

Name of Meeting: Addiction and Recovery Treatment Services (ARTS) Workgroup
Date of Meeting: July 28, 2016
Length of Meeting: 3:25 PM – 4:45 PM
Location of Meeting: Department of Medical Assistance Services (DMAS) 7A

Workgroup Members Present:

Managed Care Plans

Renee Miskimmin, Virginia Premier
Margaret Callahan, Virginia Premier
Cindy Dopp, Virginia Premier
Brenda Barfield, Virginia Premier
Angela Sobotka, Virginia Premier
Rick Gordon, Virginia Premier
Robert Coalson, Aetna Better Health
Matt Keats, Anthem
Les Saltzberg, Anthem
Monica Wallace, Anthem
Eric Walker, Anthem
Steven Salati, Anthem,
Beth Condyles, Anthem
Ryan May, Humana
Frank Washington, Optima
Jodi Diamond, Optima
Lee Ortiz, Optima
Mohamed Ally, INTotal
Janine Woldt, INTotal
Jacob Carson, INTotal
Mary Fountain, INTotal
Bill Phipps, Magellan
Cheryl DeHaven, Magellan
Danyelle Smilovich, Magellan
Jim Forrester, Magellan
Morton Albert, Beacon Health Options
Scott Parker, Beacon Health Options
Kristin Bickford, Kaiser Permanente

Providers

Karen Redford, RBHA
Cheryl Robinette, Cumberland Mountain
Community Services Board (CSB)
Mary Cole, Cumberland Mountain CSB

State Agencies

Cleopatra Booker, Department of Behavioral
Health and Developmental Services (DBHDS)
Holly Mortlock, DBHDS
Stacy Gill, DBDHS
Jodie Manz, Secretary's Office

Associations

Danielle Nugent, Virginia Community
Healthcare Association (VCHA)
Jennifer Faison, VACSB
Lauren Bates-Rowe, Medical Society of
Virginia (MSV)

DMAS Attendees:

Kate Neuhausen, Brian Campbell, Donna
Proffitt, Shamika Ward, Estelle Kendall,
Jeannette Abelson, Nicole Anders, Whitney
Davis, Kim Ryan, Alyson DeSalvo, Jill
Gambosh, Ashley Harrell

INTRODUCTIONS / UPDATES / MINUTES APPROVAL

Mr. Brian Campbell called the meeting to order.

- Minutes from the previous meeting were reviewed and approved with no comments.
- ARTS Public comment period closes 8/1/16 and DMAS plans to submit the waiver application to the Centers for Medicare and Medicaid Services (CMS) within the week.
- Mr. Campbell stated he would review with the workgroup the outcome of the consultation call with Dr. David Mee Lee.

OUTREACH PLANNING FOR REGIONAL INFORMATIONAL SESSIONS

- An overview of the ARTS 101 provider training was given: consists of in-person training in each of the managed care regions with DMAS, DBHDS, DHP, Magellan and representatives from the health plans. Scheduled dates are 8/30/16 and 9/1/16 from 12pm-1:30pm. Information will be provided to assist providers learn more about provider requirements, benefit plan and the business model to increase interest in participation of service delivery.
- The information in October will consist of review of ASAM levels and will be limited to 40 (currently enrolled providers with Medicaid or the Medicaid managed care plans or those with letters of intent to participate).
- Also in October, the focus will be on Medication Assisted Treatment (MAT) held by VDH. In November, the focus would be on training certain workgroups. Links for webinar registration will be disseminated to the group.
- Dr. Neuhausen provided an overview of the MAT and ASAM trainings. Workgroup approved the use of the Letter of Intent (LOI) and requested for those providers who submitted LOI for MLTSS, to allow that to apply to ASAM and MAT trainings.
- Ms. Jodi Manz provided an overview of Secretary Hazel's Provider Summit this Fall.

ASAM BASED APPROACH TO CONTRACTING A CONTINUUM OF CARE

- Mr. Campbell shared feedback from consultation with Dr. Mee-Lee, who suggests that those who indicate on the attestation form that they have credentials to provide services at the highest level, they should also be able to provide services at the lower levels. This would be challenging for Virginia to implement.
- Dr. Mee-Lee agreed with breakdown of ASAM care and ASAM withdrawal levels and how comparable they are. He also discussed the importance of managing the authorization of the appropriate level of care and stepping down to the lower levels.
- Discussions continue with CMS regarding the parity rule, as conflicting messages are being sent.

MAGELLAN OVERVIEW OF CREDENTIALING/CONTRACTING PROCESS (RTC)

- Mr. Campbell reviewed the draft attestation form that would be used for managed care plans in credentialing providers to ensure they are applying the ASAM Criteria.
- The workgroup discussed options for streamlining the process such as using a single repository such as Magellan.
- NCQA allows for credentialing oversight as well, but members stated it was challenging, as the process is very complex for small number of Residential Treatment Center (RTC) providers.
- Danyelle Smilovich with Magellan provided overview on Magellan's process on credentialing/contracting process for RTC. Ms. Smilovich stated some State accounts with Magellan use ASAM. Those States that apply the ASAM also have licensing requirements for ASAM, which Virginia currently does not have.
- The workgroup posed the question if DBHDS licensing would include ASAM in the licensing process. Dr Booker with DBHDS Licensing confirmed reviewers do not check for ASAM criteria on licensing reviews. Mr. Saltzberg stated ASAM LOC and DBHDS licensing requirements on RTC are not comparable. Mr. Campbell stated the cross walk of ASAM LOC and DBHDS licenses was created to assist plans to see the similarities.

- During the consult with Dr. Mee-Lee, he provided a contact of staff who is developing a ASAM credentialing tool. Virginia will reach out to see what would be involved to get assistance with this tool and determine the costs for potential use.

DISCUSS REVISED ATTESTATION FORM FOR ASAM LOC'S

- Workgroup inquired how providers will know the distinctions between ASAM LOC so they may properly identify which level of service they are licensed for and meet the ASAM criteria.
- The workgroup made a recommendation to identify detail for the ASAM criteria in the attestation form to allow for providers to have a better understanding of what they are attesting to. Failing do so would prompt investigations on providers which could result in inaccurate attestations and retraction of payments, which would ultimately annoy the provider community and cause static.
- The workgroup made another recommendation for development of a cross-reference document that providers could use while completing attestation rather than specifying within the attestation form; and updating this in the DMAS provider manual. DMAS staff added since the provider manuals will not be updated until early 2017, it would need to be addressed in a provider memo if this option was pursued.
- Having detailed ASAM criteria in the attestation form would require plans to do a more extensive review of the current provider network to get a better idea of which services are offered by their providers. Workgroup consensus was to include the ASAM detail within the attestation form so providers will have immediate access to the criteria they are attesting to meet.
- DMAS will continue to develop the attestation form with the addition of the ASAM criteria detail and send out an updated chart with the crosswalk for workgroup to review for the next scheduled meeting.

DISCUSS NETWORK DEVELOPMENT PLANS FOR ASAM LEVELS 2-4

- Plans will work education staff on learning the ASAM requirements so that the next network capacity review will result in more accurate identification of ASAM LOC.

DISCUSSION OF NEXT STEPS, TIMELINE AND PROJECT PLAN

- The attestation form needs to be more specific to include staffing needs by ASAM LOC. DMAS will draft update with addition of the staffing per level of care for ASAM Levels 2/3/4.

The meeting was adjourned at 4:35 PM.