

Substance Use Disorder Intake, Screening, & Assessment (SUDISA) Workgroup Meeting Minutes

March 27, 2024, 9:05AM-10:30AM PST

Meeting Recording: [Substance Use Disorder Intake, Screening, & Assessment \(SUDISA\) Committee - YouTube](https://youtu.be/Rhvox5Jgu0o) – <https://youtu.be/Rhvox5Jgu0o>

<input checked="" type="checkbox"/>	Michelle Martinez, HCA	<input checked="" type="checkbox"/>	Bethany Barnard	<input type="checkbox"/>	Phillip Maes
<input checked="" type="checkbox"/>	Theresa Adkison, HCA	<input checked="" type="checkbox"/>	Brandy Branch	<input checked="" type="checkbox"/>	Molly Martin
<input checked="" type="checkbox"/>	Arthur Andrews, HCA	<input type="checkbox"/>	Elizabeth Bridges	<input checked="" type="checkbox"/>	Beth Myers
<input checked="" type="checkbox"/>	Meta Hogan, HCA	<input type="checkbox"/>	Tiffanie Colombini	<input checked="" type="checkbox"/>	Katie Ramos
<input type="checkbox"/>	Michael Langer, HCA	<input type="checkbox"/>	Dallas Delagrange	<input checked="" type="checkbox"/>	Cara Reidy
<input type="checkbox"/>	Ruth Leonard, HCA	<input type="checkbox"/>	Charnay DuCrest	<input checked="" type="checkbox"/>	Carrie Reinhart
<input type="checkbox"/>	Gayle Martinsen, HCA	<input checked="" type="checkbox"/>	Alicia Egan	<input checked="" type="checkbox"/>	Amy Ruge
<input checked="" type="checkbox"/>	Sarah Melfi-Klein, HCA	<input checked="" type="checkbox"/>	Dominique Fortson-Jordan	<input checked="" type="checkbox"/>	David Sapienza
<input type="checkbox"/>	Melanie Oliver, HCA	<input type="checkbox"/>	Trina Gallacci	<input type="checkbox"/>	Bergen Starke
<input type="checkbox"/>	Eliza Tharp, HCA	<input checked="" type="checkbox"/>	Sarah Gillard	<input checked="" type="checkbox"/>	Wayne Swanson
<input type="checkbox"/>	Tony Walton, HCA	<input type="checkbox"/>	Ana Hartu	<input type="checkbox"/>	Adriane Tillery
<input type="checkbox"/>	Rachel Downs, HCA	<input type="checkbox"/>	Jackielyn Jones	<input checked="" type="checkbox"/>	Angela Tonkovich
<input checked="" type="checkbox"/>	Brianna Peterson, HCA	<input type="checkbox"/>	Qudsia Khan	<input type="checkbox"/>	Lashonti Turner
<input checked="" type="checkbox"/>	Cathy Assata	<input checked="" type="checkbox"/>	Garrett Leonard	<input checked="" type="checkbox"/>	Daniel White

Meeting Attachments

- Meeting Agenda

Announcements

After welcoming notes were conducted by **Michelle Martinez**, Senior Substance Use Disorder (SUD) Project Manager, she introduced **Kelley Sandaker**, the new SURSAC/SUDISA Administrator. Kelley reported he has worked in the SUD/MH field for twelve years and has worked work youth and adults in a variety of occupations, most recently working at Cascade Behavioral Health prior to its closure. He wanted to do more systems-change work and thus applied to work at the Washington State Health Care Authority. Michelle further shared they are finalizing creating the SharePoint that all SUDISA members would be able to access and contribute to, together to streamline their processes. Final approval for the Project Charter is awaiting completion and will be sent out once completed.

Review of Work to Date

Michelle Martinez shared an update of the work to date to and wanted to hear from SUDISA members about how to break down and sort recommendations so that they begin to formulate specific recommendations to address issues, and whether more information gathering needs to occur prior to moving forward.

Questions and Comments for Michelle Martinez RE: Work to Date → Recommendations

- A workgroup member stated that she noticed more concrete themes in their current work that could be grouped together to help organize their work.
 - Payor Systems, Clinical Systems, Screening Processes, Peer Utilization, Streamlining pre-service screening, issues with transitioning from medical settings to community treatment settings, access to insurance.
- A workgroup member stated that there needs to be more inclusion of medical terminology as typical physicians and medical providers do not possess working knowledge of ASAM criteria. Inclusion of medical terminology will help ensure clients are able to get appropriate level of care and support regardless of background.
- A workgroup member cited that it would help to have walkthroughs of the ways that clients go through the process to develop a well-rounded idea of the process's clients need to go through to receive screening, assessment, and follow through with recommendations.
 - A workgroup member followed this with ensuring that specific pathways are described in detail as services differ depending on availability and agency
- A workgroup member stated that ASAM Criteria 4th edition will offer a quicker pathway, which will be implemented January 2026. One of the recommendations this group could have is that our state fully maximize the flexibilities offered by ASAM Criteria 4th edition.
 - A workgroup member asked, "Are doctors and nurses going to be training on how to implement ASAM Criteria?"
 - A robust training will be developed and implemented. While it will prioritize behavioral health agencies, there will be training tailored for healthcare providers, clinical supervisors and administrators.

SUD Services x Intake Assessment Processes Table

Michelle Martinez inquired to workgroup members which specific columns of the SUD Services x Intake Assessment Processes Table they would like to focus on during the workgroup breakout sessions. This is to assist the workgroup in comprehension and understanding of patient experiences attempting to access treatment services.

- A workgroup member cited that a common theme in prior meetings has been the inclusion of medical and clinical expertise into treatment.
 - A workgroup member reiterated the importance of this given that there are different ‘doorways’ that patients come through that need access to treatment. There is a language barrier between SUD treatment and medicine that tends to create confusion for medical professionals on what a patient needs.
- A workgroup member cited that paperwork to access treatment services and to switch from a medical setting to a community-based setting are barriers as the processes are not streamlined and usually robust with paperwork and issues with insurance.
- A workgroup member cited there is a lack of providers and services, in addition to there not being a lot of space.
 - The issue with the lack of continuity of care creates more barriers for patients that make service access more difficult.
- A workgroup member cited that there are numerous inherent barriers in this line of work, and wondered if there were more specific to [HB 2642 – Removing health coverage barriers to accessing substance use disorder treatment services.](#)
 - The intake process of the ASAM assessment is what creates these internal barriers. Having a more streamlined assessment/intake will ultimately be better for both clinicians and patients.
 - The ASAM Criteria 4th Edition is building on incorporating withdrawal management to the residential levels of care which will create quicker pathways.
 - A workgroup member cited that with HB 2642, they were able to get a walk-in client into in-patient treatment on the same day, however, getting patients from detox to resident in-patient proved more difficult given the list of criteria needed at different facilities. Encouraging residential in-patient facilities to go from full assessments to screenings can help streamline the process.
- A workgroup member cited that barriers to substance use disorder treatment come up through the outreach pathway as well as the medical pathway.

Future Agenda/Meeting Planning

Michelle Martinez led a discussion to work on future meeting topics, to include:

- Continuity of Care/transition from medical setting to community-based settings, as barriers overlap with outreach-to-service connection.
- Recommendations to changes to billing/credentialing structure that can leverage peer contributions and/or updates to SERI (expanding billable SUD services and who can bill for those services)

- As of January 1, 2024, licensed therapists working at SUD behavioral health agencies can also do ASAM.
 - Brief intervention and/or behavioral health care coordination can both be done before an assessment for Medicaid.
 - Updates to SERI can be accessed here: [Service Encounter Reporting Instructions \(SERI\) | Washington State Health Care Authority](#)

Next Steps

1. Michelle will work with Kelley on agenda planning.

Next Meeting

April 8, 2024 – 1:05PM-2:35PM PST

Addendum Items

Link to the public SUDISA webpage: [SUD Intake, Screening, and Assessments \(SUDISA\) work group | Washington State Health Care Authority](#)