# MSHN Quarterly SUD Provider Meeting

September 12, 2022



### Plenary Session Agenda

- ► Joe Sedlock: MSHN CEO Updates
- Sarah Andreotti: Prevention Media Campaigns
- Rebecca Emmenecker: Narcan Vending Machines
- Dani Meier: Notice of RFI for Isabella & Montcalm Counties
- Heather English: Technology Requests FY23
- ► Tammy Foster: Veteran Navigator Updates



#### MSHN CEO Updates

Joe Sedlock - 989-529-9405

- FY 23 Initiatives
  - Opioid Health Home 10/01/2022
  - Behavioral Health Home ~04/2023
  - Complex Care Management for SUD
- FY 23 Budget (Proposed)
  - Increases in SUD Provider Rates (Regional Rate Schedule)
  - DCW Premium Pay funded through 09/30/2023
  - Continuation of MSHN Regional General Provider Stabilization Program
    - Eligibility criteria and program parameters under review
  - Continuation of MSHN Regional Provider Staffing Crisis Stabilization Program
    - Proposed to continue through 03/2023 with review for continuation through the end of FY 23 near that time.



## Prevention Media Campaigns

Sarah Andreotti



#### Prevention Media Campaigns

#### My Life My Quit Youth Vaping Campaign

- > Funding from COVID Block Grant
- Convened regional workgroup to determine need
- > Running from March 2022 through February 2023
- > RFP completed for Geofencing and Targeted Display ads
- Funding from Tobacco Section to offer additional impressions during June 2022 along with posters and quit line cards







#### Prevention Media Campaigns

#### Gambling Disorder Prevention Campaign

- > Funding from Gambling Disorder Prevention Grant
- > Tagged on to campaign run in NMRE region
- Ran April 2021-September 2022 & November 2021-September 2022
- Geofencing and Targeted Display ads
- > Plan to continue a different version in FY23









Rebecca Emmenecker



#### Narcan

#### What is Narcan?

As most of you know, naloxone (brand name Narcan), blocks opioid receptors, interrupts the effects of prescription painkillers, heroin and other opioids and reverses potentially fatal opioid overdoses.

#### Is Narcan safe?

- Yes, one can <u>not</u> overdose on naloxone/Narcan.
- Narcan/naloxone is ineffective except for those who have opioids in their system.

#### No prescription?

Michigan has a standing prescription order, so no individual prescriptions are needed.





### No pop or chips in this machine... Free boxes of Narcan!

#### **EFFECTIVENESS:**

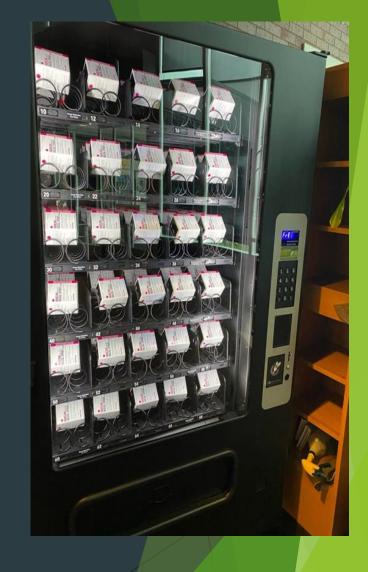
- ▶ Narcan vending machines dispense free Narcan.
- ▶ No questions asked, easy to access.
- Gets the medication into the hands of those who need it.
- Safe and effective.
- Anyone can get a Narcan kit.







- Grant funds available to purchase vending machines.
- Machines cost about \$5,000 with shipping & handling.
- May add other items in machine; such as fentanyl test strips and/or Deterra bags.
- ▶ 60-90 days from order to delivery.
- Free Narcan may be ordered through MDHHS portal (to fill machine).







- Standard Machine Size: 35" x 40" X 72" (however, may be able to find smaller vending machines that would work).
- Dispenses free product.
- No wrap needed, add basic information on outside of machine.
- May add a literature rack on side to include more brochures and information.
- Inserts in packaging to show how to use Narcan.





- Machines track data, to see how many vends took place between each restock.
- Locations could be jails, health departments, hospitals, public libraries, etc.
- ► Locations should be indoors (Should be stored at controlled room temperature **68°F** to **77°F**. Do not freeze or expose to excessive heat above 104°F (40°C).



If you would like more information on Narcan Vending Machines, please contact me at:

Rebecca. Emmenecker@midstatehealthnetwork.org





### Notice of Request for Interest (RFI) for Isabella & Montcalm Counties

Dani Meier



## Notice of RFI for Isabella & Montcalm Counties

### Montcalm County RFI Services

- Withdrawal Management ASAM3.2 & 3.7 LOCs
- Residential Treatment ASAM 3.1, 3.3, 3.5, 3.7 LOCs
- Outpatient MAT ASAM 1.0 & 2.1 LOCs

### Isabella County RFI Services

- Withdrawal Management -ASAM 3.2 & 3.7 LOCs
- Residential Treatment ASAM3.1, 3.3, 3.5, 3.7 LOCs
- Outpatient ASAM 1.0 & 2.1 LOCs

#### RFI response deadline is 9/15/2022 to

Kyle Jaskulka, Contract Manager
Mid-State Health Network
530 W. Ionia, Ste. F, Lansing, MI 48933
kyle.jaskulka@midstatehealthnetwork.org



## Technology Requests FY23

Heather English



### Telehealth Technology Improvements

- Email sent by Rebecca Emmenecker on 9/1/2022 to in-region SUD treatment providers.
- Allowable Technology examples.
- Submit proposals to Rebecca Emmenecker by 10/1/2022 utilizing the Provider Supply Request form.
- Requests will be reviewed for allowable items with MDHHS.
- Requests will go to the November BOD for approval.
- Notified by clinical team after BOD about request approvals and funding available with purchasing and invoicing process.



### Veteran Navigator Updates

Tammy Foster



#### Veteran Navigator Updates

- Community Care with the VA ~ 800 number within 72 hours.
- Connection with intake workers asking the question "have you or anyone in your immediate household served?"
- Range of requests when a veteran is referred such as: transportation, wheelchair ramp, emergency financial resources, or buddy to buddy.



### Treatment Breakout



## Treatment Breakout Session Agenda

- Reporting in REMI
- Provider Contacts for Record Requests
- ► Training Opportunities: EMDR & FASD
- Training Feedback from Providers
- Fentanyl Test Strips, HIV & HEP C Testing
- MDOC Referral Process
- Transportation Supports
- ► FY23 Code Updates: A0100 & T1007
- Overview of Universal Credentialing
- Coordination of Benefits Reporting



### Reporting in REMI

Shannon Myers



#### Treatment Reports

- Treatment Reports will be moved to the REMI system for efficiency, date gathering, and monitoring.
- ▶ Reports live in REMI beginning in FY2023.
  - Reports were previously emailed to the TX reports email.
- Report due dates are in the REMI portal and the contract.
- Reports will be housed in the Provider Portal Dashboard.
  - Document Submission Portal.



#### Treatment Report

#### Reports live in REMI for FY2023:

- ► Charitable Choice
- ► Injecting Drug Users 90% Capacity
- Priority Populations Waiting List Deficiency
- WSS Annual Report
- WSS Child Referral Report



### Treatment Report

Report	Frequency	Due to MSHN	First Report Due in REMI
WSS Annual Report	Annual	11/5 Annually	11/5/2022
WSS Child Referral Report	Quarterly	10/5, 1/5, 4/5, 7/5	1/5/2023
Injecting Drug Users 90% Capacity	Quarterly	10/15, 1/15, 4/15, 7/15	1/15/2023
PPWLD Report	Monthly	15th of the month	10/31/2022
Charitable Choice	Annual	8/1 Annually	8/1/2023



#### Treatment Reports

- Reports will now have to be completed even if there is nothing to report.
  - ► Ensures data accuracy.
    - ▶ Nothing to report versus forgetting to send a report.
  - Reports Impacted:
    - Injecting Drug Users 90% Capacity
    - Priority Populations Waiting List Deficiency
- A TX Report help document is available in the help menu within REMI.



#### Treatment Reports

- Each Report will follow the state requirements.
- Requirements are linked in the help document if needed and can also be found on the state's website:
  - https://www.michigan.gov/mdhhs/keep-mihealthy/mentalhealth/reporting/misc/fiscal-year-2020-sud-non-medicaidreporting-instructions-and-forms
  - Any questions can be sent to the TX Reports email:
    - ► <u>TXreports@midstatehealthnetwork.org</u>



# Provider Contacts for Record Requests

Shannon Myers



#### Provider Contact List

- Coordination of care is critical for treatment success.
  - ASAM Continuum
  - ► GAIN I-CORE
  - Other clinical documents
- Barriers to coordination:
  - Staff turnover
  - Leaving messages on voicemails that aren't monitored
  - Not contacting the central number for an agency



#### Provider Contact List

- Timely care coordination is needed for the best care and outcomes.
- Provider contacts are already available on the MSHN website. This will streamline referral and coordination process for community partners and transferring providers.
- Record request resource will be added to the website.
  - An email request for the contact information will be sent to all providers. Please respond by 10.1.2022.
  - Please ensure the number provided is monitored and not impacted by staff turnover.



## Training Opportunities: EMDR & FASD

Rebecca Emmenecker



### Eye Movement Desensitization and Reprocessing (EMDR) Training

- October 10-12 and November 7-9 (6 full days total)
- Personal Transformation Institute training
- Application required prior to registration
- In-region master level SUD contracted MSHN providers only
- ▶ \$100 registration fee
- ▶ 40 hours MCBAP, Social Work credits
- Agency reimbursed at \$45/hour following completion of training
- ► Limited to 60 attendees
- EMDR Manual by Francine Shapiro shipped following completion of training





## Fetal Alcohol Spectrum Disorders (FASD) Training

- October 6 & 7 (two half days total)
- ▶ 6 hours total; Social Work CEU's, & MCBAP credits
- No cost
- Open registration
- Dan Dubovsky, Trainer
  - ▶ How to improve outcomes by modifying approaches to treatment.
  - Recognizing FASD in the individuals we serve.
  - Prenatal alcohol exposure and the damage it causes.





## Training Feedback from Providers

Rebecca Emmenecker



#### Training Feedback Discussion

- MSHN and training opportunities: grant funding
- Building the toolbox: more tools/more options for services
- What trainings would you like to see?
  - CBT or Trauma-informed CBT, DBT, Auricular Acupuncture, Trauma-Informed Yoga?
  - Other trainings?
    - ► Contact me at rebecca.emmenecker@midstatehealthnetwork.org





# Fentanyl Test Strips, HIV & HCV Testing

Heather English



### MDOC Referral Process

Cammie Myers



#### MDOC Reminders

- As of April 1, 2020, MSHN is responsible for all <u>medically necessary</u>, <u>community-based substance use disorder treatment</u> for individuals under MDOC supervision once those individuals are no longer incarcerated.
  - ► This excluded individuals referred by or in services though Community Corrections-PA511 funded (i.e. local District Court probation).



#### **MDOC Reminders**

- MDOC referrals with the CFJ 306 are Priority Population clients.
  - ▶ 1. Pregnant injecting drug user.
  - ▶ 2. Pregnant.
  - ▶ 3. Injecting drug user.
  - ▶ 4. Parent at risk of losing their child(ren) due to substance use.
  - \*\*5. Individual under supervision of MDOC AND referred by MDOC OR individual being released directly from a MDOC facility without supervision AND referred by MDOC. Excludes individuals referred by court and services through local community corrections (PA 511 funded) systems.
  - ▶ 6. All others.



#### Referral Process

- Supervising agents will securely send the referral forms directly to the providers for Outpatient (OP)/Intensive Outpatient (IOP)/Medication Assisted Treatment (MAT)/Withdrawal Management (WM).
  - Referral forms include the MDOC Form # CFJ 306 and the MDHHS 5515.
  - The clients are able to contact the providers directly- once the documents have been sent.
  - ▶ In order for supervising agents to receive any communication about the results of the referral, a completed release of information (MDHHS 5515 form) needs to be sent with the referral documents.



#### Referral Process

- Residential Services
  - ► Supervising agents will securely send the referral forms directly to the MSHN Utilization Management (UM) Department using the email: <a href="mailto:MDOCreferrals@midstatehealthnetwork.org">MDOCreferrals@midstatehealthnetwork.org</a>
    - ▶ Referral forms include the MDOC Form #CFJ 306 and the MDHHS 5515.
  - ▶ Within 3 business days, the MSHN UM Department will provide a determination to the supervising agent (as long as a complete release is submitted) with directions on what the client will need to do.
  - ▶ If an agent is sending a referral directly to your agency for residential services- please inform them of the process listed above.



#### Referral Process

- OP providers can refer directly to residential without getting a prior approval from MSHN if that is what is recommended after the completion of a full assessment.
  - ► CFJ 306 must be sent to the receiving provider at the to the next level of care (with release).
  - Residential providers receiving these referrals should make every effort to obtain the original assessment that generate the referral to prevent the need for clients to complete another assessment.



#### Referral Form Clarification

- ► The CFJ 306 and MDHHS 5515 need to be sent for a client to be considered a priority population.
- ▶ If a client reports being referred to treatment from a supervising agent and your agency did not receive the formal referral, this client is not considered a MDOC priority population. They would still be scheduled like any other client and would still be subject to Block Grant limitations if they do not have Medicaid/HMP.
- ▶ Any time a client referred to your agency through the MDOC process is being referred to a different provider or level of care, the CFJ 306 must be sent to the next provider (with release). The receiving provider would then be responsible to obtain a new ROI for the supervising agent and provide updates in accordance with the MSHN contract.



### Important Info

- If you are having problems with obtaining documentation or with this referral process in general, please contact:
  - Cammie Myers

Cammie.myers@midstatehealthnetwork.org

517-657-3013

- MDHHS 5515:
  - ► <a href="https://www.michigan.gov/mdhhs/keep-mi-">https://www.michigan.gov/mdhhs/keep-mi-</a>
    healthy/mentalhealth/behavioral/consent/michigan-behavioralhealth-standard-consent-form



## Transportation Supports

Utilization Management



# Transportation for SUD Services

- Not a Medicaid/HMP benefit like medical transportation.
- MSHN provides transportation assistance as funding allows:
  - > To/From Withdrawal Management & Residential
  - Women's Specialty Outpatient/IOP/MAT
- Please refer to Block Grant Benefit Plan on MSHN website for authorization guidelines.



# Withdrawal Management & Residential Treatment

- ▶ <u>A0110: Greyhound Bus Ticket:</u> Provider purchases ticket and submits claim to MSHN for purchase price with receipt.
- ▶ <u>S0215: Mileage:</u> Provider may submit mileage to MSHN if program staff transports client; not reimbursable to client.
- T2003: Gas Card: Gas card can be given to client to assist with travel to/from withdrawal management or residential program when client is using their own vehicle (or friend/family).



# Women's Specialty - Outpatient/IOP/MAT

- ▶ <u>A0110: Bus Ticket (Local)</u> Can be given to client and children for travel to/from treatment and recovery activities.
- T2003: Gas Card Gas card can be given to client to assist with travel to/from treatment and recovery activities when client is using their own vehicle (or friend/family).



## A0100: Non-Emergency Transportation; Taxi (NEW)

- Must be prior authorized by MSHN UM Department.
- Less costly methods of transportation are not available.
- No other withdrawal management/residential options available to client in closer proximity.
- ▶ 1 unit authorized per trip; claim submitted to MSHN for total cost of trip with receipt.



# FY23 Code Updates: T1007

Utilization Management



### T1007: Treatment Planning

- <u>Description</u> Alcohol and/or substance abuse services, Treatment plan development and/or modification
- Provider/Staff Qualifications CADC or CAADC (or approved MCBAP DP); Bachelor's SW; Master's SW or LPC or LMFT; Physician; Psychologist; Nurse or Nurse Practitioner
- Encounter (Not time-based)
- MDHHS SFY22 Behavioral Health Code Charts and Provider Requirements



### T1007: Treatment Planning

- Should be used for initial treatment plan development or periodic treatment plan review/update.
  - Not to be used for case management plans or recovery support plans.
- FY23 Rate: \$117
- Authorization parameters will be added to MSHN Benefit Plans for Medicaid/HMP and Block Grant.



# Overview of MDHHS Universal Credentialing

Amy Dillon



# MDHHS Universal/Uniform Credentialing

- History/Purpose
  - Amendment to MI Mental Health Code <u>330.1206b</u> (<u>PA 282 of 2020</u>) requiring MDHHS establish uniform credentialing program for all community mental health services.
- Project Overview
  - ► MDHHS developed workgroup January 2022
  - Establishing web program for all credentialing applications (Initial and re-credentialing) for all providers and organizations.
  - ▶ Web program requires all required credentialing file documentation to be maintained in the program.



# MDHHS Universal/Uniform Credentialing

- Timeline
  - Development in progress.
  - Program/system testing expected October December
  - ► Implementation 2023
- MSHN seeking feedback from providers.
  - MSHN to send survey for feedback to Credentialing and Clinical Director contacts listed in REMI.



# Coordination of Benefits Reporting

Amy Keinath



## Coordination of Benefits Reporting

Effective October 1, 2022, the Michigan Department of Health and Human Services is requiring reporting of coordination of benefit information for contracted service providers.

- Claims Direct Data Entry
  - CMS-1500 form will be revised to require complete COB entry:
    - ▶ Listing all other payers, including subscriber name and relationship as applicable,
    - ▶ Listing all claim level and line level adjustments, including reason codes and amount.
- 837 Claims Submission
  - ▶ No changes; ensure that all COB loops are included in the 837 file per the companion guide.



# Questions?



### Prevention Breakout



# Prevention Breakout Session Agenda

- ► FY23 Contracts
- MPDS
  - FY22 Closeout and Timeline
  - MBO and Group Name Changes
  - Other Questions
- Reminders and Updates
  - End of Year Reporting
  - FY23 AHR Reporting
  - Synar Update
  - Technology Requests



### FY23 Contracts

Kari Gulvas
Sarah Andreotti
Sarah Surna



### MPDS

- > FY22 Closeout and Timeline
- MBO and Group Name Changes
- > Other Questions



## Reminders and Updates

- End of Year Reporting
- > FY23 AHR Reporting
- > Synar Update
- > Technology Requests



#### Questions





#### Upcoming SUD Provider Meetings

All meetings held via Zoom from 12-2pm

December 15, 2022

March 16, 2023

June 15, 2023

September 21, 2023

