



## SALISH BH-ASO POLICIES AND PROCEDURES

**Policy Name:** PRIORITY POPULATIONS AND WAITING LISTS **Policy Number:** CL204

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### PURPOSE

To specify how SBH-ASO services are administered and prioritized for Substance Abuse Block Grant (SABG), Mental Health Block Grant (MHBG), and General Fund State (GFS) priority populations.

### POLICY

SBH-ASO and its subcontractors shall comply with contract requirements around SABG, MHBG, and GFS priority populations and waiting lists to determine which members are given prioritized access to SBH-ASO funded services.

### PROCEDURE

1. SABG services shall be provided in the following priority order to:
  - a. Pregnant individuals injecting drugs,
  - b. Pregnant individuals with substance use disorder,
  - c. Women with dependent children
  - d. Individuals injecting drugs.
2. SBH-ASO subcontractors provide SABG services, within available resources, in no particular order to the following additional priority populations:
  - a. Postpartum women up to one (1) year, regardless of pregnancy outcome,
  - b. Patients transitioning from residential care to outpatient care,
  - c. Youth,

- d. Legal Offenders
3. Access to SABG Services are provided within available resources and services are not denied to any eligible Individuals regardless of:
    - a. Individuals drug(s) of choice
    - b. The fact that an Individual is taking FDA approved medically-prescribed medications
    - c. The fact that an individual is using over-the-counter nicotine cessation medication or actively participating in a nicotine replacement therapy regimen.
  4. SBH-ASO subcontractors, as required by the SABG Block Grant, ensure Interim Services are provided for Pregnant and Post-partum Women and Individuals Using Intravenous Drugs (IUID).
    - a. Interim Services shall be made available within forty-eight (48) hours of seeking treatment. The Contractor shall document the provision of Interim Services. Interim Services shall include, at a minimum:
      - i. Counseling on the effects of alcohol and drug use on the fetus for pregnant women.
      - ii. Referral for prenatal care.
      - iii. Human immunodeficiency virus (HIV) and tuberculosis (TB) education.
    - b. TB treatment services if necessary IUID.
    - c. Admission to treatment services for the intravenous drug user shall be provided within fourteen (14) calendar days after the Individual makes the request, regardless of funding source. If there is no treatment capacity within fourteen (14) calendar days of the initial Individual request, offer or refer the Individual to Interim Services within forty-eight (48) hours of the initial request for treatment services.
  5. If SUD treatment services are not available due to limitations in a subcontractor's capacity the Individual is referred to another Provider.
  6. SBH-ASO requires all subcontractors to screen for SABG priority populations and maintain appropriate wait lists. SBH-ASO includes SABG priority population and waiting list criteria on the authorization request form that subcontractors complete and submit. SBH-ASO maintains a waitlist and coordination of interim services with subcontractors as needed.

7. SBH-ASO subcontractors provide non-crisis behavioral health services funded by GFS and/or MHBG (see Level of Care Policy), within available resources, to Individuals who meet financial eligibility standards.
8. An Individual may be served as funds are available, if they do not qualify for Medicaid, have income up to two-hundred-twenty percent (220%) of the federal poverty level, meet the medical necessity criteria (when applicable) for all services provided to them, and meet at least one of the following:
  - a. Are uninsured,
  - b. Have insurance, but are unable to pay the co-pay or the deductible for services,
  - c. Are using excessive Crisis Services (three (3) crisis contacts within 30 days) due to inability to access non-crisis behavioral health services,
  - d. Have more than five (5) visits over six (6) months to the emergency department, detox facility, or a sobering center due to a Substance Use Disorder.
9. SUD Waitlist management is reviewed weekly by the SUD Care Manager to provide coordination with subcontractors.
10. Provider capacity and waitlist management will be routinely reviewed during SBH-ASO Leadership Meetings, Internal Quality Committee Meetings, and if necessary, the Quality Assurance and Compliance Committee.