Behavioral Health Provider Listening Session

Tuesday, August 27

1:30 to 2:30 p.m.



Teams listening session norms

- Mute yourself if you are not speaking.
- Raise your hand if you want to speak.
- This time is for you. Ask questions, give comments, ask for help if you need it.
- ▶ If we cannot answer your question on this call, we will follow up after the webinar.



Disclaimer

- This meeting is being recorded.
- This recording is open to public disclosure.
- Please do not disclose any private or confidential information.
- Slides from the call are posted in the chat.



Agenda

Subject	Who
Welcome Section Highlights SUD Px and MH Promotion Adult SUD Treatment Recovery Support Prenatal - 25 Diversion and Reentry Adult & Involuntary Services	 Melissa Thoemke Sonya Pipek Tony Walton Maureen Bailey Diana Cockrell Nicole Mims Alex Stoker
SUDISA Summary	Michelle MartinezKelley Sandaker
BH Workforce and Community Colleges	Rex RempelDan Ferguson
Provider Q/A	• All

DBHR updates: SUD Prevention/MH Promotion

- We held our annual Coalition Leadership Institute (CLI) last week where we brought together over 100 of the Community Prevention and Wellness Initiative (CPWI) providers as well as some other community partners. We learned from:
 - the University of Washington's Social Development Research Group,
 - ▶ The P-25 section on CBHWG strategic plan and Washington Thriving,
 - ▶ the Friends for Life campaign,
 - the WSU Impact Lab,
 - and many other incredible presentations from other partners.
- The annual 2024 Prevention Summit is coming up! This year, it is hosted at *The Westin* in downtown Seattle, October 30-31. Registration is open and can be found here: https://preventionsummit.org/.



For more information visit the Athena Forum



DBHR updates: Adult Substance Use and Treatment Section

- American Society of Addiction Medicine (ASAM) 4th edition training has started
 - ▶ The State will adopt the 4th edition of the ASAM Criteria in January of 2026.
 - ▶ While there is no cost for the trainings, participants must purchase <u>The ASAM Criteria</u> <u>4th Edition book or online version.</u> NAADAC CEUs are offered for completing the trainings.
 - ► Please contact <u>SUDdbhrproviderhelp@hca.wa.gov</u> if you have any questions!
- The Drug Overdose Surveillance and Epidemiology (DOSE) Dashboard Updates
 - ► From the Centers for Disease Control and Prevention, the new dashboard reflects 8 overdose syndromes (fentanyl, methamphetamine, cocaine, and benzodiazepine and all drugs, all opioids, heroin, and all stimulants), with % change by month/year.
 - ▶ More information about the DOSE System is available <u>HERE</u>.
- International Overdose Awareness Day (IOAD) is August 31, 2024
 - ▶ IOAD is the world's largest annual campaign to end overdose, remember without stigma those who have died, and acknowledge the grief of those left behind.
 - ► For more information about IOAD and a partial listing of events across Washington State can be found here: https://www.overdoseday.com/usa/washington/

 Washington State Health Care Authority

DBHR updates: Recovery Support Services

- The Peer Employment Database launched in June. The database provides a centralized resource for individuals seeking employment in peer support and organizations seeking to hire peer specialists. The database aims to enhance workforce development by promoting careers in peer support, ensuring that individuals with lived experience can contribute to recovery services and support others on their journey to wellness. Washington Peer Jobs
- The Passageways to Recovery through Employment and Education fondly known as PREE, launched in December of 2023. This program serves people in recovery from substance use disorder. As of June 30, 2024, 357 people enrolled with 59% of enrollees identified as coming from underserved communities. 110 employment or education starts have been reported so far.
- Through Blake funding, HCA has provided SUD housing subsidies focused on the 5 most populous counties in the state. These subsidies were launched in January and through June 30,2024 there were a total of 1,046 enrollees with 41% of enrollees identified as coming from underserved communities. 84% of people served were either homeless and secured housing or diverted from eviction.



DBHR updates: Prenatal – 25 Behavioral Health

Mobile Response and Stabilization Services (MRSS) webinar series

Mobile Response and Stabilization Services (MRSS) is a crisis response customization for children, youth and their families is being implemented statewide with teams already in 17 counties. Join experts, youth, caregivers, and community partners to learn more.

Each webinar includes a presentation, panel discussion, and Q&A, open to all, whether you're new to MRSS or experienced.

Learn more and register!

Washington Thriving, formerly known as the P-25 Strategic Plan Advisory Group

Ways to Engage!

- Join the mailing list
- Participate in discussion groups and engagement opportunities
- Visit and share the Washington Thriving website (www.washingtonthriving.org) with your networks to learn more about resources and upcoming events!

Additional questions?
Contact the <u>Project team</u>



DBHR updates: Diversion and reentry

- The Pioneer Human Services SUD Peer Bridger Pilot Program is currently funded for 8 SUD-specific Peer Bridger positions. With the additional funding they will be able to widen their scope and provide these indispensable supports to people in over twenty counties. Gapfunding was obtained for this program to continue until June 30, 2025.
- The Diversion and Reentry Section continues to facilitate and coordinate patient and social worker education sessions at both ESH and WSH with the goal of providing insight that will help connect civilly committed patients to community-based services and supports as close to admission as possible.
- The Peer Respite model was showcased recently at a collaborative conference for community members which included sharing how Peers Bridgers and Peer Respites have made important connections in the Spokane region.
- In-person and virtual provider outreach sessions were conducted for Foundational Community Support (FCS) providers in eastern and western Washington. These sessions introduced FCS providers to the new FCS Hospital Liaisons. They are giving providers the opportunity to inform important processes in an effort to facilitate the best possible collaboration across multiple complex systems.



DBHR updates: Adult and Involuntary Services

- The second Program of Assertive Community Treatment (PACT) Symposium for nurses and prescribers was held on August 15th. The symposium had 58 attendees.
- Aristo IBHTF in Renton is open and accepting referrals

Questions?



SUBSTANCE USE DISORDER INTAKE, SCREENING, AND ASSESSMENT (SUDISA)

Work Group Recommendations Overview

August 27, 2024



Background & Objectives

- 2022: Substance Use Recovery Services Advisory Committee (SURSAC) recommended the development of a work group to address barriers to SUD assessments across the state as part of the Substance Use Recovery Services Plan
- 2023: WA State legislature passed 2E2SSB 5536, a section of which directed HCA to establish the SUDISA work group and gave it two primary objectives
 - Broaden the work force capable of administering SUD assessments
 - Make the assessment process as brief, low-barrier, an person-centered as possible—including only what is necessary to manage utilization and initiate care



Work Group Members

- Work group members include care providers, payors, people ho use drugs, individuals in recovery from substance use disorders, and other individuals recommended by HCA
- Additional areas of representation were decided by an internal steering committee
- Meetings are held for 90 minutes, twice a month, and are open to public attendance and observation
- Public feedback is always welcomed via email to the SUDISA work group administrator, who shares the input with the work group members



Shortening the length of an assessment

- The work group considered the length of an SUD assessment and options for shortening it
- The ASAM 4th Edition Criteria established a new Level of Care assessment available to expedite treatment initiation, which will be adopted by HCA in January 2026
- As these changes address the length barrier for SUD assessments prior to treatment initiation, the work group's efforts have been focused on other ways to make the SUD intake, screening, and assessment process as low-barrier and person-centered as possible



Broadening the Work Force

Recommendation 1: Increase the Medicaid fee schedule (reimbursement rates) for behavioral health services so that behavioral health service providers, facilities, and organizations providing substance use disorder treatment can offer higher wages to substance use treatment providers, incentivizing more people to choose this career path



Reducing Barriers

- Recommendation 2: Education campaign to clarify state requirements related to intake and assessments that must be administered prior to providing different types of behavioral health services
 - ► E.g., education to prescribers re: ScalaNW program and removal of X-Waiver
 - ► E.g., providing training re: who can perform SUD assessment within scope (i.e., social workers) according to State Plan section 13 D.



Reducing Barriers

- ▶ Recommendation 3: Expand specific services that can be provided prior to completion of assessment, especially among peers (in the current system, peers can only be reimbursed when working with individuals in crisis situations or after an intake is completed)
 - ► E.g. Providing outreach services to individuals before an SUD assessment or diagnostic appointment
 - ► E.g., Assisting individuals with reminders and transportation to an SUD assessment appointment



Reducing Barriers

Recommendation 4: Expanding remote access pathways to receiving an SUD assessment and increasing virtual treatment options



Engagement with Associations

Washington State American Indian and Alaska Native Opioid Response Workgroup (AI/AN ORW)	Office of Tribal Affairs and Monthly Tribal Meeting
WA State Hospital Association (WSHP)	Washington State Medical Association
Association of Alcoholism and Addiction Professionals (AAP)	Washington Association of Addiction Treatment Professionals
Washington State Association for Addiction Professionals (WAADAC)	WA Association For Community Health
Designated Crisis Responders (DCR) Association	Washington Recovery Alliance
SUD College Educators	Office of Behavioral Health and Advocacy
Association of WA Health Plans (AWHP)	Washington Council for Behavioral Health
Washington State Office of the Insurance Commissioner (OIC)	Washington State Association of Drug Court Professionals (WADCP)



Questions?

Do you have any clarifying questions about these recommendations?

(We'll take feedback, ideas for improvement, and concerns with the next slide)



Feedback for Work Group?

Please share your thoughts about these recommendations, including your support for any of them, any ideas you have for improving them, and/or concerns that you want the work group to consider.



Contact

Contact Kelley Sandaker, SUDISA administrator

Email: Kelley.Sandaker@hca.wa.gov

SUDISA Work Group website: <u>SUD Intake, Screening, and Assessments</u> (<u>SUDISA</u>) work group | Washington State Health Care Authority



Questions?



BAS Behavioral Healthcare programs

Dr. Rex Rempel, Program Director



Relevance for you







Rex Rempel, DSW, LICSW









Development of baccalaureate programs at WA community colleges

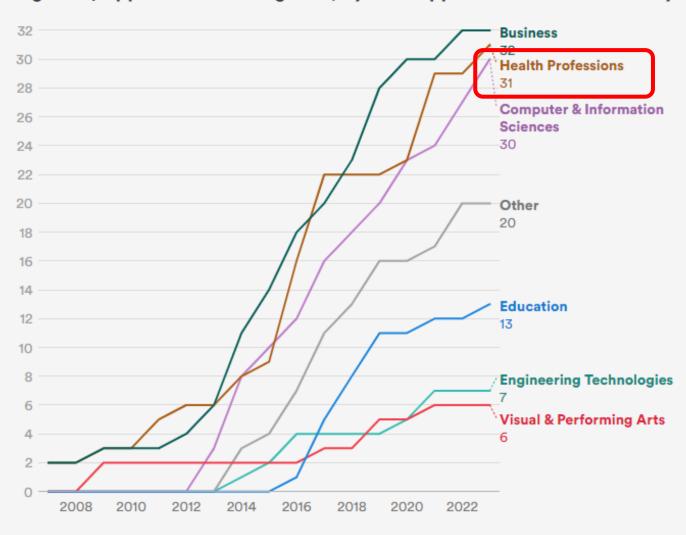


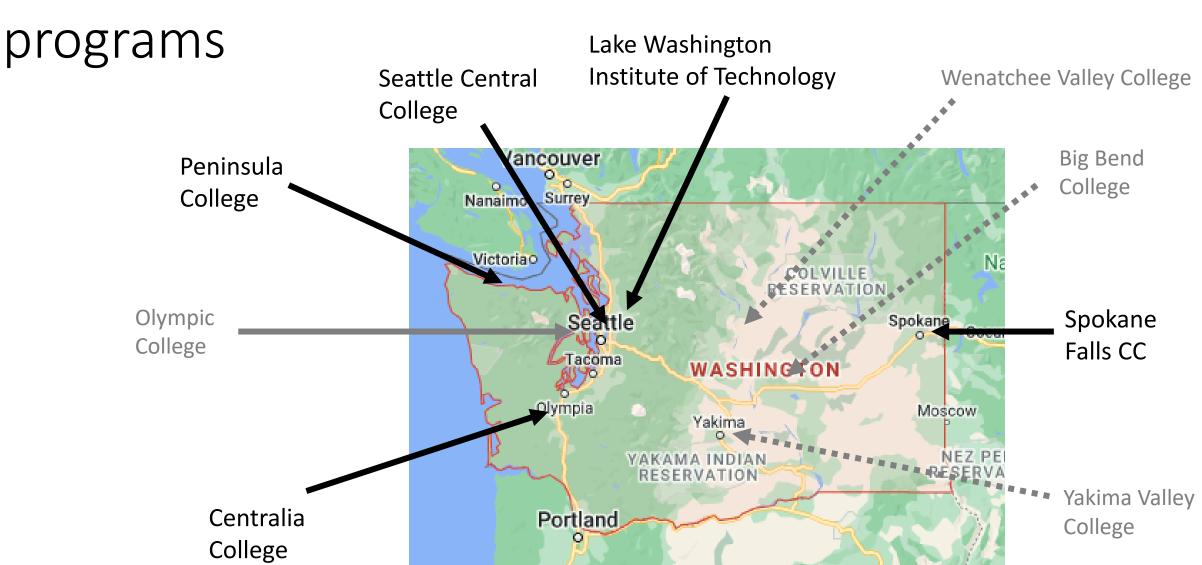
Figure 1 | Approved CCB Programs, by Year Approved and Area of Study

Note: Areas of study correspond with the U.S. Department of Education's Classification of Instructional Programs (CIP) code.

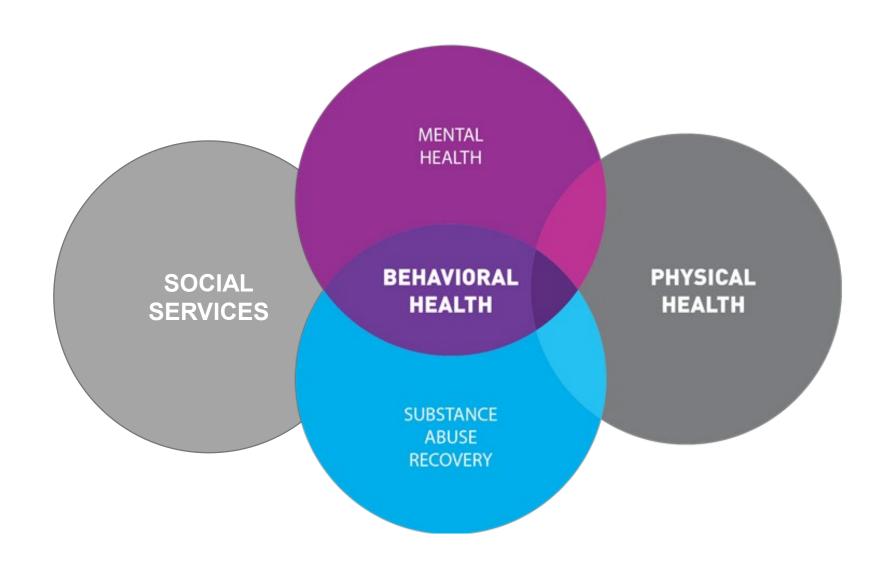
Source: Community College Baccalaureate Association National Program Inventory, supplemented with program proposal data from the Washington State Board for Community & Technical Colleges. • Get the data • Download image

NEW AMERICA

BASBH



Curricular focus



How we're doing it

Curricula

Competencies

Job descriptions



Courses

America

Social & Tx of Mental Assessment & Case Cultural **Goal Planning** Disorders Management **Diversity** Behavioral Wellness & Therapeutic **Ethics** Self-Care Skills Neuroscience Tx of Substance Use Poverty in MH Systems

Issues

Substance Use

Issues

of Care

Clinician faculty

Wendi Nancarrow, LICSW AAS Chair

Rex Rempel, DSW, LICSW BAS Director

Sharon Raz, PhD
Letha Fernandez, LMHC
Timothy Burdick, PHD
Vanessa Villavicencio, EdD
Diane Swanberg, LICSW















Practicum: 270 hours, 3 quarters



























Modality & length of program

In-person & online evening cohort

Hybrid evening cohort

In-person & online cohort

2 years

6 quarters

2 years

6 quarters

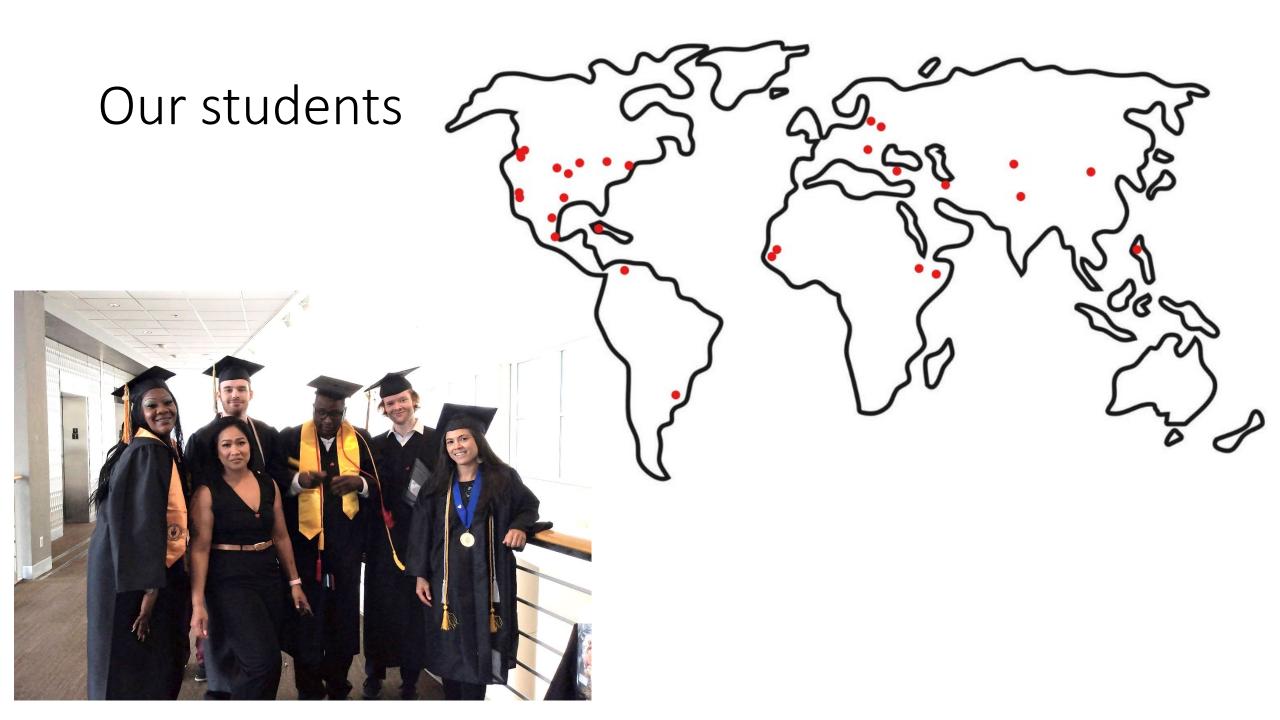
2 years

6 quarters







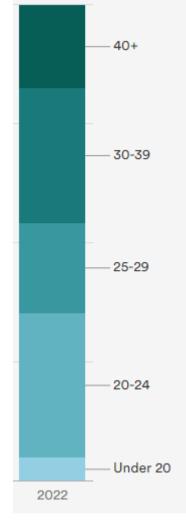


Our students

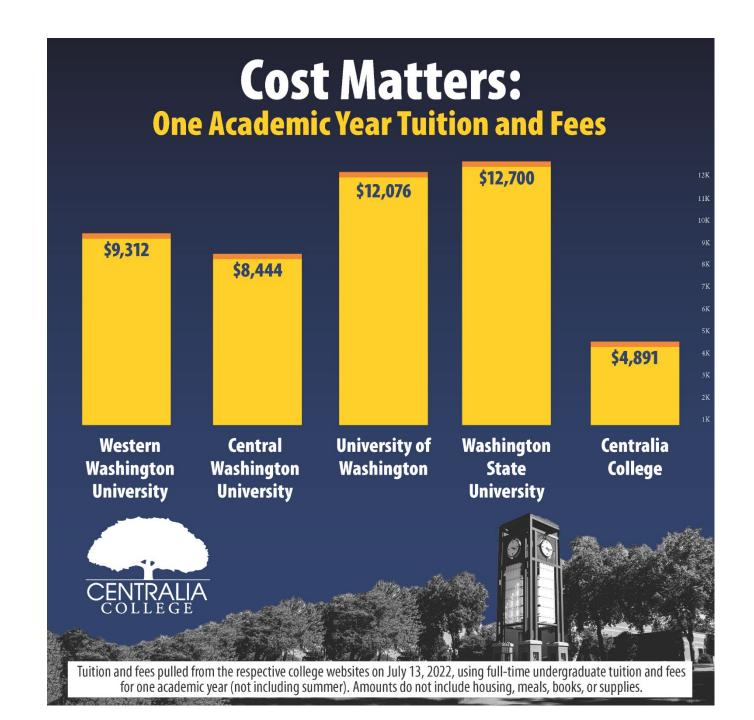


BIPOC American Indian/Alaska Native Not Reported Black/African American Hispanic/Latine Asian/Pacific Islander Two or More Races White 2022

Adult learners



Low student costs



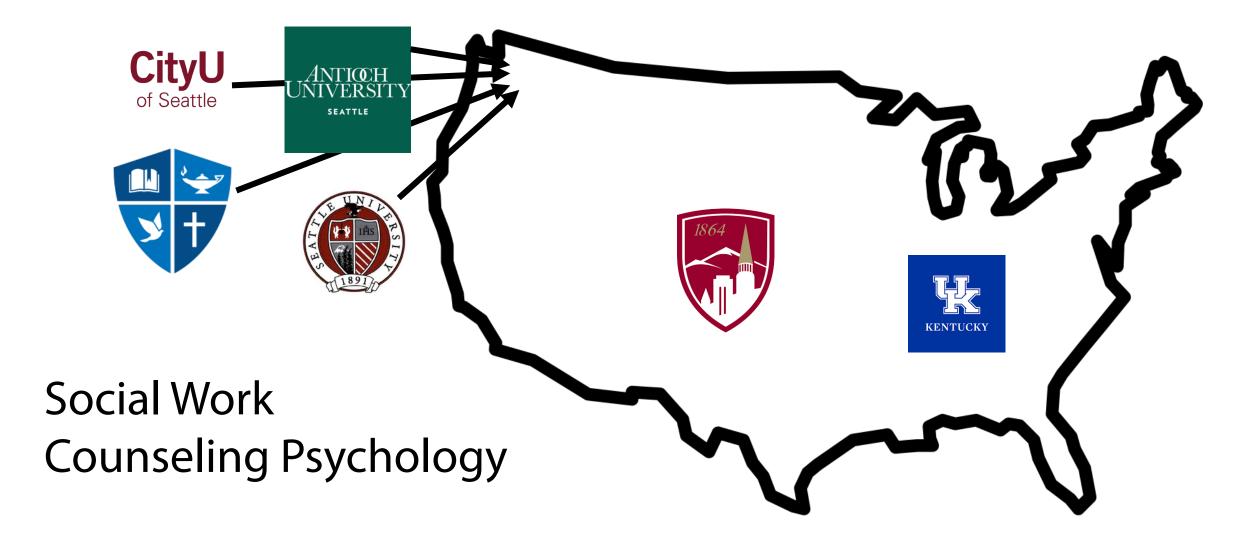
Employer feedback

- Well-prepared employees
- Person-centered
- Strong therapeutic skills

Graduate feedback

- Well-prepared for work & grad school
- Well-supported in school
- Small classes
- Cohesive environment

Graduate degree enrollment



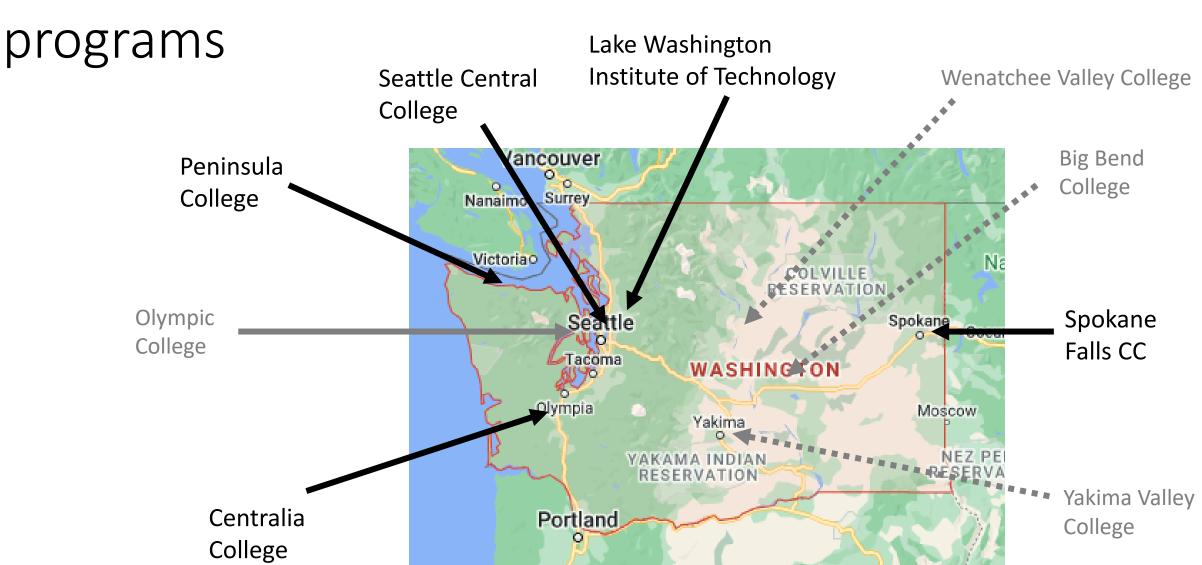
Opportunities for partnerships



BH Agencies

- Internships
- Well qualified, diverse job applicants
- Affordable degree completion for employees
- Affordable SUDP credentialing for employees
- Career education for clients

BASBH



Questions?

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