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CENTER for INTEGRATED
HEALTH SOLUTIONS

**Integrated Care:
Incorporating Substance
Use Treatment Providers
as Part of Your Care Team**

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Today's Discussion

- **Workforce Trends**
- **Drivers of increased focus on addiction treatment**
 - Affordable Care Act (ACA)
 - Mental Health and Substance Use Parity
 - Medication Advances
 - Payment Reform
 - Grant Requirement
- **Implications for hiring SUD professionals**
 - Settings
 - Clients
 - Skills/Considerations
- **Resources**
- **Questions**

Current Trends in Healthcare

- Triple Aim Focus (cost/pop. health/customer focus)
- Accountable Care
- Multi-disciplinary Team-based Care Approaches
- Continued Focus on Use of EBP (e.g., MAT)
- Provider Consolidation
- Increased Focus on Workforce Roles for People in Recovery & Their Families

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Service Delivery Changes

Behavioral health and prevention services are a key component of the future of health care...

Recommended screens from USPSTF

- Alcohol Misuse Screening and Behavioral Counseling Interventions (B rating for adults)
- Screening for Depression (B rating)
- Tobacco Use and Tobacco-Caused Disease, Counseling and Intervention (A rating)
- HIV screening (A rating for those at increased risk and pregnant women)

Drivers of Integration



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Affordable Care Act

SUD treatment and prevention services are a key component of the future of health care...

- The ACA includes substance use disorders as one of the ten elements of essential health benefits.
- Affordable Care Act result in a significant increase in the need for addiction treatment professionals who are capable of providing care for individuals with substance use disorders in a variety of healthcare settings.
- Most members of the safety net may have some sort of coverage, including mental health and substance use disorders.
- Under the new law, in new plans and policies, preventive services with a U.S. Preventive Task Force grade of A or B will be covered with no cost sharing requirements.

Substance Use and Mental Health Parity

- The Mental Health Parity and Addiction Equity Act requires insurers that pay benefits for mental health and addiction treatment to make those benefits equal to their reimbursement for medical and surgical care.
- Enforcement of this law will change the nature of provider networks and service offerings.



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Advances in Medication



Advances in Addiction Treatment Medications

Over the past decade, the Food and Drug Administration approved three new medications for the treatment of substance abuse disorders:

- Buprenorphine - to treat opioid addictions in 2002
- Acamprosate - to treat alcohol addiction in 2004
- Extended-release naltrexone - to treat alcohol addictions in 2006 and opioid addiction in 2010



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Advances in Addiction Treatment Medications

- New medications for treatment of addictions that are administered in primary care settings, e.g., buprenorphine and injection naltrexone
- Detoxification and induction for patients receiving new medications are receiving attention; new models for induction/medical education centers are emerging.
- In integrated care we also need to focus on medication management that includes psychotropic medications for co-occurring mental disorders as well as medications for other chronic health conditions.

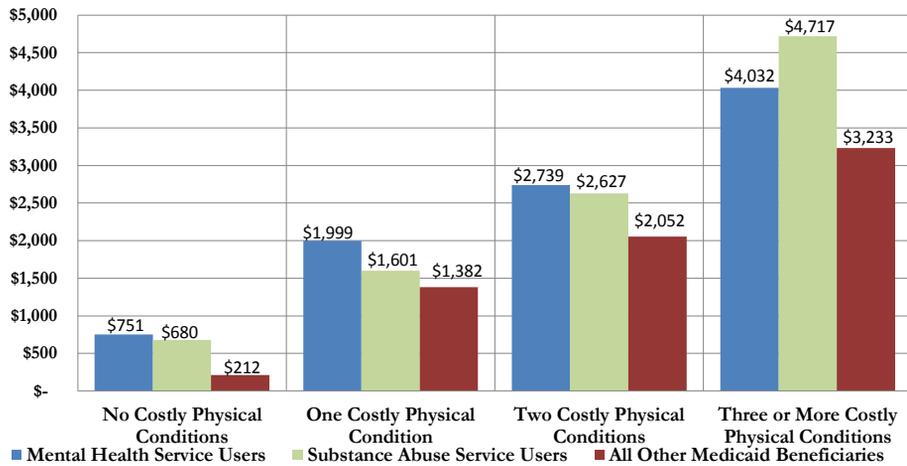
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Payment reform

ACA-related service delivery and payment reforms that incentivize rapid screening and access to treatment.



Substance Use Increases Costs

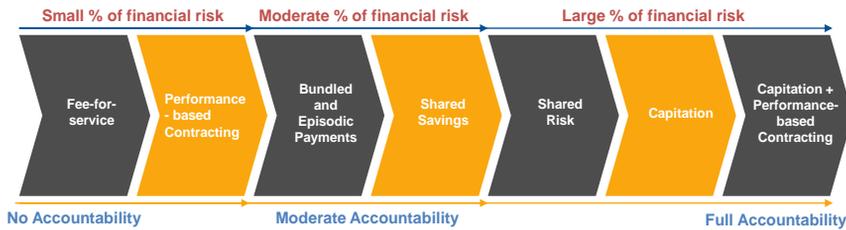


SAMHSA. (2010). *Mental health and substance abuse services in Medicaid, 2003: Charts and state tables*. HHS Publication No. (SMA) 10-4608.



Compensation Continuum

In selected provider arrangements based on provider readiness, we are supporting financial risk, accountability, and utilization management practices.



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Cohort 8 Requirement

When developing an integrated treatment team, grantees must include the following members at minimum:

- Primary care provider
- Nurse care coordinator
- Integrated care manager
- Peer wellness coach
- **Co-occurring/substance use disorder counselor**
- Other: pharmacist, nutritionist/dietician, dentist, occupational therapist, etc.

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So what are the hiring implications of this for going forward?



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Different Locations

Non-traditional treatment settings

Many of the behavioral health screens and preventive services can be provided in community-based settings:

- Emergency Rooms
- Community Health Centers
- Schools
- Infectious-disease Clinics
- Hospitals
- **Integrated Care Settings**

New Clients

The ACA provides an opportunity to offer behavioral health services to more people with more varied behavioral health histories:

- “Harmful users” vs. “Abuse or Dependence”
- Substance users with multiple chronic health conditions
- Co-Occurring SUD and MH



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Different Skills

In order to provide treatment services providers will need a more diverse skill set. Providers should be well versed in:

- Specific knowledge of addiction disorders
- Brief counseling techniques (MI, brief cognitive therapy, solution focused therapy, etc.)
- Knowledge of the relationship between substance use and other health conditions
- Care coordination
- Addiction treatment medications
- Other EBPs

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Different Skills Continued

- Ability to work in a team-based environment
- Knowledge of screening, early intervention and prevention activities
- Knowledge of primary care and mental health medications
- Co-occurring SUD and MH disorders training
- Wellness/recovery coaching

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MH/SA Counseling Course Requirements

Course Requirement	Substance Abuse	Mental Health
Drug/alcohol related	87%	19%
Counseling, Treatment, client education	71%	97%
Professional ethics and responsibility	71%	97%
Screening, Assessment, Appraisal	58%	96%
Case management	39%	2%
Social/cultural foundations, diversity	29%	85%
Health Issues and Diseases	29%	4%
Crisis Management/Intervention	23%	4%
Human growth and development	19%	96%
Family and couples therapy	10%	19%
Abnormal behavior/psychopathology	6%	65%
Measurement, research, evaluation	3%	95%
Career and lifestyle development	3%	71%
Average # hours	317.87	789.38

Dilonardo, Joan. "Workforce Issues Related to Physical and Behavioral Integration Specifically Substance Abuse Disorders and Primary Care: A Framework." Not Published, 2011.



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Staffing Considerations

Understanding of roles and responsibilities within the care team is critical to success. Considerations include:

- What are my needs related to SUD?
- What types of services will this person provide?
- What type of provider needs to provide the service (Drs., nurses, behavioral health specialist, peer specialist, etc.)?
- Are they licensed or credentialed?
 - ✓ Can they bill for services?
- What is the skill and comfort level of team members providing each services?

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Staffing Considerations

- What type of in-service or advanced training do I need to have in place to ensure high quality care?
- What additional training do other members need on SUD?
 - ✓ Can this staff member provide that training?
- Where do I recruit for the staff I need?
- What additional skills does this staff member need in order to be successful?

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Credentialing and Licensure



Open Discussion: Let's hear from You

What are some of the other skills you believe are necessary to work in an integrated care setting?



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Final Thoughts

- Assessing your needs related to SUD will create the framework for an effective hire
- Staff members skills should drive desired outcomes
- Continuing support will be necessary
- Hiring an SUD professional **does not** mean that other staff members no longer need to be trained in SUD treatment
- Addressing SUD is an integral part of effective integrated care.

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Resources

Center for Integrated Health Solutions (CIHS)

<http://www.integration.samhsa.gov/>

International Certification & Reciprocity Consortium (IC&RC)

<http://www.internationalcredentialing.org/cred101>

The Addiction Technology Transfer Center Network

<http://www.nattc.org/home/>

NAADAC - The Association for Addiction Professionals

<http://www.naadac.org/>

Core Competencies for Integrated Behavioral Health and Primary Care

http://www.integration.samhsa.gov/workforce/Integration_Competencies_Final.pdf

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Questions



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