

January 27, 2015

Angela Garner  
Deputy Director  
Division of State Demonstrations and Waivers  
Center for Medicaid and CHIP Services, CMS  
7500 Security Boulevard, Mail Stop S2-01-16  
Baltimore, MD 21244-1850

**Re: Proposed California Amendment to Bridge to Health Reform  
Demonstration (No. 11-W-00193/9), Drug Medi-Cal Organized  
Delivery System Waiver**

Dear Ms. Garner:

I write on behalf of the 315 patients who receive substance use disorder treatment services at our opiate treatment program located at 234 N Magnolia, El Cajon CA 92020. We are strongly opposed to sections of the California Bridge to Reform Demonstration (No. 11-W-00193/9) Amendment for Drug Medi-Cal Organized Delivery System Waiver, submitted by the California Department of Health Care Services. Our concern, based on 34 years, is that waiving federal access protections and granting Sand Diego county authority to establish reimbursement rates will result in decreased access to critical, life-saving treatment services.

Specifically, the current proposal will waive beneficiary freedom of choice, equality in amount, duration and scope, state wideness and reasonable promptness, some of which form the basis of a lawsuit 20 years ago called Sobky Vs. Smoley. As a result of the lawsuit, significantly more people have entered treatment and beneficiaries can access medically-necessary treatment on demand, without the waiting lists that were standard practice before the lawsuit. This waiver is likely to overturn that lawsuit and cause the California and Sand Diego County to regress back more than 20 years. We ask that CMS *NOT* do anything that may undermine the permanent injunction that was based on overwhelming evidence of county efforts to limit access. Instead, we suggest CMS require California to carve-out opiate treatment providers from this waiver. Such carve-out will not preclude San Diego County from contracting with our program and offering OTP services to residents of San Diego County.

The El Cajon Treatment Center has been in operation since 1980. We offer the community detox and maintenance services for those afflicted with opiate addiction. We are currently serving 315 patients. We employ 10 full time staff members and 3 part time. Our patient population is diverse and clinical excellence

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is a priority for all of our staff. Approximately 75% of our patients are funded through Medical, many of whom could not afford treatment on their own. We do what we can for the community through patient engagement, family involvement in treatment and participating in community events.

Health care reform (the Affordable Care Act) has significantly increased access to OTP services. This waiver will undermine the intent of the ACA.

The proposed appeals process for providers whose contract are terminated is superficial and extremely limited, only allowing appeals when a county determines they have an adequate network, but not in the case of a county that simply wants to limit funding or a county that simply wants to use a pretext to reduce access. Moreover, there are no metrics for determining network adequacy. After twenty years of success, California's proposed Organized Delivery System would now give back primary responsibility to choose providers, to set rates, and to control access to narcotic treatment programs to all California counties, including those that illegally denied care for many years.

In summary, El Cajon Treatment Center requests that narcotic treatment programs be exempted from the Organized Delivery System waiver for the above stated reasons.

If you would like more information, please do not hesitate to contact me. Thank you for your consideration.

Sincerely,  
Travis Shephard

