DDAP UPDATES





Pennsylvania Department of State

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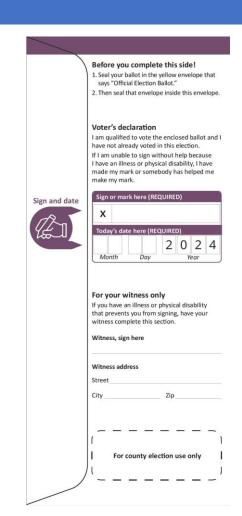
Danie Bendesky Special Assistant for Strategic Initiatives <u>dbendesky@pa.gov</u>



About mail ballots

- No-excuse mail-in voting
- Deadline to apply is
 5pm on October 29
- Sign your name, date when you sign, and seal your ballot

Learn more: vote.pa.gov/mailballot





Official Ballot Papeleta oficial 官方選票

Your ballot must be received by 8 p.m. on election day at your county election board

antes de las 8 p.m. el dia de las elecciones en la junta electoral de su condado 您所在縣的選舉委員會必 須在選舉日晚上8點前收 Franklin County Elections Department 4321 Sample Avenue Sample, PA 99999-1234



Vivian Voter 1234 Crest Blvd. Sample, PA 99999-4321

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Pennsylvania
Department of Drug and
Alcohol Programs

Voters needing assistance

Designated Agent Form For voters with disabilities who need help Department of State picking up or returning mail voting materials VOTER, complete this section First name address where you are Address You may wish to keep a copy photo on a phone is OK). Designated agent's nam-Give the completed form I have a disability and require assistance with voting by mail, I authorize my designated agent to pick up and return my absentee or mail-in ballot materials. I understand that false statements are punishable under 18 Pa. C.S. § 4904. agent. **Do not** If I am unable to sign without help because I have a disability, I have made my mark or so put the form in the vellow has helped me make my mark. your completed Today's Date DESIGNATED AGENT, complete this section After you complete this form, consider making a copy (a photo on a phone is OK). You must have I agree to serve as the designated agent for the voter named above. The voter has authorized me to pick up or return their absentee or mail-in ballot materials. I affirm that I have not marked or changed any of the voter's absentee or mail-in ballot materials, unless the voter directed and authorized me to do so. I understand that false statements are punishable under 18 Pa. C.S. § 4904. Today's Date form in the contains the

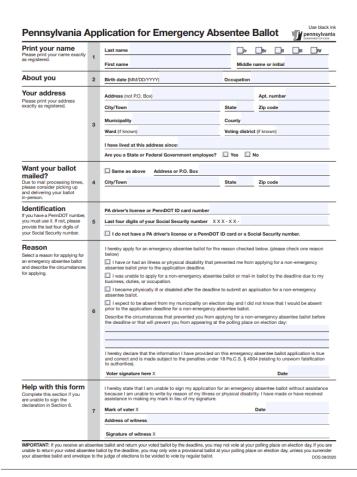
- Designate an agent to assist individuals with disabilities
- Accessible voting systems and accessible ballots
 - Find out more about the voting system at your polling place at <u>vote.pa.gov/VotingSystems</u>

Learn more:

vote.pa.gov/AccessibleVoting



Emergency Absentee Ballots



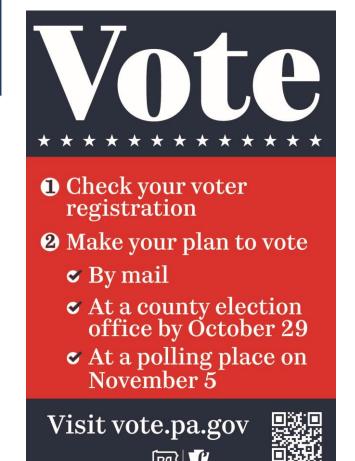
- Unexpected illness, disability, or absence
- 5pm Oct. 29 8pm Nov. 5
- Can request authorized representative to assist
- Make applications available

Learn more:

Information on Emergency
Absentee Ballots



Make a plan to assist



- Check registration status at vote.pa.gov/Status
- Check mail ballot status at vote.pa.gov/MailBallotStatus
- *ID* required for first-time voters
- Contact county election offices at vote.pa.gov/County



Disclaimers

- Alignment with The ASAM Criteria is required of drug and alcohol treatment providers that receive funding for providing treatment services under agreements with Single County Authorities and/or Managed Care Organizations.
- <u>DDAP stresses the importance of reviewing the ASAM Criteria text in its entirety, attending the ASAM training, and reviewing the resources available through DDAP including trainings and documents.</u>



Learning Objectives

- Provide DDAP updates from the Bureaus of Quality Assurance and Administration, County Program Oversight and Program Licensure
- Provide information on the final rule to 42 CFR Part 8 and impacts to licensing
- Understand how changes to 42 CFR part 8 align with the ASAM Criteria



Poll Question

Tell us your role:

Executive Director

Clinical Director

Clinical Supervisor

Counselor

Administration

Medical Staff

Support Staff (e.g. CRS)

Case Manager

DDAP

SCA

MCO



Today's Presenters

- Jenn Newell, Director, Bureau of Quality Assurance & Administration
- Jeff Geibel, Division Director, BCPO, Division of Prevention, Treatment, and Recovery
- Sue Duff, Division Director, BCPO, Division of Program Monitoring
- Jodi Skiles, Director, Bureau of Program Licensure
- Vicki Jankowski, LPC, CAADC, BQAA, Quality Improvement



Bureau of Quality Assurance & Administration

- 2nd Round of the SUD Student Loan Repayment Program
 - ~410 grantees!
 - Licensed treatment providers, SCA-contracted prevention, case management and recovery support providers
 - \$75,000 for full-time employment, \$37,500 for part-time
 - 2 year service commitment
 - Follow-up surveys to all grantees from both rounds post-commitment



Bureau of Quality Assurance & Administration

- State Opioid Response (SOR) III
 - Second year of the 2-year grant ends 9/29/24
 - No-Cost Extension approved by SAMHSA through 9/29/25
- SOR IV
 - SAMHSA approval received for 3 year grant which began 9/30/24
 - ~\$83M / year for use on prevention, intervention, harm reduction, treatment, and recovery support services



- Case Management and Clinical Services Manual Update: Harm reduction
- Harm Reduction = intervention approach using person-centered, evidence-based public health strategies to assist people who use drugs (PWUD) in minimizing the negative consequences associated with substance use
 - Not coercive
 - Meeting people where they are Support based on what each person identifies as their personal needs and goals
 - Opportunity to engage people and save lives
- Outreach should be proactive in offering people who use substances support to access health and social services, including additional SUD prevention, treatment, and recovery services



Examples of DDAP-funded Harm Reduction Services:

- Access to low-barrier services -- mobile and street outreach programs
- Overdose prevention education and distribution of overdose prevention supplies -opioid reversal medication and personal drug testing strips
- Education about health issues -- HIV, STIs and viral hepatitis and distribution of safer sex kits and FDA-approved home test kits
- Distribution of safer smoking and injection supplies to reduce infections and transmission of infectious diseases -- wound care supplies, sharps disposal containers, and/or written materials about safer injecting and smoking practices
 - Does not include sterile needles, syringes, pipes and drug paraphernalia



- Case Management and Clinical Services Manual Update: Low Barrier Care
- Low barrier care is a model of treatment that seeks to minimize the demands placed on individuals and makes services readily available and easily accessible. Aspects of the low barrier model can be seen in case management services.



- Some examples of approaches for the low barrier model are:
 - Multidisciplinary care teams;
 - Integrating SUD screening & assessment;
 - Involving those with lived experience;
 - Educating primary care physicians and other providers;
 - Developing collaborative care protocols;
 - Offering flexible treatment options;
 - Eliminating service engagement preconditions;
 - Addressing stigma;
 - Establishing referral networks and evaluating



- Division of Program Monitoring SCA Monitoring
 - DDAP monitors all 47 SCAs annually
 - Monitoring required per federal requirements
 - The monitoring cycle consists of 4 phases incorporating document reviews, SCA reporting in SDS and monitoring visits
 - Quarterly fiscal reporting
 - Pre-submission of contracts, policies, invoices
 - Virtual and Onsite visit annually to each SCA
 - Currently finishing monitoring of FY 23-24
 - Onsite visits complete for 45 of 47 SCAs
 - Year-end fiscal reports



- How DDAP's Monitoring of SCAs impacts Providers
 - Fiscal reporting SCAs must have timely invoices from providers in order to meet DDAP's quarterly fiscal reporting timeframes
 - Provider contracts SCAs are required to keep provider contract information updated in SDS
 - Rate setting DDAP has requirements for SCAs to set inpatient and outpatient rates
 - Provider monitoring SCAs are required to monitor all contracted providers in their counties
 - Pass through requirements from federal funding sources
 - Invoice reviews by DDAP
 - Providers are required to provide case notes



Compulsive and Program Gambling Program

- Treatment: 1-800-GAMBLER
 - Provided through Grant Agreements between DDAP and Providers
 - Screening for problem gambling behaviors is a required component of Level of Care Assessments for SUD clients

Prevention

- Provided through SCAs
- New initiatives
 - Case Management coming in 2025
 - Enhanced training for prevention and case management
 - Residential Treatment



Bureau of Program Licensure

- Mobile Medication Units
- Central Registry
- Federal OTP Regulatory Update- 42 CFR part 8



Bureau of Program Licensure

- Mobile Medication Units-
- Licensing Alert issued in 2022 explaining process
- Gaudenzia, Coal Township was the first MMU in operation
- Several others in process throughout Pennsylvania



Bureau of Program Licensure

Central Registry-

- PA is working towards obtaining a system to support OTPs with Administrative burden by procuring a CR
- Single system that extracts data from the OTPs EMR
- Checks dual enrollment
- Can coordinate with individuals when emergencies such as facility closure arises.
- Can coordinate with PDMP



PAs Response to the Updated Federal Regulations for Opioid Treatment Programs

- 42 CFR part 8
- DDAP issued Licensing Alert 07-2024 granting statewide exceptions to parts of 28 Pa code 715
- Regulation Reform-in process



28 Pa. Code § 715.9(a)(1) – The Department will allow an exception to the rule that a person must be 18 years of age to receive MOUD provided that the OTP gets written consent from the client in accordance with 42 CFR § 8.12(e)(2).



28 Pa. Code § 715.9(a)(4) – The Department will allow an exception to the rule that a person must be dependent on a narcotic drug for at least one year prior to starting MOUD provided that the OTP has a trained person to diagnose the client using medical criteria in accordance with 42 CFR § 8.12(e)(1) and documents the reason for admission for MOUD treatment in the record.



• 28 Pa. Code § 715.12 – The Department will allow an exception to the rule requiring written consent provided that the OTP gets informed consent from the client verbally in accordance with 42 CFR § 8.12(e)(1) and documents it in the record.



• 28 Pa. Code § 715.14(a) – The Department will allow an exception to testing a person's urine every month provided that the OTP randomly conducts a saliva or urine test on each person a minimum of eight times in a year in accordance with 42 CFR § 8.12(f)(6).



• 28 Pa. Code § 715.15 – The Department will allow an exception to the rule requiring a doctor to decide the dosage level for a person provided that a qualified practitioner within their licensed scope of practice to prescribe or dispense MOUD decides the dosage based on an individualized determination in accordance with 42 CFR § 8.12(h)(3)(ii). Pennsylvania laws governing the practice of medicine permit qualified practitioners to perform and sign the initial assessment but also require that any order for methadone treatment shall be made only by a physician. See Medical Practice Act of 1965, 63 P.S. § 422.13(c.1)(7); Osteopathic Medical Practice Act, 63 P.S. § 271.10(g.2)(1)(vii); and The Professional Nursing Law, 63 P.S. § 218.2(c.1)(8)



• 28 Pa. Code § 715.16. Take-home privileges – The Department will allow an exception to the rule requiring time frames for take-home medications provided that the OTP approves take-home medications only if the benefits are greater than the risks in accordance with 42 CFR § 8.12(i).



• 28 Pa. Code § 715.19(1-3) – The Department will allow an exception to the rule requiring an OTP to provide mandatory minimum amounts of psychotherapy each month based on the patient's time in treatment. Provided the OTP delivers adequate counseling and psychoeducation to each patient as clinically necessary and mutually agreed upon. Patient refusal of counseling shall not preclude them from receiving MOUD in accordance with 42 CFR § 8.12(f)(4)(i).



• 28 Pa. Code § 715.24(1) – The Department will allow an exception to the 180-day limit for detoxification services provided that the OTP allows a person to reduce MOUD at a mutually agreed-upon rate in accordance with 42 CFR § 8.12(e)(3).



42 CFR Part 8 Resources

- Questions regarding 42 CFR part 8: RA-licensuredivision@pa.gov
- Link to Licensing Alert
- Link to 42 CFR part 8
- Link to Licensing Page on DDAP website



ASAM Resources

Questions regarding aligning with the ASAM Criteria and suggestions for future webinar topics:

RA-DAASAM@pa.gov

ASAM Resources

ASAM Transition (pa.gov)

Next Call

Next TA Call: November 4th

