

Workforce Development Capacity

Building 1E: Addiction

Medication (MAT) Prescribing

Clinician Cost Sharing Start Up

Funding

Los Angeles County Department of Public Health

June 25, 2024

Substance Abuse Prevention & Control



Workforce Development

SAPC Home / Providers / Payment Reform / Workforce Development

<http://publichealth.lacounty.gov/sapc/providers/payment-reform/workforce-development.htm>

Capacity-Building

1E. Addiction Medication Prescribing Clinician

Supports financial cost-sharing with Network Providers to recruit, retain and utilize (1 FTE) addiction medication (MAT) prescribing clinician per agency regardless of tier level. Clinician must provide the full range of applicable addiction medication services as outlined in SAPC Information Notice 24-01. Start-up funds for up to 75% of funds to support implementation planning (FY 23-24) and up to 25% once implementation completed (FY 24-25).

1E-1 Start-up of up to 75% of funds disbursed once addiction medication prescribing clinician implementation plan has been approved.

- 1E MAT Prescribing Clinician Cost-Sharing Meeting Video Recording - March 1, 2024
- 1E Addiction Medication Prescribing Clinician Cost Sharing Meeting - March 1, 2024
- 1E MAT Prescribing Clinician Cost-Sharing Meeting Video Recording - March 27, 2024
- 1E Addiction Medication Prescribing Clinician Cost Sharing Meeting - March 27, 2024
- Invoice 1 SAPC FY 23-24 Capacity Building Start-Up Funds Attestation Due 04/19/24
- 1E Instructions for MAT Prescribing Clinician Start-Up Cost Sharing Due 04/19/24
- 1E Implementation Plan MAT Prescribing Clinician Start-Up Cost Sharing non-OTP Due 04/19/24
- 1E Implementation Plan MAT Prescribing Clinician Start-Up Cost Sharing OTP-only Due 04/19/24

1E-2 – Start-Up funds of up to 25% of funds disbursed Year 2- per 40 hours per week of prescribing clinician services. Requires Quarterly implementation updates and verification of addiction medication (MAT) prescribing clinician staffing.

Addiction Medication Prescribing Clinician Funding Opportunity

- Start-up funding is available to all SAPC-contracted treatment agencies
 - Ratio of \$200,000 **per** 40 hours/week of clinician time
 - \$200,000 **per** FTE one-time start up funding spread over two years:
 - \$150,000 **per** 40 hours/week during Year 1 (FY23-24)
 - \$50,000 **per** 40 hours/week during Year 2 (FY24-25)
- Designed to be combined / matched with local agency funds, and sustained beyond two years through SAPC billing for medication services
- Currently capped at a max of \$200,000 (per 40 hours/week) per agency (regardless of Tier)

Addiction Medication Prescribing Clinician Funding Opportunity

- **New** Capacity Building 1E Payment: **Optional and strongly recommended**. This project is for start-up funds. Providers will be paid once an addiction medication (MAT) prescribing clinician implementation plan has been submitted and approved and can be paid before the implementation has been initiated / completed.
- To receive advance funds, complete and submit the designated invoice **along with** the required implementation plan.
- Agencies will need to submit quarterly addiction medication (MAT) prescribing clinician implementation updates for approval to avoid recoupment. Expenditure verification is not required.

Addiction Medication Prescribing Clinician Requirements

- Implementation Plan must include integrating prescribing clinician(s):
 - Physician, Advanced Practice Registered Nurse, Physician Assistant
 - Clinical Pharmacist's scope of practice does not include SUD dx and clinical pharmacists do not independently meet clinician requirements for this incentive program
- Start up funding is available as a ratio to 40 hours/week
- Example: 20 hours/week = $\frac{1}{2}$ of \$200,000 = \$75,000 year 1, \$25,000 year 2

Addiction Medication Prescribing Clinician Requirements

- Prescribing clinician integration requirements
 - Prescribing clinician(s) works as a member of the agency care team
 - Can include more than one practitioner
 - For example, 40 hours/week can include two eligible practitioners working 20 hours/week
 - The clinicians' medication services are billed through SAPC (not through a managed care plan or other payer)
 - Must provide the full range of *applicable* addiction medication services as described within [SAPC Information Notice 24-01](#)
 - Methadone cannot be prescribed through pharmacies; non-OTP clinicians are not expected to provide treatment with methadone directly

- Manuals & Guides
- Bulletins
- Clinical
- Beneficiary
- Contracts & Compliance
- Finance
- CRLA

Contract Bulletins <http://publichealth.lacounty.gov/sapc/providers/manuals-bulletins-and-forms.htm?tm#bulletins>

Close All

Bulletins 2024

Subject	Date
24-02 - Requirements for Ensuring Culturally and Linguistically Appropriate Service <i>(New - May 2024)</i>	 05/16/24
24-01 - Addiction Medication Access in the SAPC Treatment Network	 01/05/24
– Attachment A - Patient Information About Addiction Medications	 01/05/24
– Attachment B - Required Addiction Medications	 04/01/24
– Attachment C - Patient Eligibility for Addiction Medications	 01/05/24
– Attachment D - Administration, Storage, and Disposal of Addiction Medications	 01/05/24
– Attachment E - Addiction Medication Training Requirements for Staff	 01/05/24
– Attachment F - Accessing Addiction Medications in Los Angeles County	 01/05/24
– Attachment G - Incidental Medical Services	 01/05/24
– Optional Policy Template A for Non-Residential Non-OTP Treatment Sites	 01/05/24
– Optional Policy Template B for Residential and Inpatient Treatment Sites	 01/05/24
– Optional Policy Template C for Opioid Treatment Program Sites	 01/05/24

Addiction Medication Prescribing Clinician Requirements

- Prescribing clinician needs to be registered through PAVE as a SAPC-contracted agency practitioner
- Medical evaluation and management care can be provided in-person, through telehealth, and through telephone based on the **patient's** needs
- Medical care provided to patients on-site can be in-person or through telehealth/telephone
- Medical care provided to patients who are off-site can proceed through telehealth/telephone modalities **without** Field Based Services approval
- Medical care provided to patients who are off-site can proceed in person **with** Field Based Services approval

Addiction Medication Prescribing Clinician Requirements

- Prescribing clinician must provide medication services for not less than 20% of their hours per week on-site and in-person:
 - 20% of 40 hours/week = 8 hours/week in-person, on-site
 - 20% of 20 hours/week = 4 hours/week in-person, on-site
 - 20% of 10 hours/week = 2 hours/week in-person, on-site
 - 20% of 5 hours/week = 1 hour/week in-person, on-site
- Agencies are able to adapt the requirements for prescribing clinician time to meet agency and site-specific clinical needs (such as requiring more in-person, on-site prescribing clinician time)

Implementation Plan Components

- Agency current state
 - # and hours per week prescribing clinicians currently providing SAPC-funded medication services (unrelated to this incentive program)
 - Current state of which addiction medications are available on-site and approximation of the count / percentage of patients receiving medication services on-site
 - Confirmation of which residential sites of care (if agency offers residential LOC) already have been licensed to offer Incidental Medical Services (IMS)

Implementation Plan Components

- Proposed future state
 - Proposed hours/week prescribing clinicians to be recruited / integrated (as part of this incentive program)
 - Proposed timeframe for recruitment / implementation of prescribing clinician medication services
 - Delineation of prescribing clinician time allocated to which agency site(s) of care
 - Confirmation that the full range of applicable medications for alcohol, tobacco, and opioid use disorders will be available
 - Estimation of count / percentage of patients who are proposed to receive medication services
 - Plan for applying for Incidental Medical Services for any residential LOCs that don't already have IMS approval

Implementation Plan Components

- Planned implementation steps that include
 - Proposal staff trainings
 - Workflow development
 - Updating P&Ps
 - Documentation plan
- Medical Clinician Participation in SAPC-required meetings, which may include
 - Bimonthly MAT Action Team Meetings
 - Quarterly Medical Director's Meetings

Implementation Plan Components

- Proposed budget for cost-sharing
 - One-time start-up funds are designed to be matched against agency funds
 - Options for cost-sharing funds:
 - Recruitment costs
 - Medical Clinician compensation
 - Licensing needed software and related tools needed to operationalize medication services
 - Staff time needed to complete readiness activities (updating P&Ps, trainings, completing IMS)
 - Confirmation of other funding for medication services secured by agency
 - For example: Sierra Health Foundation's MAT Access Points grant for residential sites of care
 - Expenditure verification will not be required, but to avoid recoupment, provider agencies will need to submit quarterly implementation updates
 - SAPC's rates for medication services permit significant opportunity for revenue to keep services sustainable

Documentation Plan

- Medical practitioners should document through agency's existing documentation systems
- Billing is through existing SAPC billing process in accordance with the latest version of the rates and standards matrix
- For primary providers this may include uploading documentation from a practitioner's existing and external documentation system into PCNX
- Agencies should confirm practitioners either:
 - Have existing 42 CFR Part 2 compliant platform for computerized prescription / order entry, laboratory report review used to deliver integrated medication services
 - Develop their own 42 CFR Part 2 compliant capabilities for computerized prescription / order entry, laboratory report review

Technical Assistance

- SAPC published a duty statement for addiction medication prescribing clinicians and recommendation for implementation plan components ([Pages 17 and 18 here](#)).
- Recruitment resources:
 - CSAM Career Center <http://careers.csam-asam.org>
 - ASAM Career Center <http://careers.asam.org>
 - ACAAM Career Center <http://www.acaam.org/career-center>
 - AOAAM Career Center <http://jobs.aoaam.org>
- IMS Resources Published through SAPC-IN 24-01 [Attachment G - Incidental Medical Services](#)
- Technical assistance is available upon request

UNIT/BRANCH/CONTACT	EMAIL/Phone Number	Description of when to contact
Sage Help Desk	Phone Number: (855) 346-2392 ServiceNow Portal: https://netsmart.service-now.com/plexussupport	All Sage related questions, including billing, denials, medical record modifications, system errors, and technical assistance
Sage Management Branch (SMB)	SAGE@ph.lacounty.gov	Sage process, workflows, general questions about Sage forms and usage
QI and UM	SAPC.QI.UM@ph.lacounty.gov UM (626)299-3531- (No Protected Health Information PHI)	All authorizations related questions, Questions about specific patient/auth, questions for the office of the Medical Director , medical necessity, secondary EHR form approval
Systems of Care	SAPC_ASOC@ph.lacounty.gov	Questions about policy, the provider manual, bulletins, and special populations (youth, PPW, criminal justice, homeless)
Contracts	SAPCMonitoring@ph.lacounty.gov	Questions about general contract, appeals, complaints, grievances and/or adverse events. Agency specific contract questions should be directed to the agency CPA if known.
Strategic and Network Development	SUDTransformation@ph.lacounty.gov	DHCS policy, DMC-ODS general questions, SBAT
Clinical Standards and Training (CST)	SAPC.cst@ph.lacounty.gov	Clinical training questions, documentation guidelines, requests for trainings
Phone Number to file an appeal	(626) 299-4532	
Grievance and Appeals (G&A)	(626)293-2846	Providers or patients who have questions or concerns after receiving a Grievance and Appeals Resolution Letter or follow up with an appeal.
CalOMS	HODA_CalOMS@ph.lacounty.gov	CalOMS Questions
Finance Related Topics	SAPC-Finance@ph.lacounty.gov (626) 293-2630	For questions regarding Finance related topics that are not related to billing issues
Out of County Provider	Nancy Crosby (ncrosby@ph.lacounty.gov)	Out of county provider requesting assistance in submitting authorization for LA County beneficiary & resident Intercounty Transfer / Medi-cal eligibility (MEDS- acceptable aid codes) / Applying for Medi-cal general questions
SASH	(844) 804-7500	Patients calls requesting for service

Discussions/Questions



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