 days (for patients aged 21 and over who are not experiencing homelessness) or up to 60 days (for patients aged 20 and younger and/or who are experiencing homelessness) from the initial date of service to establish medical necessity for treatment at non-residential levels of care.
- Agency staff have reviewed [the SAGE Provider Communication release dated 07/28/23 for guidance on how to indicate in PCNX whether an authorization is an Initial Engagement Authorization upon submission](#) using the “Initial Engagement” radio button.

Diagnosis Code During Initial Engagement Authorization Period

- If an SUD diagnosis is evident for a patient during an initial engagement authorization and confirmed by an LPHA prior to the completion of an ASAM assessment, providers agencies can document the patient's SUD diagnosis during the initial engagement authorization period.
- If there an SUD diagnosis is not known during the initial engagement authorization period, LPHAs can document the diagnosis code: Z03.89, "Encounter for observation for other suspected diseases and conditions ruled out" which is a placeholder diagnosis until the SUD diagnosis is established.
- Any eligible practitioners can document one or more of the ICD-10 codes Z55-Z65, "Persons with potential health hazards related to socioeconomic and psychosocial circumstances." These codes may be used by all practitioners during the initial engagement authorization period prior to diagnosis and do not require certification as, or supervision of, a Licensed Practitioner of the Healing Arts (LPHA). This Z-code would also serve as a placeholder diagnosis until the SUD diagnosis is established.
- For a list of the available ICD-10 codes Z55-Z65, see Table 1 in Attachment A beginning Page 5 of the DCHS All Plan Letter 21-009:
<http://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-009.pdf>

Outreach & Engagement: 30- and 60-Day Engagement Policy

- R95 Workgroup Meeting Dates:
 - Wed, 1/17/24: 11:00 am to 12:30 pm (during UM Meeting)
 - Wed, 3/10/24: 11:30 am to 12:30 pm (during UM Meeting)
 - Wed, 5/15/24: 11:00 am to 12:30 pm (during UM Meeting)
 - Agenda topics to be determined based on feedback, questions and concerns raised by providers

Outreach & Engagement: 30- and 60-Day Engagement Policy

- R95 Workgroup Meeting Dates & Agenda Topics:
 - Wed, 4/10/24: 3:30 pm - 5:00 pm
 - Outreach and Engagement of Individuals Outside Your Treatment Program
 - Wed, 5/8/24: 3:30 pm - 5:00 pm
 - Identify Engagement Policy Implementation Strengths and Opportunities for Improvement

Focus Area 2: Lowering Barriers to Care *Bidirectional Referrals Between Harm Reduction & Treatment Programs (2F-1, 2F-2)*

Dr. Brian Hurley
Medical Director and Division Chief, Clinical Services
Bureau of Substance Abuse Prevention and Control
Los Angeles County Department of Public Health

LBC: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services 2F-1, 2F-2

- Deliverable (Templates, Guidance, Resources) & Due Dates:
 - 2F-1 Executed MOU – Due 3/31/24 **(REVISED)**
 - MOU requirements (*shared on 12/14/23*)
 - 2F-2 Verified Claims – Due 6/30/24
 - Claims Verification Form (*to be provided week of 1/29/23*)

LBC: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services 2F-1, 2F-2

- What You Can Do Now:
 - 2F-1 Executed MOU – Due 3/31/24 **(REVISED)**
 - Identify potential partners
 - Schedule and conduct meetings with potential partners
 - 2f-2 Verified Claims – Due 6/30/24

Better Blending Treatment & Harm Reduction

- We know recovery is a continuum, but the separation and programmatic divide between treatment and harm reduction services is often wide and needs to be addressed to better match the continuum of SUD services with client experience.
- Better integrating treatment and harm reduction services within agencies is both a cultural and operational issue, with the cultural issue being the more challenging to address.
 - Achieving this goal will require addressing this from both angles and will require agency-level interventions on top of what SAPC focuses on given that agencies have different cultures and agency leadership know their culture best.
- **Ingredients for culture change at the agency-level**
 1. Knowing what we're dealing with – Opening the door for discussions to explore staff thoughts/feelings around this topic (e.g., individual/supervision/staff meetings, office hours, etc.) --> **ESSENTIAL FOCUS!**
 2. Leadership making the end goal clear – Aligning the agency and staff
 3. Evaluating progress – How do we know when treatment and harm reduction service are more integrated?
 4. Adjusting approaches as needed – Our evaluations will allow us to modify our interventions to more effectively achieve this integration

Harm Reduction Services



**Harm Reduction
Supplies Access**



**Syringe Exchange &
Disposal**



**Naloxone and
Test Strips**



**Medications for
Addiction Treatment**



Drop-In Centers



**Linkage to Housing
Services**



Pharmacy Access



**Referrals for
Needed Services**

- **GOAL** → Meeting people where they are, both figuratively and literally
 - While brick and mortar locations are needed, mobile services that go out to people who are unlikely to go to brick and mortar locations are also needed

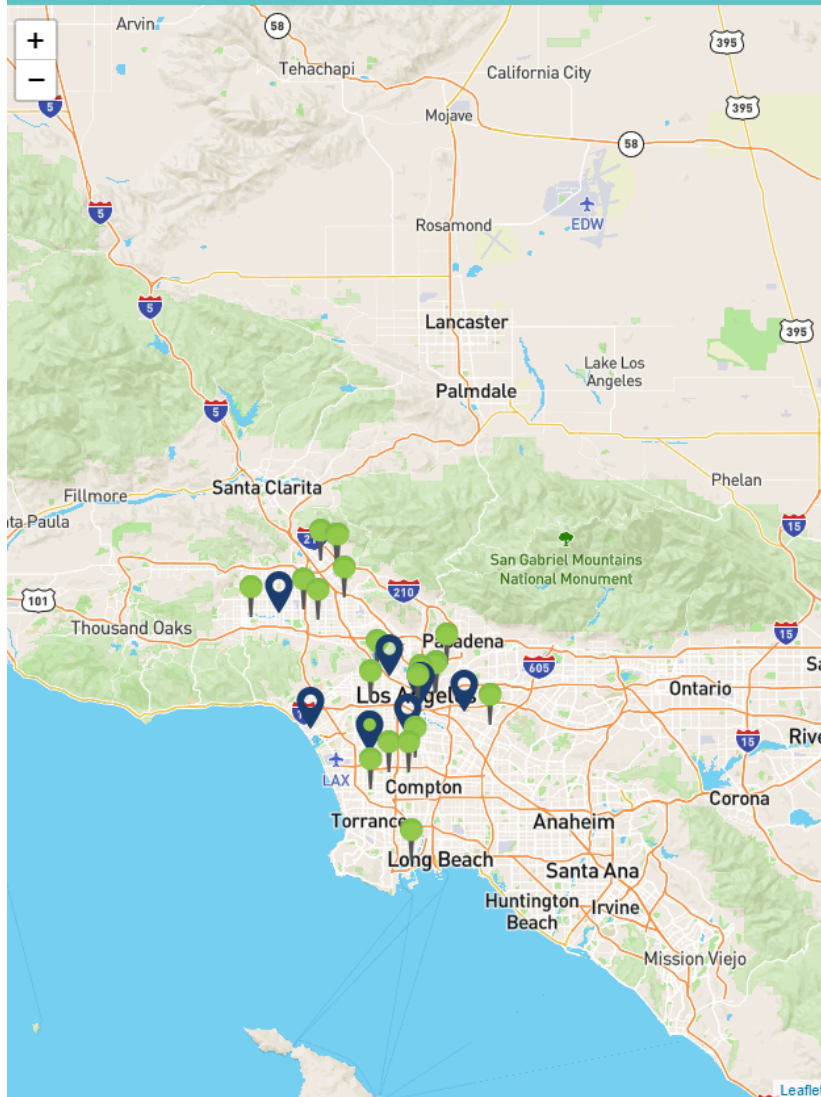
HARM REDUCTION SYRINGE SERVICE PROGRAMS

Harm Reduction Syringe Services Programs

Harm reduction syringe services programs provide access to naloxone, safer injection and smoking supplies, and education which:

- Reduces the risk of fatal overdose
- Reduces the risk and spread of HIV infection
- Reduces the risk and spread of Hepatitis C
- Connects people to treatment and provides a gateway to recovery

Call to find out hours and days of operation.



Finding Harm Reduction Services

Engagement and Overdose Prevention (EOP) Hubs

The Engagement and Overdose Prevention (EOP) Hubs are LA County contracted syringe service providers who provide harm reduction services, peer-led education, and peer-led support services. Harm reduction services include conducting syringe exchanges, providing safer use supplies including safer smoking equipment, distributing naloxone overdose reversal kits, and connecting participants to other important services and programs such as:

- Education about overdose prevention and harm reduction practices.
- Naloxone distribution and education.
- Screening, care, treatment for viral hepatitis and HIV.
- Referrals to medications for addiction treatment, and other medical, mental health, and substance use disorder (SUD) treatment services.
- Fentanyl test strips distribution and education.





















LA County EOP Hubs

[Click here to view EOP Hub Program Schedule \(PDF\)](#)

<http://publichealth.lacounty.gov/sapc/public/overdose-prevention.htm>







Los Angeles County Engagement and Overdose Prevention (EOP) Hubs Schedule

Harm Reduction Syringe Service Programs

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
 LA Community Health Project (CHPLA) 1151 N Western Blvd. Los Angeles, CA 90029 Website: http://chpla.org/ Email/Contact Info: info@chpla.org Phone: 323.380.5469 M-F 9am-5pm	 Hollywood 1625 N. Schrader Blvd. Los Angeles, CA 90028 7pm-10pm	 Skid Row Downtown Los Angeles South Side of 6th St. between Wall and San Julian 9am-11am Watts 94th & Zamora St. 9401 Zamora Ave. Los Angeles, CA 90059 3pm-5pm		 South Los Angeles Spectrum Community Clinic at Drew University 1731 W. 120th St., Building M, LA, CA 90059	 Hollywood 1625 N. Schrader Blvd. Los Angeles, CA 90028 (Parking lot behind LA LGBT Center) 7pm-10pm	 Skid Row Downtown Los Angeles South Side of 6th St. between Wall and San Julian 9am-11am Boyle Heights BAART Clinic Boyle Heights 1701 Zonal Ave. Los Angeles, CA 90033 12pm-2pm	
 Asian American Drug Abuse Program (AADAP) Health Intervention Program 652 E. Manchester Blvd., Inglewood, CA 90305 Website: https://aadapinc.org/healthinterventionprogram/ Email/Contact Info: tremolds@aadapinc.org Phone: 424.331.5799 M-F 9am-5pm		 660 E. Manchester Blvd. Inglewood, CA 90301 10am-5pm	 BAART Medmark Clinic 11682 S. Atlantic Ave. Lynwood, CA 90262 8am-11am	 West County Medical Corporation 2272 Pacific Ave Long Beach, CA 90805 Every 1st & 3rd Wednesday 8am-10am West County Medical Clinic 100 W. Market St. Long Beach, CA 90805 Every 2nd and 4th Wednesday 10am-12pm Medmark Clinic (white van in parking lot) 11900 S. Avalon Ave. Los Angeles, CA 90059 7:30am-10am	 Lawndale Medical & Mental Health Services 4023 Marine Ave. Lawndale, CA 90260 7am-10am	 Hollywood Medical Clinic 5015 W. Pico Blvd Los Angeles, CA 90019 8am-11am	
 Tarzana Treatment Center (TTC) 7101 Baird Avenue, Reseda CA 91335 Website: https://www.tarzanatc.org/ Email: epacheco@tarzanatc.org Phone: 818.342.5897 M-F 9am-5pm		 11770 Block of Borden Ave. Pacoima, CA 91331 (Under 118 Freeway overpass) 1:30pm-4:00pm 7500 Block of Valjean Ave. Van Nuys, CA 91406 (Between Sherman Way & Saticoy) 4:30pm-6:00pm	 6800 Block of Eton Ave. Canoga Park, CA 91303 (End of block) 9:30am-11:30am 12178 San Fernando Rd. Sylmar, CA 91342 (Parking Lot of the Loyal Order of Moose) 1:00pm-3:00pm	 8741 Laurel Canyon Blvd. Sun Valley, CA 91352 9:30am-11:00am 14500 Block of Hamlin St., Van Nuys, CA 91411 (Off of Van Nuys Blvd & Victory Blvd) 12:30pm-3:00pm			
 Bienestar Human Services East Los Angeles Storefront 5314 East Beverly Blvd. Los Angeles CA 90022 Website: https://www.bienestar.org/syringe-exchange/ Email: ejalayer@bienestar.org Phone: 866.590.6411 M-F 10am-2pm & 4pm-7pm		 Coastal Recovery Center 117 E. Harry Bridges Blvd. Wilmington, CA 90744 10am-12pm Highland Park 5982 Arroyo Dr. Los Angeles, CA 90042 3:30pm-5pm	 DTLA Olvera St. 527 N Spring St. Los Angeles, CA 90012 4:00pm-6:00pm	 Tavarua 8207 Whittier Blvd. Pico Rivera, CA 90660 10:30am-12:00pm Lincoln Heights Corner of Alhambra Ave & Johnston St. Los Angeles CA 90031 3:30pm-5:00pm			

Los Angeles County Engagement and Overdose Prevention (EOP) Hubs Schedule

Harm Reduction Syringe Service Programs

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
 <p>Homeless Health Care Los Angeles (HHCLA) Center for Harm Reduction 512 East 4th St. Los Angeles, CA 90013 Website: https://www.hhcla.org/ Email/Contact Info: trainingandeducation@hhcla.org Phone: 213.617.8408 Sun-M 8:30am-3:30pm</p>	 <p>Center for Harm Reduction 512 East 4th St. Los Angeles, CA 90013 Sun-M 8:30am-3:30pm</p>						
 <p>Venice Family Clinic Common Ground at Judy and Bernard Briskin Center 622 Rose Ave., Venice, CA 90291 Website: https://venicefamilyclinic.org/ Email/Contact Info: VFCInfo@mednet.ucla.edu Phone: 310.314.5480 M-F 9am-5pm</p>		 <p>Common Ground at Judy and Bernard Briskin Center 622 Rose Ave., Venice, CA 90291 M-F 9am-5pm</p>					
 <p>Homeless Outreach Program Integrated Care System (HOPICS) 5849 Crocker St. Los Angeles, CA 90003 Website: https://www.hopics.org/ Email/Contact Info: harmreduction@hopics.org Phone: 323.432.4399 M-F 9am-5pm</p>		 <p>HOPICS 5849 Crocker St. Los Angeles, CA 90003 M-F 9am-5pm</p>					

*Scheduled hours are subject to change without notice. Please contact the participating agency to confirm service hours and locations.

This program is supported in part by the County of Los Angeles, Department of Public Health. Please contact Substance Abuse Prevention and Control (SAPC) at harmreduction@ph.lacounty.gov

LBC: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services 2F-1, 2F-2

DEPARTMENT OF PUBLIC HEALTH
Bureau of Substance Abuse Prevention and Control (SAPC)

Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services

To submit executed Memoranda of Understanding (MOUs) as the deliverable for the capacity building payments supporting the cost of developing and negotiating MOUs formalizing partnerships between SAPC-certified harm reduction syringe services programs and SAPC contracted substance use treatment agencies, email each executed MOU to *both*: harmreduction@ph.lacounty.gov and sapc-cbi@ph.lacounty.gov with the subject “2F-1 Bidirectional Harm Reduction MOU”

Overview

SAPC-contracted substance use treatment provider agencies are eligible to receive capacity building payments for developing formal Memoranda of Understanding (MOU)-codified partnerships with SAPC-certified harm reduction syringe services programs (collectively “agencies”). These relationships are designed to align with treatment provider agency organizational shifts towards treating patients who may have non-abstinent goals of care and to formalize pathways for bidirectional referrals between substance use treatment agencies and programs certified by SAPC to offer harm reduction services.

SAPC recognizes the historic organizational and programmatic divide that commonly separates substance use treatment programs and harm reduction programs. Coordination of both treatment and harm reduction services will enable SAPC-contracted agencies to better match the continuum of SUD services with patient and community needs.

Agencies obtaining these incentive payments should commit to collaborating toward making the necessary cultural and operational shift in pursuit of coordination of both treatment and harm reduction services for the individuals they serve, as determined by the evolving needs of service recipients. Agency leadership should focus on the following ongoing activities in support of this commitment:

LBC: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services 2F-1, 2F-2

- Maintaining discussions with staff (though individual/supervision/staff meetings, office hours, and other areas of staff supervision and development) to evoke staff's concerns and perspectives about the provision of harm reduction services for people who may or may not abstain from using intoxicants.
- Agency leadership's providing clarity that aligns the agency's strategic direction and staff efforts toward the goal of a comprehensive range of harm reduction and substance use treatment services available for patients and clients ("service recipients"), depending on their continually evolving needs.
- Develop and institute (1) processes that build the continuum of care across harm reduction and substance use treatment providers; (2) methods to evaluate the integration of said services; and (3) measure outcomes accordingly.
- Demonstrate ongoing adjustments that continue to advance this integration approach based on outcomes measured and feedback obtained from staff, harm reduction providers, and service recipients.

Agencies Certified by SAPC to Provide Harm Reduction Syringe Services

SAPC's Harm Reduction Syringe Services Program (SSP) Certification process is described in an information notice posted on <http://publichealth.lacounty.gov/sapc/providers/manuals-bulletins-and-forms.htm?tm#bulletins> (currently [SAPC-IN 22-09 Harm Reduction Syringe Services Program Certification](#)).

[RecoverLA](#) maintains a list of SAPC-certified harm reduction syringe service agencies: http://www.recoverla.org/staying_safe/syringe-exchange-also-known-as-needle-exchange.

SAPC-contracted harm reduction syringe service programs are designated as Engagement and Overdose Prevention Hubs (EOP Hubs) and are listed on SAPC's website: [Click here to view the list of EOP Hubs](#). SAPC EOP Hub agencies are required to obtain and maintain SAPC's certification as a harm reduction syringe services program.

LBC: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services 2F-1, 2F-2

Email HarmReduction@ph.lacounty.gov with any questions or requests for more information about LA County's harm reduction services or for questions about connecting with an LA County certified harm reduction syringe services provider agency.

Considerations for Agencies that are SAPC-Contracted Substance Use Treatment Providers and SAPC-Certified as Harm Reduction Syringe Services Programs

Agencies that are contracted with SAPC to provide substance use treatment services and are also certified by SAPC to provide harm reduction syringe services may submit documentation describing intra-agency coordination of bidirectional referrals that include the Memorandum of Understanding (MOU) components delineated below. These policies and procedures may be credited in lieu of an executed MOU towards the 2F-1 incentive units *only* when they have established MOUs with one fewer than the maximum number of MOUs with external partners listed in the current version of the Capacity Building Package posted in the current Rates and Payment Policy Bulletin (posted via <http://publichealth.lacounty.gov/sapc/providers/manuals-bulletins-and-forms.htm?tm#bulletins>)

To illustrate:

- Tier 1 SAPC treatment contractors may submit internal policies and procedures to count toward this incentive when they have already established two MOUs with external harm reduction syringe services programs (thus, the policies and procedures would count in lieu of the **third** MOU).
- Tier 2 SAPC treatment contractors may submit internal policies and procedures to count toward this incentive when they have already established three MOUs with external harm reduction syringe services programs (thus, the policies and procedures would count in lieu of the **fourth** MOU).
- Tier 3 SAPC treatment contractors may submit internal policies and procedures to count toward this incentive when they have already established four MOUs with external harm reduction syringe services programs (thus, the policies and procedures would count in lieu of the **fifth** MOU).

LBC: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services 2F-1, 2F-2

Required Memorandum of Understanding (MOU) Components

SAPC requires that a formal, written agreement be in place between SAPC-contracted substance use treatment provider agencies with SAPC-certified harm reduction syringe services programs for this incentive. The written agreement shall include:

Established Communication Protocol

- Both parties shall have designated key points of contact within their respective organizations to coordinate communication and collaboration between organizations.
- Both parties have and will continue to arrange and conduct scheduled meetings that advance the aims of this agreement and have designated communication channels established to facilitate ongoing collaboration.

Established Referral Pathway

- Both parties shall have organized a clear referral process to connect service participants who are engaging in harm reduction services with substance use treatment services.
- Both parties shall have agreed upon criteria for low-threshold initiation of treatment services that support prompt and efficient linkage of SSP service recipients to substance use treatment available at a treatment agency.

Care Coordination

- Both parties shall have established and shall maintain protocols ensuring care coordination for service recipients served by the agencies.

LBC: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services 2F-1, 2F-2

Inter-Agency Training

- Both parties shall have agreed on a plan for staff training that enhances mutual understanding of each of the agencies' respective goals, services, and treatment orientations consistent with the principles of harm reduction.

Information Security

- Both parties shall maintain confidentiality protocols compliant with all applicable privacy laws and regulations, including but not limited to HIPAA and 42 CFR Part 2, that maintain confidentiality for patients, family members, and service recipient records.

Service Recipient Feedback

- Both parties shall have established a mechanism for obtaining feedback from service recipients regarding their experiences, including but not limited to successes and barriers of receiving services at the agencies.
- The agencies shall use the feedback to improve care coordination and service delivery.

MOUs must be submitted SAPC [in order to](#) validate incentive payments that support the cost of developing and negotiating MOUs that formalize partnerships between SAPC-certified SSPs and SAPC-contracted substance use treatment agencies. SAPC-contracted substance use treatment agencies shall submit copies of executed MOUs via email to *both*: harmreduction@ph.lacounty.gov and sapc-cbi@ph.lacounty.gov with the subject "2F-1 Bidirectional Harm Reduction MOU".

LBC: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services 2F-1, 2F-2

- R95 Workgroup Meeting Dates & Agenda Topics:
 - Wed, 11/15/24: 10:00 am - 12:30 pm (during UM Meeting)
 - Wed, 1/17/24: 11:00 am - 12:30 pm (during UM Meeting)
 - Wed, 3/10/24: 10:30 am - 12:30 pm (during UM Meeting)
 - Wed, 5/15/24: 11:00 am to 12:30 pm (during UM Meeting)
 - Agenda topics to be determined based on feedback, questions and concerns raised by providers
 - Wed, 2/28/24: 3:30 am to 5:00 pm
 - Developing Sustainable Referral Pathways with Harm Reduction and Treatment Providers

LBC: Bidirectional Referrals Between Substance Use Treatment and Harm Reduction Services 2F-1, 2F-2

- R95 Workgroup Meeting Dates & Agenda Topics:
 - Wed, 4/24/24: 12:00 am to 1:30 pm
 - Identify Engagement Policy Implementation Strengths and Opportunities for Improvement
 - Wed, 6/26/24: 3:30 to 5:00 pm
 - Troubleshooting submission of verified claims for new admissions at non-FBS sites.

RecoverLA:

A Los Angeles County Guide to
Substance Use Disorder Prevention
and Treatment Resources



Discussion

Visit RecoverLA.org on your smart phone or tablet to learn more about SUD services and resources, including a mobile-friendly version of the provider directory and an easy way to connect to our Substance Abuse Service Helpline at 1-844-804-7500!