

CA Hub and Spoke System (CA H&SS) Overview

Definitions

- **Contractor:** The lead entity over the CA H&SS. The Contractor may be a NTP, Medication Unit, Federally Qualified Health Center (FQHC), or county.
- **Hub:** A Department licensed NTP or Medication Unit.
- **Spoke:** Either (1) a federally waived prescriber who prescribes and/or administers buprenorphine, or (2) one or more federally waived prescribers and a MAT team consisting of a licensed health practitioner and/or licensed behavioral health professional to perform duties that do not require a prescribing license. A Spoke may consist of individually waived professionals, FQHCs, or SUD treatment providers. NTPs and MUs cannot be Spokes.
- **Subcontractor:** The individual or entity that contracts with the Contractor to perform services for the H&SS.

Who can apply for the grant?

Grant applicants could be either Hubs or Spokes as long as they comply with requirements as specified in the Request for Applications (RFA) and Grant Scope of Work (SOW). Requirements can be found on the DHCS website at the following link:

<http://www.dhcs.ca.gov/individuals/Pages/State-Targeted-Response-to-Opioid-Crisis-Grant.aspx>

Applicants must demonstrate their capability by providing an overview of how their system will work (including a description of how the applicant will recruit and oversee spokes), and how the applicant will enact the following five phases of implementation: Service Preparation, Initial Deployment of Hub Services, Initial Deployment of Spoke Services, Full Implementation of all Hub and Spoke Services, as well as Sustainability.

What can grant funds be used for?

Grant funds shall be utilized as a fund of last resort as eligible individuals must secure and use Medi-Cal funds. The contractor shall use all other sources of revenue available to provide services under the CA H&SS and shall therefore assist individuals with health insurance applications as well as enrollment for eligible, uninsured patients. The contractor shall consider whether individuals may be eligible for other benefits such as those available for veterans or seniors.

Grant funds may be used to pay for medication costs including all FDA-approved medications for MAT when no other funding source exists. Hubs in non-participating Drug Medi-Cal organized delivery system waiver counties may use grant funds for costs associated with buprenorphine prescriptions (professional services and on-site buprenorphine dispensing). Grant funding limitations and restrictions can be found in Section 8 of the SOW.

Who is responsible for grant oversight?

The contractor shall be subject to monitoring by DHCS for compliance with provisions of the grant agreement. Such monitoring activities include but is not limited to the inspection and auditing of the contractor's treatment services, patient files, management procedures, books, and records, as DHCS deems appropriate. Records substantiating invoiced expenditures must be kept by the contractor for a minimum of one-year following termination of this agreement.

Audits shall be conducted at any time during contractor's normal business hours and refusal of the contractor to permit access to physical facilities and/or inspection of any documents, files, books, or records necessary for DHCS to complete its monitoring and auditing activities shall constitute an immediate material breach of the grant agreement thus providing sufficient basis to terminate the agreement for cause.

What is required for compliance with the grant?

- **Qualification Requirements:** In counties with a DHCS licensed NTP or Medication Unit (MU), only the NTP or MU can submit an application. However, in counties without a licensed NTP, the applicant may be an out-of-county NTP, SUD provider, FQHC or county. All Hub and Spokes must obtain or be currently enrolled in Drug Medi-Cal or Fee-for-Service Medi-Cal as well as remain in good standing throughout the contract period.
- **Service Requirements:** Contractor shall be responsible for provision of the following required services as outlined in the SOW:

Required Services	Overview	SOW Reference
Outreach	Development of a community outreach plan that minimally addresses elements identified in the SOW. Coordination/participation in local opioid coalitions within its county and identification of at least one staff member who shall attend all DHCS CA H&SS Steering Committee Meetings.	Section 7(A)
Treatment Services	Includes but not limited to services for assessment of opioid use disorders, counseling, case management as well as coordination of referrals for housing, insurance, and entitlements such as food or income assistance, and travel needs.	Section 7(B)
Data Collection and Performance Measures	Collection of data elements for CA H&SS patients.	Section 7(C)
Reports	Quarterly submissions of data reports, performance measures and invoice expenditures to DHCS.	Section 7(D)
Evaluation	Participation and collaboration in evaluation of the CA H&SS model by the University of California, Los Angeles (UCLA).	Section 7(E)
Training	Identification of staff to participate in initial one-day statewide orientation, learning collaborative meetings, statewide MAT trainings (including administrators) as well as UCLA clinical trainings (20% of contractor’s clinical staff).	Section 7(F)
Invoices	Submitted quarterly to DHCS contract manager with actual expenditures from previous quarter for personnel, outreach, treatment services, miscellaneous services, as well as all subcontractor expenditures. Contractor may shift funds between expenditure categories up to 5% without DHCS approval however shifts greater than 5% of total projected expenditures identified on CA H&SS proposed budget must receive approval from DHCS prior to provision of services.	Section 7(G)
Subcontracting	Contractor shall subcontract with spokes that meet minimum qualifications of having a waived prescriber with a federal Data 2000 waiver, as well as any form of Medi-Cal certification including Fee-for-Service and/or Drug Medi-Cal certification prior to entering subcontract. Independently waived physicians must have Medi-Cal certification within one year of entering a subcontract. At minimum, contractor’s subcontract shall require spokes provide services as outlined in Section 7(H)(2) of the SOW.	Section 7(H)