



Promoting Access to Comprehensive Opioid Treatment in Maryland

Minutes from November 8, 2017

Meeting called to order at 12:00 PM

MATOD Board Members present: Howard Ashkin, Vickie Walters, Mariana Izraelson, Babak Imanoel, Ken Stoller and Marian Currens

MATOD Members present: See the Sign-In sheet

MATOD Members via phone: Amiel Chicheportiche and Yehuda Moradian (Pikesville Health Services), Kisha Winston-Watkins (Behavioral Health Systems – Baltimore), Connie Dausch (Acadia Healthcare/Pine Heights, Cumberland and Elkton Comprehensive Treatment Centers)

BHA: Kathy Rebbert-Franklin, Frank Dyson and Barry Page

Minutes from September 13, 2017 meeting were approved.

1. Maryland Board of Professional Counselors and Therapists

Ms. Kim Link, J.D., was introduced as the recently appointed (May 2017) Interim Executive Director of the Maryland BoPCT, and provided an hour-long update regarding the Board's past, present and future. Kim's email address is kimberly.link@maryland.gov.

Kim validated many of MATOD's past experiences with Board staff, application processes and general frustration in the hiring and credentialing qualified Counselors. Kim described her initial impressions of the Board while working with the State's Legislative Analysts conducting the COMAR-mandated Sunset review. Kim acknowledged problems with the Board's performance of disciplinary reviews and action; the application process; the clarity of current COMAR regulations; staff space, morale, organization, knowledge and FTE adequacy and the overall inability to keep pace with the increased volume of counselor applications, accreditations, certifications and licensure in the midst of the Opioid epidemic.

Kim mentioned the Board's seven (7) new members (*2 with significant OTP experience*), new workflows and processes, new committees and website enhancements designed to improve stakeholder experiences with the BoPCT and improve the BoPCT's responsiveness.

The final Sunset Review report from the Legislative Analysts included thirty-two (32) recommendations (a record high), and only a two (2) year renewal before the next Sunset Review (usually 10 years). The Board is developing a response to the Sunset Review and the final report and response will be a public document in January 2018.

Some of the Sunset Review's 32 recommendations are:

- Consider re-organization of the current 14 credentials across 5 areas of counselor specialization.
- Shorten the process and improve efficiency to accept, review and approve applications.
- Develop a separate subcommittee dedicated to Alcohol and Drug Counselor applications and accreditation to shorten the turn-around time. Kim noted that the number of Professional Counselor applications increased 100% from 2016 to 2017. Overall, counselor applications of all credentials increased 76% from 2016 to 2017. Alcohol and Drug counselors comprise 30% of the Board's certification/licensure base, but 40% of all disciplinary actions.
- Improve the efficiency and guidelines of the criminal background check process
- Improve the consistency and relevance of educational requirements
- Reciprocity across adjoining and other States is needed to expand the workforce – consider using National accreditation process
- Improve the ability to waive educational and experience requirements for qualified counselors

Kim provided the following answers to questions submitted by members:

1. The old test for CAC was eliminated and the current test is from the National Board of Certified Counselors (NBCC). Is the Maryland Board moving towards reciprocity for Counselors from other States with NBCC certification?

Yes – the Board is moving towards accepting other accrediting bodies and moving towards reciprocity.

2. The frequency and location to take the Ethics course and Ethics test are limited. Are their plans to make these available 24/7 on-line?

The regulation states that the ethics class must include alcohol and drug related issues. The Sunset Reviewers recommended a change to a general ethics class, but the Board wants to ensure that Alcohol and Drug counselors are adequately and appropriately educated to protect consumers. Kim also discussed the need for improved availability of acceptable classes, and was provided with suggestions of on-line courses.

3. Is there an end date for the Trainee Certificate?

No - there is no plan to end the Trainee Certificate. As a result of Sunset Review, though, there may be an overhaul to all the current certifications and licenses.

4. Can a CAC with a Supervisor letter signature approve a treatment plan or Assessment?

Kim sought clarification from the Board's AG, and clarified that the COMAR reference used by Medicaid in a recent Provider Alert starting that a CAC may not approve treatment plans or assessments is from Medicaid regulations, and not Counselor regulations. The BoPCT can only remind counselors to work within their scope of practice.

5. Is it true that when a CAC with a Supervisor letter gains an LGADC they can no longer provide clinical supervision?

Unfortunately, yes. The scope of practice for Licensed Graduates (LG) does not include clinical supervision. Currently the licensure and certification hierarchy does not require counselors to move from one to another. As an example, qualified counselors can seek licensure without prior certification.

2. BHA Update: Kathy Rebbert-Franklin, Frank Dyson, Barry Page

- Frank Dyson announced, and was congratulated, that as of November 8, 2018, he is the official Maryland State Opioid Treatment Authority (SOTA), with the “acting” prefix now removed.

Frank reported that BHA is constructing a Provider Alert regarding the delivery OTP medications when an active patient is admitted to a Nursing Home or Residential Treatment Center. The Alert will also address OTP requirements regarding any unused medications that were delivered, but remain when the patient is discharged.

- Barry Page reviewed Buprenorphine Expansion through the Maryland Addiction Consultation Service, which can assist prescribers become interested and eligible to prescribe BUP. Many Hospital ERs are working with BHA and The Mosaic Group to initiate Buprenorphine Induction for ER patients, including University of Maryland Downtown and Midtown; MedStar Harbor, Franklin Square and Good Samaritan; Johns Hopkins Bayview and Bon Secours. Patients who elect to begin BUP treatment are then referred to a BUP provider to continue the Induction through “fast-track” referrals.
- Dr. Olsen (and Dr. Stoller) are working with the Provider Clinical Support Service (PCSS) to expand Buprenorphine services in Maryland. Dr. Olsen is leading BHA’s bi-monthly Quality of Care Implementation workgroups with Medical Directors and with providers/stakeholders. Updates will be provided at future meetings.
- Kathy Rebbert-Franklin reported that State of Maryland has funding for treatment of gambling use disorders. BHA is developing a Provider Alert to share free training opportunities by Maryland’s Gambling Center of Excellence and the proper coding and billing of services through Beacon. Gambling counseling services within OTPs (and other SUD and MH settings) will be reimbursable as of 1/1/2018. Interested providers can reach out to the Gambling Center of Excellence at www.mdproblemgambling.com or 667-214-2120. Additionally, the website provides the following contact Information: Email: dgaspar@psych.umaryland.edu, Helpline is 1-800-GAMBLER. Providers need to have competence in providing gambling addiction services, but there are no specific certification or educational requirements at this time.
- Mr. Spencer Gear provided an update regarding changes to Accreditation requirements in 10.63. MATOD’s President and AATOD Liaison had received concerns about the COMAR requirement that a new OTP must show evidence of accreditation in their application for licensure. BHA was asked to discuss the accreditation requirement’s delay and additional expenses, and whether the accreditation report of an unopened OTP contains any meaningful information beyond the other application materials.

Spencer was recently hired as BHA’s Accreditation Manager (Spencer.Gear@maryland.gov). Spencer reported that the accreditation requirement began in 2011 by a task force to require the State to refrain from accreditation of facilities, and instead, use national accrediting organizations to vet and monitor providers. The belief was that the applying program could obtain a “preliminary” or “provisional” accreditation from the accrediting agency. BHA provided one-time, limited financial assistance for programs requesting such help. Existing providers converting from COMAR 10.47 to 10.63 encountered scheduling delays when contacting CARF, TJC, ACHA and COA. New providers faced the problem of the accrediting agency’s requirement of 6 months of charts and operation to provide accreditation.

BHA is communicating with all 4 accrediting agencies to help existing and new providers complete the licensure application. CARF developed a “preliminary accreditation process”, and BHA hopes the others will, as well. The best way to reach Spencer and his staff with questions is through the departmental email of bha.regulations@maryland.gov.

3. Drug Court update

MATOD contacted the Mr. Gray Barton, the Director of the Office of Problem Solving Courts, and the Vice Chair, the Honorable Judge George Lipman (Baltimore City District Court), regarding reported threats of incarceration by Cecil and Harford County Drug Courts, if a patient refuses to change treatment from Methadone to Vivitrol.

Drug Courts across the State come under the Maryland Judiciary's "Office of Problem-Solving Courts" (<http://mdcourts.gov/opsc/index.html>).

MATOD was assured that Maryland Drug Courts and Judges recognize Methadone and Buprenorphine as evidence-based treatment of OUD, and follow SAMHSA guidelines supporting MAT.

Mr. Barton, who began his career as a certified Addictions Counselor, is the key contact for any questions or concerns related to a Maryland Drug Court:

Gray Barton, Director

Office of Problem-Solving Courts

Administrative Office of the Courts, Program Department

2001 E/F Commerce Park Drive

Annapolis, Maryland 21401

410-260-3617

gray.barton@mdcourts.gov

4. AATOD update

Dr. Ken Stoller, Maryland's Liaison to AATOD, provided the following update:

- AATOD is working on getting Medicare to cover OTP and other SUD treatment. AATOD is making their second Congressional visits to Capitol Hill in December. Howard will meet with Maryland's Congressional staff, and Ken will attend AATOD Board meetings.
- AATOD Conference – please visit www.AATOD.com to register, and consider securing lodging quickly. The conference is March 10 – 14, 2018. If you are attending, please register for the Awards dinner on Monday, March 12th, and help celebrate Vickie Walters' reception of Maryland's Nyswander/Doles Award.
- Confidentiality protection – there is strong movement to abolish the current confidentiality protection of 42 CFR, and move towards HIPAA. Consumers groups are against this change and would prefer that current confidentiality in place.
- Medical Assistance still does not cover OTP services in many states. Some states are looking toward CURES funding OTP services, and many are using CURES funding to expand buprenorphine and office based services.
- Telehealth – Maryland and other states are exploring the need for telehealth in rural areas, as well as under-staffed areas. Ken is working with Mark Parino on a PCSS telehealth grant.
- Please visit the following AATOD links:
 - <http://www.aatod.org/policies/policy-statements/siting-new-otps>
 - <http://www.aatod.org/news/the-medication-assisted-treatment-for-opioid-use-disorder-in-the-justice-system-fact-sheet-is-now-available/>

5. Treasurer's Report:

Dr. Babak Imanoel, MATOD Treasurer, reported the current balance of \$20,437.

There are still a few existing and new Maryland OTPs who have not paid their 2017 – 2018 dues.

MATOD Board members have reached out to these OTPs, but members are also encouraged to contact any OTP that you do not see listed on our Member Directory (<https://matod.site/member-directory>).

Please contact Mariana (MIzraelson@AshleyTreatment.org) if your program's website is not represented correctly, so we can make the necessary adjustments.

Website development has been paid, but ongoing maintenance, security, updates and back-up will cost approximately \$125/month.

6. MATOD's 2018 Public Policy Committee:

The 2018 Legislative session kicks off the second week of January 2018, but legislative work never stops. MATOD's Public Policy Committee needs volunteers to participate in weekly and bi-weekly conference calls led by Ann Ciekot (Public Policy Partners) and MATOD Board members.

Our Public Policy committee will review/discuss Medicaid regulations, BHA regulations, Governor Hogan's Opioid State of Emergency and Opioid Operations Committee, SUD related bills, Budget related bills and more.

Committee members help guide MATOD positions, provide oral and written testimony, stakeholder outreach and help organize MATOD presence for OTP, SUD, Budget and other relevant bills. Please reach out to MATOD Board members to express your interest in participating with the 2018 Public Policy Committee, so we can help Ann Ciekot get this off the ground.

The October 11th Legislative "Thank You Luncheon", sponsored by NCADD, MATOD, The Baltimore City SUD Directorate and the MD/DC Society of Addiction Medicine.

Awards were presented to and accepted by Senate President Mike Miller, Delegate Joseline A. Peña-Melnyk, and Speaker Michael Busch (Delegate Peña-Melnyk accepted on behalf of Speaker Busch).

Senators Guy Guzzone, Kathy Klausmeier and Addie Eckardt, as well as other Legislative friends, helped make the luncheon a great success.

Please visit the link: http://www.johncarterphoto.com/galleries/NCADD_Awards_2017/index.html.

7. Membership announcements:

1. Sinai (SHARP) has grant openings for uninsured OTP patients or unable to cover the cost of private insurance deductibles – contact Melissa Vail at mavail@lifebridgehealth.org.
2. Dr. Ken Stoller is working with a team to develop recommendations how Hospitals can initiate Buprenorphine Induction in a hospital setting, until the patient can be discharged to a community treatment provider. Recommendations will address the current "3 day rule", to avoid premature termination of Buprenorphine treatment due to extended discharge planning.
3. Stephanie Smiley, Program Sponsor of Montgomery Recovery Services (MRS), is willing to provide "guest dose services" for other OTP patients who require inpatient residential treatment at the Avery Road Treatment Center (ARTC). MRS works closely with ARTC, since 2006, by delivering methadone to ARTC on a weekly basis, or as needed, based on patient need. In the last three weeks, Montgomery Recovery Services has accommodated 3 "guest-dosing" clients from

other facilities who were entering treatment at ARTC. Each of the 3 clients arrived at MRS on the day the individual was scheduled to enter ARTC. MRS processed the paperwork, medicated the patient at MRS and then arranged a delivery schedule with the ARTC Nursing Staff. Contact Stephanie Smiley at 301-762-5300 if you have questions or want more information. Avery Road Treatment Center is located at 14703 Avery Road, Rockville, MD, 20853. They can be reached at 301-762-5613.

4. Turning Point announced that they were informed on November 7th that Beacon and BHA will conduct an audit of patient and employee files on Monday, November 13th. Andre Pelegrini shared that BHS-B will accompany BHO/BHA, and that a list of ten (10) patients will be provided to Turning Point on Friday, November 10th.
5. **NOTE: Our meeting on Wednesday, January 10, 2018, will be primarily devoted to a presentation by, and discussion with, Beacon Health Options, Medicaid and the BHA.**

The agenda is under development, but topics will include updates regarding OTP audit findings; Medicaid Re-bundling; recent and upcoming SUD Provider Alerts; matters related to treatment, authorizations and reimbursements; BHA workgroups and the 2018 legislative session.

Adjournment: Today's meeting was adjourned at 2:15 PM

Next Meeting: Wednesday, January 10, 2018, from 12:00 pm – 2:00 pm at Dix Building Basement

Respectfully submitted by: Mariana Izraelson, Psy. D., LCPC and Howard Ashkin, MMH, PsA