



CALIFORNIA OPIOID MAINTENANCE PROVIDERS

DHCS Has Not Responded To Comments From COMP Regarding The Proposed Bridge To Reform 1115 Waiver Amendment Terms And Conditions For California's Drug Medi-Cal Program

Submitted by California Opioid Maintenance Providers (COMP)

November 10, 2014

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California has developed arguably the most robust network of opioid addiction treatment programs in the world. This success has been hard-won through decades of patient advocacy, policy-maker and public education and passion to help others despite the historical and persistent stigmatization and political and social opposition to this modality of treatment. The Legislature identified the Drug Medi-Cal program as a priority during the worst past budget years and realigned it to the counties with the explicit caveats that the state would retain authority to establish uniformity of rules, rates and direct state contracts. These explicit caveats are reversed in the current draft Special Terms and Conditions for the Narcotic Treatment Program benefit as part of the Drug Medi-Cal waiver. COMP strongly opposes this delegation of responsibility.

The current network of providers, and thus access to life-saving care and the treatment safety net, has been protected by federal law and a permanent injunction in California which directed the state to ensure beneficiary access. This robust access is now being threatened by a decision by the Department of Health Care Services to delegate responsibility for the Drug Medi-Cal program to 58 different counties. The state is proposing to transmute a program with uniform state rules to one where there could be 58 different systems. While the program is an opt-in waiver, the state's goal is to establish it statewide.

COMP has actively participated in each Waiver Advisory Group (WAG) meeting, submitting comments and data throughout the process. Most recently COMP submitted comments on the Draft Special Terms and Conditions for the 1115 Bridge to Reform Waiver Amendment to fundamentally change the DMC program in California. Despite presenting compelling data and evidence to support our points, there have been no changes to the Draft Special Terms and Conditions to address our comments nor has the Department offered any response or explanation for the COMP points. Moreover, on April 29, 2014, we submitted comments to the Department explaining that we were concerned that the minutes of the WAG meetings failed to accurately reflect the content of the meetings and specifically requested that the minutes explicitly include our opposition and rationale (see attached).

Again, DHCS has provided no response to our comments. Other groups also echoed this concern about lack of responsiveness to stakeholder comments during the most recent Waiver Advisory Group meeting on November 3, 2014.

Specifically, COMP submitted written comments in five previous broad position papers (see attached) discussing access and funding concerns as well as a document detailing concerns with 10 particular sections of the Draft Special Terms and Conditions (see attached), as follows:

- Section 1.b. Delivery System;
- Section 4.a.ii. Responsibilities of Counties for DMC-ODS Benefits;
- 4.a.iii. Medication Assisted Treatment Services;
- Section 4.a.v.ii DHCS Appeal Process;
- Section 4.b. Authorization;
- Section 4.c. County Implementation Plan;
- Section 4.e. DMC Certification;
- Section 5 DMC-ODS Center State Oversight, Monitoring and Reporting and Section 6.a DMC-ODS County Oversight, Monitoring and Reporting; and
- Terms and Conditions Not Described, especially reimbursement models and details about counties that do not opt-in to the waiver.

Despite our comprehensive and detailed comments, submitted specifically after the release of the Special Terms and Conditions and more broadly in five previous position papers, DHCS has not added or changed any language to address our concerns. Nor has the Department provided any substantive response or explanation to our concerns.

To review very briefly the core concerns of COMP with the DHCS's lack of response to the issues raised during the WAG meetings and in our written communications regarding the waiver: (1) service only in the county of residence; (2) failure to address historical evidence of discrimination and limitation of access that will be exacerbated by selective contracting for NTPs; (3) extreme limitations on provider and beneficiary appeals; (4) lack of direction from DHCS to counties to ensure efficient, evidence-based funding methodologies.

Thank you for your attention to this matter. We look forward to continuing to discuss program improvements and request that this response be included in any written documents summarizing the stakeholder process.

cc: Amitai Schwartz, Esq.