Substance Use Disorder Intake, Screening, & Assessment (SUDISA) Workgroup Meeting Minutes

January 29, 2024, 1:05-2:30 PST

Meeting Recording: <u>Substance Use Disorder Intake, Screening, & Assessment (SUDISA) Committee - YouTube</u>

Michelle Martinez, HCA	Bethany Barnard	Phillip Maes
Theresa Adkison, HCA	Brandy Branch	Molly Martin
Arthur Andrews, HCA	Elizabeth Bridges	Beth Myers
Meta Hogan, HCA	Tiffanie Colombini	Katie Ramos
Michael Langer, HCA	Dallas Delagrange	Cara Reidy
Ruth Leonard, HCA	Charnay DuCrest	Carrie Reinhart
Gayle Martinsen, HCA	Alicia Egan	Amy Ruge
Sarah Melfi-Klein, HCA	Dominique Fortson-Jordan	David Sapienza
Melanie Oliver, HCA	Trina Gallacci	Bergen Starke
Eliza Tharp, HCA	Sarah Gillard	Wayne Swanson
Tony Walton, HCA	Ana Hartu	Adriane Tillery
Rachel Downs, HCA	Jackielyn Jones	Angela Tonkovich
Brianna Peterson, HCA	Qudsia Khan	Lashonti Turner
Cathy Assata	Garrett Leonard	Daniel White

Meeting Attachments

- Meeting Agenda
- Draft Charter
- Draft Norms and Expectations

Introductions

After welcoming notes were conducted by Michelle Martinez, SUDISA Workgroup Members Elizabeth 'Beth' Myers, Dallas Delagrange, Eliza Tharp, Adrienne Tillery, Theresa Adkinson, Brianna Peterson, Ana Hartu, Charnay DuCrest, Gayle Martinsen and Angela Tonkovich provided an introduction to the workgroup.

Scheduling & Materials Sharing Survey - Review Results

Michelle Martinez, Senior Project Manager and SURSAC Administrator, with the Washington State Health Care Authority, shared the results of their survey conducted at the kick-off meeting. Survey results included:

- Meeting Frequency:
 - o 2x/Month, 90-minutes each
- Day/Time:
 - Mondays 1:00PM-2:30PM & Wednesdays 9:00AM-10:30AM (for holiday weeks)
- Openness:
 - Open to public attendees and observations
- Public Feedback:
 - o To be collected by SUDISA Administrator and shared/discussed at meetings
- Sharing of meeting recordings/materials:
 - Posted publicly following review by Public Disclosures

SUDISA Draft Charter

Michelle Martinez shared the Draft Charter for the SUDISA Workgroup including length of workgroup, problem statement, and the background for formation of the workgroup. Michelle went over the current objectives as outlined by the group's purpose, measures of success as developed by the workgroup, and shared that if members have things to add to the charter, then can under Section 5: 'Projective Objectives and Measures of Success'.

Questions and Comments for Michelle Martinez RE: SUDISA Draft Charter

Q: Who determined what was considered "in scope" or "out of scope" relative to this project? As it seems like it may stray away from what is in the legislature.

A: This was determined by the legislature and what could be done within our respective state. The Steering Committee also participated in working out the scope of the project. They will confirm with executive leadership to ensure it is not straying away from the original intent of the project.

Comments:

 A member shared that they believe a barrier to accessing treatment is on part of payers and the taxing amount of time it takes to receive financial approval to pay for treatment.

- A member stated that assessments themselves can prove to be part of the issue because they
 are different for each region and not uniformly standardized. This is something the workgroup
 could explore doing.
- A member shared that "standardization" can also limit client's ability to access resources.
- A member shared that they recently started a new process wherein assessments are completed within 24 hours. It has been helpful as clients have been able to walk in and get scheduled for appointments the next day, which has increased their ability to access resources and recovery support faster.
- A member shared that the measure of success "The assessment process can be completed in 10 minutes or less", would apply to screen for eligibility for an assessment, but not the assessment, itself. The assessment length has more to do with the amount of follow-up paperwork that takes place after client engagement. Sometimes, this time increased based on whom the payor is within each assessment that is completed.
- A member shared that the measure of success "Recommendations are trauma-informed" is crucial because trauma is different for each client. Higher rates of trauma means there should be a more thorough assessment to ensure appropriate levels of care are given to each client.
 - A member further shared that paperwork that is currently required to get individuals into more urgent care, such as detox, is very lengthy and has become a significant time barrier for both clinicians and clients.
- A member shared that they would like to add that medications be started prior to assessment process. At times, medication itself is enough to stabilize individuals long enough to conduct and assessment and ensure greater chances of follow-through with recommended services.
- A member shared they would like to ensure payors support the client's access to care and are not becoming barriers, themselves.
- A member wanted to clarify on the In-Scope bulleted item: "Changes to Washington's Medicaid (Title XIX State Plan) wanting to be clear about what parts are considered "in scope" vs. "out of scope" because it has developments from both state and federal entities. They want to ensure there is no confusion or issue on this bullet.

SUDISA Draft Committee Norms and Expectations

Michelle Martinez shared the Draft Committee Norms and Expectations of the SUDISA workgroup.

Questions and Comments for Michelle Martinez RE: Draft Committee Norms and Expectations

Q: Workgroup members voted to not allow public participation during the meetings. Does this also extend to the chat function?

A: It extends to the chat.

Next Steps

- 1. Before the next meeting, Michelle will send out final versions of Committee Norms and Expectations and Charter.
- 2. Next meeting, and full schedule, will be delivered via email prior to the next meeting.