

Background

In September of 2019 The Centers for Medicare and Medicaid Services (CMS) awarded Washington state \$3.8 million to develop a policy framework over the next 18 months. This framework will guide future activities to advance statewide whole-person, integrated care (i.e., needed SUD treatment and recovery services integrated with physical health, mental health, and social services). CMS may make available additional funding to support an implementation phase.



Deliverables

HCA will develop an implementation strategy and timeline identifying activities for:

- Improving treatment and recovery service coverage, licensing, and other regulatory policies.
- Supporting workforce recruitment and retention.
- Strengthening the health information technology (HIT) infrastructure for care coordination and analytics.
- Designing an alternative payment model for SUD disorder treatment and recovery services, incorporating social determinants of health (SDoH) factors and HIT incentives.

Summary

Who does this help?

All Medicaid beneficiaries with SUDs and opioid use disorders (OUDs) with a focus on:

- Pregnant and post-partum women.
- Adolescents 13 to 18 years of age.
- Transition Age Youth Adults (TAYA) 16 to 25 years of age.
- Persons who receive services at Syringe Services Programs (SSPs).
- American Indian and Alaska Natives (AI/AN) enrolled in Medicaid.
- Justice-involved persons.
- Individuals experiencing homelessness.



The CMS award allows HCA to:

Assess data sources

Conduct an assessment of existing Medicaid data sources for:

- Defining the beneficiary population.
- Assessing treatment gaps.
- Evaluating care coordination capabilities.
- Develop utilization and effectiveness metrics.



Assess capacity

Quantify and assess the capacity for Medicaid providers to provide treatment and recovery support services, and identify barriers and options for addressing barriers to SUD treatment and recovery services using information from:

- Federal and state agencies.
- Tribal governments.
- Accountable Communities of Health.
- Managed Care Organizations.
- Physical and behavioral health providers.
- Social service providers.
- Caregivers of those with SUD treatment and recovery needs.



Review effectiveness

Review the medical effectiveness of nonmedicinal treatment of those with SUDs and OUDs.



Review incentives

Designing an alternative payment model incentivizing effective SUD treatment and recovery services delivery.

