SUMMARY OF MEETING
Substance Use Disorder Drug MediCal
Waiver Advisory Group
Department of Health Care Services
1500 Capitol Avenue, Auditorium, Sacramento
February 13, 2015

Overview
The Department of Health Care Services (DHCS) is seeking an 1115 Demonstration Waiver for the Substance Use Disorder Drug Medi-Cal (DMC) Program. The overall purpose of the Waiver is to create a model that will provide an Organized Delivery System of Substance Use Disorder (SUD) services. This Waiver will be an amendment to California’s existing section 1115 “Bridge to Reform” Waiver.

Waver Submission Update
DHCS formally submitted the Waiver amendment to the Centers for Medicare and Medicaid Services (CMS) on November 21, 2014. CMS has 120 days to render a decision. DHCS is currently working closely with CMS on the amendment submission. DHCS is also working with the Substance Abuse and Mental Health Services Administration (SAMHSA) regarding areas SAMHSA can assist with California’s Organized Delivery System.

Draft State/County Contract
Don Braeger, Division Chief from DHCS, presented the proposed draft State/County contract. Since all, except for Exhibit A, are standard boiler plate contract exhibits, Don provided an overview of Exhibit A.

The stakeholders articulated concerns regarding carrying over the pitfalls of Mental Health State/County contract into the proposed DMC State/County contract. Some of issues stated were:
- Tracking the call to and from the 1-800 number
- Funding to build a strong infrastructure for network adequacy
- Language in the contract regarding adequate capacity needs to be revisited.

Stakeholders were encouraged to review the proposed draft State/county, and send their feedback via email to MHSUDStakeholderInput@dhcs.ca.gov.

DHCS State Implementation Plan
Marlies Perez, Division Chief from DHCS, presented the proposed draft DHCS State Implementation Plan. The document captured draft implementation activities for DHCS to complete.
Stakeholders requested clarification regarding the strategy used to select the regional implementation phases. DHCS responded that regions were chosen due to the continuum of care readiness and familiarity with the ASAM Criteria. It was pointed out that detoxification services are not mentioned in the State implementation. DHCS confirmed that more discussion needs to happen on this topic. DHCS discussed with stakeholders that during each phase of implementation, regional meetings with the implementing counties will be conducted. Discussions also occurred regarding the availability of Vivitrol for DMC beneficiaries.

DHCS announced that SAMHSA has approved the use of block grant funds for Recovery Residences. A DHCS Information Notice will be released in the next month outlining more information. Some of the input received by stakeholders pertaining to Recovery Residences:

- Housing tied to treatment could be problematic when a client leaves treatment and does not want to leave the Recovery Residence.
- Counties would like to discuss best practices regarding county level certification requirements for Recovery Residences.
- A stakeholder process to discuss the most effective approach to implement Recovery Residences.

**Next Steps**

DHCS encouraged the Stakeholders to review the draft State/County Contract and submit their comments by March 13, 2015. A Waiver Advisory Group conference call will occur on March 23, 2015, to receive input and review comments.

Agendas and handouts are available at [http://www.dhcs.ca.gov/provgovpart/Pages/MH-SUD-UpcomingMeetings.aspx](http://www.dhcs.ca.gov/provgovpart/Pages/MH-SUD-UpcomingMeetings.aspx)

All stakeholders are encouraged to submit comments to: MHSUDStakeholderInput@dhcs.ca.gov