

SUD 1115 WAIVER APPLICATION, IMPLEMENTATION PLAN & STATE PLAN AMENDMENT
Roseburg Townhall Minutes

Wednesday, February 12, 2020 – 10:00am – 11:00am
ADAPT/COMPASS, 621 W. Roseburg, OR 97470- Room 132
Conference Call Line: 1- 866-434-5269, Participant: 3490709

ATTENDANCE	
IN ATTENDANCE	Greg Bringham, Rob McAdam, Jerry O' Sullivan, Tom Surels, Janet Truble
ON PHONE	Donald Ledford
STAFFED BY	Megan Anya, Joanna Johnson, Teri McClain

Minutes		
Topic	Presenter	Discussion
1. Informational	Joanna Johnson	<p>An overview of both the SUD application and the SPA were provided. The goal is to create a full continuum of care for those with SUD. The group decided to start with the application.</p> <p>Waiver activities:</p> <ol style="list-style-type: none"> 1. Community Integration- Housing Supports 2. IMD +6 bed Exclusion 3. Recovery Supports- <ol style="list-style-type: none"> a. Provided access to Peer Delivered Services, by current treatment providers before during and after treatment / outside of a treatment plan. It is provided only in treatment currently. b. Create a new Provider type: Peer Run Organizations- who can then provide peer services outside of the traditional treatment model. <p>State Plan Amendment (SPA) Activities- Goal is to create parity in services between MH & SUD so there is equal access to services.</p> <ol style="list-style-type: none"> 1. Case management 2. Crisis intervention 3. Skills training

		<p>4. Early/ Brief intervention services 5. Prevention services</p> <p>We have 90 days after the SPA for the implementation plan to be submitted to CMS. The application and implementation plan are being submitted together in hopes of expediting the process. The Implementation Plan are the milestones (set by CMS) Oregon must achieve to apply for the SUD 1115 Waiver and how Oregon is or is planning to meet those. The first 10-12 pages of the application are background information.</p> <p>The application for the waiver starts on page 10. A question was asked around behavioral health aides (BHA), which are NOT included, which it was agreed upon a summary in the background should be included. Along with a billing code for housing and those transitioning out of higher levels of care.</p>
<p>2. Questions & Dialogue</p>		<p>It was asked if Oregon would be looking into broadening the scope for peers? She stated they are having trouble hiring people with the credentials needed.</p> <p>Do we know approximately how many facilities currently have over 16 beds?</p> <ul style="list-style-type: none"> • Joanna answered: The last time she checked there were about 50 facilities. <p>Will this allow patients to be closed out in treatment but still have access to medication? Yes.</p> <p>Currently you have to have peer services while in treatment would this stay the same.</p> <ul style="list-style-type: none"> • Yes, that would remain the same, this is for after treatment. <p>Would we have to identify ourselves as a peer run organization?</p> <ul style="list-style-type: none"> • No, you would not need to identify yourself as a peer run organization, if you are a treatment provider already providing services. <p>Is there any conflict between this kind of peer service outside of treatment plan and other peer services we would have paid for with 4143 grants?</p> <ul style="list-style-type: none"> • You wouldn't want to use grant funds and Medicare dollars for one person, but this would give you an opportunity to expand your services.

		<p>Could Community Health Workers be added as a provider type for skills training. It can be difficult to staff enough Peers to do this work in addition to the peer work. Plus, Community Health workers may be more connected to the community at large and familiar in navigating the medical system. They are also more available in the workforce</p> <ul style="list-style-type: none"> • We will look into adding this as a provider type for this service. If there are anymore suggestions like this, please share!
3. Oral Testimony		None provided
4. Next Steps		<p>Public Comment is from January 14 - February 21, 2020</p> <p>Have presented to the Alcohol and Drug Policy Commission, Medicaid Advisory Council, and the Addictions and Mental Health Policy Advisory Committee; as well as a Townhall in Portland</p> <p>Town halls to come (See Webpage):</p> <ul style="list-style-type: none"> • Redmond/Bend; February 19, 2020 <p>Tribal Consultation from January 13 - March 13, 2020</p> <p>Will be compiling comments and responses to be published by the end of March to the 1115 Waiver Webpage</p> <p>Edits will be made to the application from the comments</p> <p>We anticipate submitting the application and Implementation Plan to CMS in April</p> <ul style="list-style-type: none"> • Could be approved as early as 90 days post submission
<p align="center">Next Townhall: Roseburg/ Bend: Wednesday, February 19, 2020; 12:30-1:30pm- with a call-in option</p> <p>Oregon's SUD 1115 Waiver Webpage: https://www.oregon.gov/oha/HSD/Medicaid-Policy/Pages/SUD-Waiver.aspx</p>		