



Meeting Minutes

Treatment, Health Systems, and Research Subcommittee of the Governor's Council on Substance Abuse Prevention and Treatment

December 1, 2023, Approved

Attendees:

James Becker (co-chair), James Berry, Jorge Cortina, Emma Eggleston (co-chair), Michael Kilkenny (co-chair), Jim Krantz, Leigh Levine, Hallie Morgan, Jan Rader, Rebecca Roth

Opening:

Dr. James Becker (co-chair) provided welcome and opening remarks of this meeting of the Governor's Council on Substance Abuse Prevention and Treatment, Treatment, Health Systems, and Research Subcommittee. The meeting was called to order on Friday, November 17, 2023 and was conducted by Zoom conference. A quorum was present to approve November meeting minutes. Jan made the motion for approval and Rebecca seconded the motion. The purpose of the meeting was to finalize goals and strategies for the 2024 State Plan.

Agenda:

Review of 2024 Goals, Strategies, and KPIs

Rebecca noted that making recommendations and requesting information as subject matter expertise and act as a subcommittee within these parameters, producing and capturing meaningful work across the state that can get done.

Goal 1:

- Rebecca emphasized the need for a goal centered on formulating recommendations for providers and state partners to overcome treatment barriers. KPIs should include requesting a Medicaid provider survey for billing codes and crafting recommendations based on data from KPIs 1 and 2.
- Additionally, Dr. Barry suggested incorporating a payment model strategy for co-locative, collaborative care is essential, with a focus on advocating for a uniform payment system. This approach aims to ensure clinicians are incentivized through adequate compensation, promoting active engagement in providing treatment.
- Dr. Becker and Dr. Koester's previous discussion involved the creation of a 10-15 item questionnaire for providers across the state. The questionnaire aims to gather information about services aligning with a co-located service model. Dr. Becker will initiate the compilation of a comprehensive list reflecting key elements of an effective treatment system.

Goal 2:

- Dr. Becker aimed to enhance the effectiveness of the goal but expressed concerns about potential setbacks. Dr. Kilkenny emphasized the importance of integrating drug user health into mainstream healthcare, advocating for ethical treatment of infectious diseases, and establishing support systems for preventable and treatable diseases. This involves creating administrative support systems and setting treatment standards within the existing healthcare framework. Recommendations were considered for the decriminalization of these diseases, although political

feasibility was a concern. The focus shifted to working within healthcare systems, encouraging clinicians to treat individuals with compassion using existing protocols and tools.

- Dr. Levine emphasized the need to educate primary care providers on treating Hep C/HIV and creating a welcoming environment for patients seeking help. Community outreach was identified as a strategy for a more robust response. Funding sources, particularly through the FQHC system, were deemed crucial. Dr. Levine explored billing processes to streamline operations.
- Dr. Becker and Dr. Kilkenny discussed redirecting the goal towards integrating people into primary care, removing the infectious disease component. With telehealth and established systems, outreach team activities became billable services. Although outreach to specific populations incurred additional costs, the disorder was recognized as not unique to individuals with challenging social determinants of health.
- Dr. Cortina identified an opportunity to incentivize screening and treating infectious diseases during residential treatment for SUD. SB 4119 aimed to make payers responsible for quality but was deemed unworkable. There was potential for revising the legislation, focusing on a pay-for-performance approach for residential treatment with a specific emphasis on SUD treatment. A collaborative model was proposed to address basic physical health needs alongside providing care for SUD.

Goal 3

- Rebecca highlighted the existence of multiple educational platforms (such as ATI at WVU, Brad Hall's addiction conference, and BBH's polysubstance training). The question arose: how can we enhance the recommendation and outreach for these platforms?
- Dr. Berry acknowledged the progress made in the last five years in disseminating educational offerings for SUD. While efforts to strengthen and expand these initiatives are crucial, there is also a workforce challenge. Insufficient numbers of individuals, particularly behavioral health providers, are entering the field as needed. Additionally, retaining these professionals proves challenging due to perceived inadequate compensation. The focus should be put on education and retention strategies tailored to address these workforce challenges.

Next Steps:

- Rebecca will distribute an updated version of goals and strategies for the 2024 plan following the subcommittee's review.

Adjournment:

Dr. Becker closed the meeting by thanking all subcommittee members for their attendance. The subcommittee will meet again in the new year.