The Virginia Department of Medical Assistance Services (DMAS) SUPPORT Act Grant projects are supported by the Centers for Medicare and Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $4,836,765 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.
Closed Captioning Service

• Automated CC is available for this event with realtime captions that will run simultaneously with the presentation.

• The streaming text is available through: https://www.streamtext.net/text.aspx?event=HamiltonRelayRCC-0308-VA2309

• We recommend opening a second window with the link provided and resizing it in such a fashion that it appears below the webinar screen. This allows the viewer to see both the webinar and its associated text/graphics while also being able to comfortably view the realtime captions.

• If you have any questions about this service please send an email to CivilRightsCoordinator@DMAS.Virginia.Gov
Welcome and Meeting Information

- We have an ‘open’ meeting format to allow participation and questions

- Please make sure your line is muted if you are not speaking
  - We will mute all lines if there is a lot of background noise

- If you are having issues with audio, please type questions or comments in the chat box.
How to Mute and Unmute in WebEx

Everyone is muted at the beginning of the webinar – when you are ready to ask a question, please click the red microphone button to unmute. When you are finished, please click it again to mute your line.

When the microphone icon looks like this, you are muted

When the microphone icon looks like this, you are unmuted
<table>
<thead>
<tr>
<th>Item</th>
<th>Time</th>
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</thead>
<tbody>
<tr>
<td>Welcome and Overview</td>
<td>10:00 - 10:10</td>
</tr>
<tr>
<td>SUPPORT Act Grant Updates</td>
<td>10:10 - 10:25</td>
</tr>
<tr>
<td>Virginia Medicaid: ARTS General Assembly 2021 and Policy Updates</td>
<td>10:25 – 10:50</td>
</tr>
<tr>
<td>Recovery Oriented Language</td>
<td>10:50 – 11:15</td>
</tr>
<tr>
<td>Q&amp;A and Next Steps</td>
<td>11:15 - 11:30</td>
</tr>
</tbody>
</table>
Overview of SUPPORT Grant Initiatives

Notice of Award: September 18, 2019

Period of Performance: September 30, 2019 to September 29, 2021 (18 months + 6 month no cost extension)

Approved Budget: $4.8 million

Components

1. Need assessment
2. Strengths-based assessment
3. Activities to increase provider capacity
SUPPORT Act Grant Overview

Virginia Medicaid’s SUPPORT Act Grant Goals:

• Learn from Addiction and Recovery Treatment Services (ARTS) benefit program
  ▪ Appreciate successes
  ▪ Learn from challenges

• Decrease barriers to enter workforce

• Focus on specific subpopulations
  ▪ Members who are justice-involved
  ▪ Members who are pregnant and parenting

• Maintain our core values
  ▪ Person-centered, strengths-based, recovery-oriented
Grant Team

- Alyssa Ward, Ph.D., LCP, Director, Division of Behavioral Health
- Ashley Harrell, LCSW, Project Director & ARTS Senior Program Advisor
- Jason Lowe, MSW, CPHQ, Grant Manager
- Christine Bethune, MSW, Grant Coordinator
- Paul Brasler, MA, MSW, LCSW, Behavioral Health Addiction Specialist
- John Palmieri, Data Analyst
- Tiarra Ross, Senior Budget Analyst
- Trenece Wilson, Policy and Planning Specialist
- Adam Creveling, MSW, CPRS, Grant Program Specialist
SUPPORT ACT GRANT UPDATES
MARCH 2021
Projects Update

• Medication Assisted Treatment/Peer Recovery Services in Emergency Departments pilot – Virginia Hospital and Healthcare Association Foundation
  ▪ The Settlement Agreement has been executed and the contract has been terminated.
  ▪ Reallocation plan/Contract Procurement
    ▪ Subawards
    ▪ Emergency Department Virtual Bridge Clinic Models
      ▪ New Contract: VCU Emergency Department Virtual Bridge Clinic
• **Project Lead:** Dr. Gerry Moeller, VCU Wright Center

• **Goals:**
  - Design and implement an opioid withdrawal treatment protocol, which includes starting medication for opioid use disorder (MOUD) for the VCU Emergency Department (ED)
  - Create a Virtual Bridge Clinic (VBC) to help transition individuals who present to the VCU ED with an overdose emergency to the VCU MOTIVATE clinic for community-based addiction and recovery treatment services.
  - Demonstration model for implementation
Subaward Projects

Seven subaward projects focus on:

- Peer Recovery Supports
- Community engagement
- Provider training
- Telehealth
- Care Coordination
- Members who are justice involved
- Members who are pregnant and parenting
- Hepatitis C testing and treatment
- Harm Reduction
Projects Underway

• Needs assessment: VCU Department of Health Behavior and Policy
  ▪ Continuum of care needs assessment
  ▪ ARTS member surveys and interviews
  ▪ Buprenorphine-waivered prescriber analysis and survey

• Brightspot assessment: VCU Wright Center
  ▪ Training pre/post-test implemented – take part for your chance to win an Amazon gift card!
  ▪ Data visualization - HealthLandscape in development
  ▪ Brightspot Analysis
Projects Underway

• Policy Landscape Analysis – analyze policy options for Virginia in response to changes introduced by the SUPPORT Act
  ▪ Manatt Health and State Health Partners continue to meet with workgroups and interview stakeholders to inform policy landscape
  ▪ Upcoming workgroup schedule:
    • March – MCO Contracting Strategies/Care Coordination
    • March – Data, Privacy, and Confidentiality Issues
    • April – Value Based Payments
Projects Underway

• SUMS Project – **Substance Use Disorder, Medicaid, and the Criminal Justice System**
  - Contract lead: Health Management Associates (HMA)
  - HMA is currently working on community stakeholder surveys and focus group designs
  - Grant team and HMA are working with DOC and related partners on demonstration site selections and outreach – two DOC facilities and two local/regional jails.
SUPPORT Act Grant Updates: March

Upcoming Special Projects

• Buprenorphine Providers Workgroup
  ▪ Kickoff in Spring 2021
  ▪ Looking for volunteers
  ▪ Interested in front-line perspective
  ▪ Goal is to identify opportunities to increase provider capacity

• Peer Recovery Services Symposium
  ▪ Implementing PRS
  ▪ Overcoming obstacles
  ▪ Your input is appreciated! Please email the Grant inbox – SUPPORTgrant@dmas.virginia.gov
SUPPORT Act Grant Updates: March

Upcoming Special Training Opportunity – On Hold

SUPPORT Act Grant is excited to be working with Carilion Health to offer a free Buprenorphine Waiver Training on February 12, 2021.

More information about this training is coming soon, please email SUPPORTgrant@dmas.virginia.gov to be added to the mailing list to receive updates about this event.
Stakeholder Meeting Updates

• Stakeholder Meeting format/schedule changes:
  ▪ After March’s meeting, change to every other month:
    • May 10th - 10:00 – 11:30 AM
    • July 12th - 10:00 – 11:30 AM
    • September 13th - 10:00 – 11:30 AM
  ▪ New calendar invites will be sent out
Spring Webinars

• Topics that will be covered include:
  ▪ Repeated Webinars:
    • ARTS Care Coordination
    • How to start an OBOT
  ▪ SUD & Clients in Need of Housing
  ▪ ASAM Criteria Assessment Dimensions 1 & 2
  ▪ ASAM Criteria Assessment Dimensions 3
  ▪ ASAM Criteria Assessment Dimensions 4
  ▪ ASAM Criteria Assessment Dimensions 5 & 6
  • Upcoming topic: Peer Recovery Supports

*PLEASE NOTE:* The goal of these trainings is to help raise providers' awareness and understanding around implementing ASAM Treatment Assessment dimensions. These trainings are not designed as a substitute for official ASAM training, nor are they to serve as a substitute for any ASAM training that is required by any local, state, or federal regulatory agency or certifying organization. These trainings are not sponsored or endorsed by ASAM
<table>
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<th>Date</th>
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<th>Topic</th>
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<tr>
<td>Monday, March 8, 2021</td>
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<td>Virginia Medicaid ARTS Care Coordination</td>
<td>Paul Brasler</td>
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<td>Tuesday, March 9, 2021</td>
<td>10:00 AM - 11:00 AM</td>
<td>Virginia Medicaid ARTS Care Coordination</td>
<td>Paul Brasler</td>
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<td>Monday, March 15, 2021</td>
<td>1:00 PM - 3:00 PM</td>
<td>How to start an OBOT</td>
<td>Paul Brasler, Adam Creveling, Ke’Shawn Harper</td>
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<td>Monday, March 22, 2021</td>
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<td>Tuesday, March 23, 2021</td>
<td>10:00 AM - 11:00 AM</td>
<td>SUD &amp; Clients in Need of Housing</td>
<td>Paul Brasler</td>
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</table>

Full schedule and for links to register: [DMAS Spring Webinar Schedule](#)
GENERAL ASSEMBLY and BUDGET UPDATES

Ashley Harrell, LCSW, SUPPORT Act Grant Project Director & ARTS Senior Program Advisor
2021 General Assembly Session

• HB1987/SB1338- Telemedicine
  ▪ The bill also requires the Board of Medical Assistance Services to amend the state plan for medical assistance to provide for payment of medical assistance for remote patient monitoring services provided via telemedicine for certain high-risk patients.

• HB1874 – Behavioral Health Assessment in local correctional facilities
  ▪ Establishes timelines for screenings and assessments to be performed for individuals in crisis
  ▪ A report is required to submit to the Secretary identifying those facilities that cannot complete an assessment within 72 hours of the screening.

• SB1307 – School-based Services
  ▪ Expands Medicaid payment for services outside a child’s IEP
2021 General Assembly Session

- HB2322/SB1469 – Opioid Abatement Authority
  - Establishes the Opioid Abatement Authority to administer the Opioid Abatement Fund, which would receive moneys that will be used to provide grants and loans to Virginia agencies and certain localities for the purpose of treating, preventing, and reducing opioid use disorder and the misuse of opioids in the Commonwealth.

- HB2300 – Hospitals, emergency treatment for substance use related emergencies
  - Requires the development of a protocol for treatment and discharge of individuals experiencing a substance use related emergency. May include dispensing of naloxone as well as referrals to community based treatment providers.
  - Requires convening a workgroup for best practices.
RE-AlLOTTED BH ITEMS:

• Behavioral Health Enhancement (BHE)
• 7/1/20 – Outpatient psychiatric services rates equivalent of 110% of Medicare rates.
Budget Funding Summary – Governor’s Proposed Budget 2021 Session

- Allow FAMIS MOMS access to SUD treatment in an Institution for Mental Diseases (MH/SUD facilities with more than 16 beds)
  - FY2022 GF: $13,497 / NGF: $25,067
- Expand the Preferred Office-Based Opioid Treatment (OBOT) model to cover other substance use disorders like alcohol, cocaine, and methamphetamine.
  - FY2022 GF $881,306 / NGF $1,296,294
- Add DBHDS licenses for ASAM Level 4.0
  - Language only
- Authorize Post-Public Health Emergency Telehealth
  - Language only
- No applicable Committee amendments 2/10/21
Recovery-Oriented Language
The Virginia Department of Medical Assistance Services (DMAS) SUPPORT Act Grant projects are supported by the Centers for Medicare and Medicaid Services (CMS) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $4,836,765 with 100 percent funded by CMS/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CMS/HHS, or the U.S. Government.
Misrepresentation

• Overall context
• Stereotypes
• Disparaging language
• Devaluation of the individual
• Using mental illness or addiction as the butt of a joke
• People with mental illness/substance use challenges portrayed only as an antagonist or villain
• Linkage of mental illness to violence
• Offensive or insensitive symbols & images
• Recovery rarely displayed in movies, media, billboards etc.
Language is complicated and often slow to change—and for a group that has been criminalized, fighting stigma and misinformation is a constant struggle. But when the media start treating people with addiction with the same respect that they use for other patients—and when we cover addiction care with the same skepticism about possible quackery used in other health reporting—perhaps the rest of America will start to accept that addiction is a medical problem and that moralizing and punishment have failed. (Szalavitz, 2017)
Change The Narrative

Language Matters

Language is powerful – especially when talking about addictions. Stigmatizing language perpetuates negative perceptions. “Person first” language focuses on the person, not the disorder.

When Discussing Addictions...

**SAY THIS**
- Person with a substance use disorder
- Person living in recovery
- Person living with an addiction
- Person arrested for drug violation
- Chooses not to at this point
- Medication is a treatment tool
- Had a setback
- Maintained recovery
- Positive drug screen

**NOT THAT**
- Addict, junkie, druggie
- Ex-addict
- Battling/suffering from an addiction
- Drug offender
- Non-compliant/bombed out
- Medication is a crutch
- Relapsed
- Stayed clean
- Dirty drug screen

**Recovery Dialects**

<table>
<thead>
<tr>
<th></th>
<th>Mutual Aid Settings</th>
<th>In Public</th>
<th>With Clients</th>
<th>Medical Settings</th>
<th>Journalists</th>
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<tr>
<td>Use Disorder</td>
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<td>Person w/ an Opioid</td>
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<tr>
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<td>Pharmacotherapy</td>
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Language matters but can change depending on the setting we are in. Choosing when and where to use certain language and labels can help reduce stigma and discrimination towards substance use and recovery.

Words Have The Power To Wound Or Heal

• The wrong words can convey:
  • People are not worthy of recovery
  • Not capable of recovery
  • Fuel self-destruction
  • Prevent or postpone seeking help
  • Disempower individuals/families & communities

• Words determine the institutions (compassion or punishment) & who provides care:
  • Physician, counselor
  • Preacher, community members
  • Jailer, Warden

Words Have The Power To Wound Or Heal Cont.

- Recovery language should...
  - Be encouraging, inspiring and hopeful
  - Focus on strengths and possibilities
  - Jargon free including slang
  - Culturally competent
  - Individual decides how they identify

- Integrating Recovery language into practice
  - Team/staff meetings
  - Describing the populations your agency works with and the services your agency provides, service plans and care coordination
  - Agencies mission statement, procedures, policies, licensing documentation
  - Job description's
Cultural Shift In Client Care

• Person-Centered Approach vs. Patient Centered Care –

  “While both patient-centered and person-centered concepts acknowledge the values, needs, and preferences of individuals, person-centered care focuses on the person as an individual in a holistic manner.”

  https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6371927/

• Person First Language vs. Identity First Language -

  “Therefore, the use of person-centered language should be preferred to describe what people have or the circumstances in which they live, which in the end should not define who they are and how we treat them.”

  https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6240232/jfy
6 Ways To Speak Out Against Non-Recovery Language

• Be Open About Your Experiences
• Don’t Let Stigma Slide
• Reach Out To Others
• Pay Attention To How You Say Things
• Teach others about mental health/substance use person-centered language
• Calling Out/In

If we want addiction destigmatized, we need a language that’s unified.
THANK YOU

Adam.creveling@dmas.Virginia.gov
Please unmute yourself or use the chat feature in WebEx to submit your questions.
SUPPORT Website

DMAS Home Page:
https://www.dmas.virginia.gov/#/index

ARTS Home Page:
https://www.dmas.virginia.gov/#/arts

SUPPORT Grant:
https://www.dmas.virginia.gov/#/artssupport
Want a copy of today’s slides? [link to slides]

**Information**
- Spring 2021 Webinar Schedule [pdf]
- Winter 2020 & 2021 Webinar Schedule [pdf]
- Virginia Medicaid Agency Awarded Federal Grant to Combat Opioid Crisis [pdf]
- Summary of Virginia’s SUPPORT Act Goals and Activities [pdf]
- Accessibility Notice [pdf]

**Resources**
- UCSF National Clinician Consultation Center Warmline [pdf]
- COVID-19 Resource Library [pdf]
- Peer Recovery Resources:
  - Peer Recovery Specialist Who Are Also Mothers [pdf]
  - 50-State Scan: How Medicaid Agencies Leverage their Non-Licensed Substance Use Disorder Workforce [pdf]
  - State Medicaid Reimbursement For Peer Support Services [pdf]
  - Review of Peer Support Specialist Trainings: Comparison of Virginia and Other States Processes [pdf]
  - Recovery Support Services for Medicaid Beneficiaries with a Substance Use Disorder [pdf]
  - Peer Workers in the Behavioral and Integrated Health Workforce: Opportunities and Future Directions [pdf]
  - Peer Support toolkit [pdf]
  - Core Competencies for Peer Workers in Behavioral Health Services [pdf]
  - SAMHSA’s Working Definition of Recovery- 10 Guiding Principles of Recovery [pdf]

**Monthly Stakeholder Meetings**
- February 2021 [pdf]
- January 2021 [pdf]
- December 2020 [pdf]
- November 2020 [pdf]
- October 2020 [pdf]
- September 2020 [pdf]
- August 2020 [pdf]
- July 2020 [pdf]
- June 2020 [pdf]
- May 2020 [pdf]
- April 2020 [pdf]
- March 2020 [pdf]

**Special Topic Webinars**
- Video: Uncomfortable Conversations on the Couch: Racial Trauma and Incorporating Culturally Sensitive Practices Webinar [pdf]
- Slides: Uncomfortable Conversations on the Couch: Racial Trauma [pdf]
- Video: How to Set Up a Preferred OBOT Webinar [pdf]
- Slides: How to Set Up a Preferred OBOT Webinar [pdf]
- Video: Hepatitis C Treatment Webinar [pdf]
- Slide Deck: Hepatitis C Treatment Webinar [pdf]

**SUPPORT 101 Webinars**
- Session Twenty-one: Video - Virginia Medicaid: ARTS Care Coordination [pdf]
- Session Twenty-one: Virginia Medicaid: ARTS Case Coordination [pdf]
- Session Twenty: “Novel” Substances [pdf]
- Session Nineteen: SUD & LGBQ+ Clients [pdf]
- Session Eighteen: SUD & Legally-Involved Clients [pdf]
- Session Seventeen: Alcohol & Cannabis [pdf]
- Session Sixteen: SUD and The Family [pdf]
- Session Fifteen: SUD & Cultural Humility [pdf]
- Session Fourteen: Addressing SUD Stigma and Building Provider Empathy [pdf]
- Session Thirteen: Group Therapy Skills [pdf]
- Session Twelve: Individual Therapy Skills [pdf]
- Session Eleven: Co-Occurring Disorders [pdf]
- Session Ten: Screening and Assessment for SUD [pdf]
- Session Nine: SUD Treatment Overview [pdf]
- Session Eight: Opioids and Stimulants Overview [pdf]
- Session Seven: Substance Use Disorders (SUD) Overview [pdf]
- Session Six: Providing Trauma-Informed Care [pdf]
- Session Five: Withdrawal Syndromes [pdf]
- Session Four: Crisis and De-escalation [pdf]
- Session Three: Suicide Assessment and Screening [pdf]
- Session Two: Client Engagement [pdf]
- Session One: Tele-Behavioral Health in the Time of COVID-19 [pdf]
- Dr. Mishka Terplan: Pregnant and Postpartum Care for SUD during COVID-19 [pdf]
- Dr. Mishka Terplan: HIV and Hepatitis C Updates [pdf]
- Dr. Mishka Terplan: Chronic Pain and Addiction Treatment [pdf]
Addiction and Recovery Treatment Services (ARTS) Contacts

ARTS Questions:
• ARTS Helpline number: 804-593-2453
• Email: SUD@dmas.Virginia.gov
• Website: http://www.dmas.virginia.gov/#/arts

SUPPORT Act Grant Questions:
• SUPPORTgrant@dmas.virginia.gov

ARTS Treatment Questions:
• SUD Behavioral Health: Paul Brasler
  ▪ Paul.Brasler@dmas.Virginia.gov
  ▪ 804.401.5241
• Addiction Medicine: SUPPORT Team
  ▪ SUPPORTgrant@dmas.Virginia.gov
Thank you for calling in!

Your participation in the Monthly Stakeholder meetings is vital to the success of the SUPPORT Act Grant in Virginia.

Next Meeting

Monday, May 10, 2021
10:00 AM – 11:30 AM