

## MEMORANDUM

**To:** Sen. Claire Ayer, Chair, Senate Committee on Health and Welfare

**From:** Mark Larson, Commissioner of the Department of Vermont Health Access

**Cc:** Doug Racine, Secretary, Agency of Human Services

**Date:** 4/1/14

**Re:** Substance Abuse Network of Providers

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In response to questions received through email on 3/23/14, DVHA has put together an analysis of initiatives that have the potential to enhance the Spoke network of providers.

- 1. Initiate Panel Management of waiting list through Triage process that will be managed at DVHA through the Substance Abuse Unit in collaboration with ADAP.**
  - Establish work plan to drill down on geographical location of waiting list and potential available providers. Collaboration between DVHA, ADAP and the Hubs to identify individuals on the waiting lists who could be referred to the spokes.

Status: Planning and early implementation.

- 2. Expanding the Medicaid outpatient provider network to LADCs. (H.69)**
  - Performance Improvement Project underway with planned full implementation by 7/1/14
  - Starting in Addison, Rutland and Bennington Counties (Pilot vs. Statewide)
  - Will utilize payment reform for substance abuse counseling services.
  - Provide physicians with increased resources for referrals to substance abuse counseling
  - Improve coordination between counselor and prescribe

Status: Pilot starts 7/1/14.

- 3. Supplement the current spoke resources with additional mental health providers and improved coordination with prescribers.**
    - Focus on prescribers with lower caseloads (they have limited resources from Hub and Spoke due to lower caseload) and recruitment of new providers. Expanding current provider caseloads.
    - Identify enrolled Medicaid mental health providers in the area of the prescribing physician.
    - Incentivize mental health providers to treat patients receiving medication assisted treatment for substance abuse by offering a treatment planning fee every 6 months. This fee would cover the
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development of a coordinated treatment plan which is provided to the prescriber, ongoing coordination with the prescriber, and supplement regular and ongoing treatment of the patient. (Cost)

- The prescriber would be offered the additional resources of the mental health/substance abuse providers for care of the beneficiaries with the agreement to care for additional beneficiaries
- DVHA to develop a system for oversight and to measure outcomes focusing on engagement and follow up treatment.

Status: Early development and planning. Has fiscal impact.

**4. Provider (Spoke) outreach once panel identified; disseminating area LADC access, communication plan & treatment planning.**

- Develop outreach process for providers through CMO, Substance Abuse Unit after potential increase in specific patient panels.
- Blueprint in process of supporting providers in Addison County
- Hub & Spoke multi-payer movement; outreach (survey) dissemination via ADAP/DVHA/Blueprint.

Status: Design and planning for implementation.