IAP | Medicaid Innovation Accelerator Program

Improving Medication-Assisted Treatment Services in Medicaid

In July 2014, the Centers for Medicare & Medicaid Services launched a collaborative between the Center for Medicaid and CHIP Services and the Center for Medicare & Medicaid Innovation called the Medicaid Innovation Accelerator Program (IAP). The goal of IAP is to improve health and health care for Medicaid beneficiaries and to reduce costs by supporting Medicaid agencies' ongoing payment and delivery system reforms. IAP provides targeted technical assistance to Medicaid agencies across four program areas. The first IAP program area began in February 2015 and focused on technical assistance for better identifying individuals with a substance use disorder (SUD), expanding coverage for effective SUD treatment, and enhancing SUD practices delivered to beneficiaries. As part of this support, IAP convened several learning collaboratives on topics Medicaid agencies identified as priorities in their efforts to combat the opioid crisis. IAP also worked with Medicaid agencies on improving care for Medicaid beneficiaries with complex care needs and high costs, promoting community integration through long-term services and supports, and supporting physical and mental health integration.

Medication-Assisted Treatment Affinity Group and Technical Assistance

To support states' SUD delivery system reform needs, IAP convened a Medication-Assisted Treatment (MAT) Affinity Group. Medicaid agencies participating in the MAT Affinity Group worked to improve their understanding of MAT delivery system reform and interacted with peer agencies and subject matter experts to discuss ways to improve MAT services. Participating states also worked with IAP coaches to develop a work plan for continuing to advance and strengthen their MAT delivery systems after completion of the Affinity Group.

The MAT Affinity Group ran from February 2020 through August 2020. Participating Medicaid agencies took part in learning opportunities and received technical assistance in the following three topic areas:

- Role of Opioid Treatment Programs: This topic area focused on helping Medicaid agencies assess the role and functions of Opioid Treatment Programs (OTPs). Agencies reviewed best practices from other agencies on standards of care, quality metrics, and applicable Medicaid agency reporting requirements. They received a range of technical assistance, including assessing the feasibility of transforming OTPs into health homes or centers of excellence as well as value-based payment strategies and new reimbursement models.

- Key MAT Strategies to Enhance Access: This topic area focused on providing technical assistance to Medicaid agencies in performing a high-level review of their practices and payment arrangements for MAT (e.g., traditional fee for service, bundled rates, alternative payment models). States participated in a series of technical assistance activities including peer-to-peer discussions focused on incorporating peer support specialists into SUD treatment programs, especially OTPs and Office-Based Opioid Treatment. The participating states used these technical assistance activities to assess the impact of MAT payment arrangements on access and to identify targets for improvement.

- Performance Metrics: For this topic area, Medicaid agencies reviewed examples of performance measures for assessing MAT access, quality, and outcomes that were relevant to their MAT delivery

system goals. The states also discussed barriers to performance measurement at the system level (e.g., access issues) and the patient level (e.g., limits on prescription supply and factors affecting treatment retention).

The Medicaid agencies that participated in the MAT Affinity Group were Arkansas, Idaho, and Washington.

ARKANSAS

Arkansas joined the MAT Affinity Group with the goal of adding a methadone benefit under Medicaid, including reimbursement for methadone maintenance treatment for services in OTPs. The Medicaid agency received technical assistance from IAP and engaged in efforts to understand the characteristics of its Medicaid population requiring OTP services. In addition, IAP helped the state prioritize agency considerations for supporting OTPs through Medicaid provider enrollment and orientation. IAP provided Arkansas with IAP-developed technical manuals to conduct data analyses to help better understand (1) the number of Medicaid clients who might seek services from OTPs and (2) potential OTP network adequacy challenges to meet the needs of the population. In particular, Arkansas explored how to expand OTPs into underserved areas, with a focus on rural areas.

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IDAHO

As part of its participation in IAP, Idaho sought to (1) add OTP services to the state Medicaid benefit, (2) identify strategies for improving access to MAT for opioid use disorder (OUD), and (3) analyze performance and quality outcomes of MAT. IAP provided the Medicaid agency with technical assistance in considering OTP policy changes needed for implementation and analysis of reimbursement methodologies for Medicaid OTP services. Idaho received IAP-developed technical manuals to conduct data analyses to better understand the scope and characteristics of Medicaid beneficiaries with OUD and the availability and distribution of MAT. In addition, Idaho explored payment, policy, and implementation strategies that peer Medicaid agencies developed to increase access to OTPs in rural areas, including OTP medication units. With IAP's assistance, the agency created a work plan to increase overall access to MAT for OUD. The work plan included next steps for adding OTP services to the Medicaid benefit by January 2021 and preparing for the future introduction of performance and quality metrics for MAT.

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WASHINGTON

With several years of participation in IAP SUD technical assistance opportunities, Washington continued to build on previous IAP projects related to MAT delivery system reform. The state's goals for participating in the MAT Affinity Group were (1) to enhance access to and standardize OTP services and (2) to analyze program performance to establish a framework for improvement. The Medicaid agency received IAP technical assistance to standardize its OTP services and consider additional critical services. Washington also used this IAP technical assistance to develop a work plan outlining a phased approach for implementing updated, standardized OTP services over the course of three years.

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Additional information on the IAP Reducing SUDs program area, including materials from the MAT Affinity Group, is available on the **Medicaid IAP Reducing SUDs web page**.