

Frequently Asked Questions: 2021-2026 Substance Use Disorder (SUD) Medicaid 1115 Waiver and American Society of Addiction Medicine Criteria

Where can I find current information about the SUD waiver?

The Oregon Health Authority (OHA) maintains [a web page for this project](#) which has links to recorded meetings and documents. Future updates will be posted here.

What does the approved waiver say about using the ASAM tools?

Oregon's SUD continuum of care shall be based on *The American Society of Addiction Medicine (ASAM) Criteria* and/or other nationally recognized assessment and placement tools that reflect evidence-based clinical guidelines.

Per *The ASAM Criteria (Third Edition)*, "*The ASAM Criteria* text and *The ASAM Criteria Software* are clinical guides designed by the American Society of Addiction Medicine (ASAM) to improve assessment and outcomes-driven treatment and recovery services. It is also used to match patients to appropriate types and levels of care."

The Centers for Medicare & Medicaid Services (CMS) has approved Oregon to use *The ASAM Criteria* as our nationally recognized tool because it is the most widely used and comprehensive set of guidelines for SUD treatment, and because Oregon's provider network is already accustomed to working with the ASAM.

What does this mean for SUD treatment providers?

Treatment providers will be required to assess and make level of care placement decisions for each individual using *The ASAM Criteria* fillable PDF form or *The ASAM Software*.

How is this different from the use of ASAM Criteria already referenced in Oregon Administrative Rules?

Current rules require assessments and levels of care "consistent with ASAM." They do not currently require using *The ASAM Criteria* or *Software* assessment or rendering services to fidelity at each level of care. The change means providers will need to:

- Demonstrate compliance to all aspects of *The ASAM Criteria* standards for each level of care rendered and
- Use an official ASAM tool in assessments.

OHA will use ASAM compliance tools to measure the level of adherence to the ASAM Criteria.

What approved ASAM Criteria assessment tools are available?

ASAM offers a free version, which is a fillable PDF. They also offer a software version, CONTINUUM, which can integrate with electronic health records for a fee. There is an additional, standalone software option.

Currently, these options do not include *The ASAM Criteria* for youth. OHA will be exploring options for youth services following the initial implementation.

When will this change go into effect?

Oregon must establish a requirement that providers assess treatment needs based on *The ASAM Criteria*, develop a process for compliance and review, and establish rules by April 7, 2023. OHA intends to offer an extended implementation period after the establishment of these rules for providers to come into compliance. The length of this implementation period will be 12 months after the rules go into effect. OHA will consider extensions to this implementation period on a case-by-case basis if providers experience hardship in coming into compliance.

What support will OHA offer providers?

- OHA has increased the fee-for-service Medicaid rate paid for SUD assessment by 30 percent because of how using *The ASAM Criteria* to fidelity will increase the time needed to complete an assessment.
- OHA will provide training on how to use *The ASAM Criteria* for any interested counselors, supervisors, or other staff who interact with the SUD continuum of care.
- OHA arranged a virtual meeting with ASAM leaders for providers to learn about the different ASAM tools and ask questions. [A recording of the meeting is available](#) for those who were not able to attend.
- OHA will provide financial support/cost sharing for programs that serve Medicaid patients and prefer to use the electronic version of the ASAM tools. This will come in the 2023-2025 biennium.
- OHA will continue to host informational sessions for providers as the ASAM project progresses.
- OHA's Licensing and Certification Unit will offer technical assistance sessions, once the rules are in place, to assist providers as they move into compliance with the ASAM continuum.
- OHA has scheduled a follow-up meeting with ASAM leaders to address questions that were not answered in the September 27 meeting. This meeting is scheduled for October 19, 2022 at 10 a.m. This meeting will also be recorded for those not able to attend.

How can providers be involved in the implementation plan for ASAM?

- OHA will facilitate focus groups with small groups of providers to discuss the aspects of implementation and provide suggestions and feedback. The goal is to foster collaboration and a shared understanding and purpose, ultimately leading to a successful implementation. Provider feedback and CMS requirements will guide OHA's implementation of the ASAM tools.
- OHA will facilitate early engagement groups for the Rules Advisory Committee (RAC) that will review and comment on proposed rule changes needed to support the SUD waiver implementation.
 - Invitations to participate in these groups will be forthcoming.
- You can ask questions and provide feedback by emailing sud.waiver@dhsosha.state.or.us.

Is OHA moving to require all providers to use a standardized assessment?

Currently, mental health, SUD, child and family, problem gambling, and integrated treatment providers use a variety of assessments. These vary depending on whether the provider uses an electronic health record, requirements of any accreditation they have, etc. All the different

assessments must contain the content required by OAR, but they do not have to be standardized. OHA is not moving to require all providers to use a standardized document for all assessments.

Starting one year after the effective date of the OAR revisions, all SUD providers with COAs *will* need to use an approved ASAM Criteria assessment tool for level of care determinations. The approved ASAM tools (the free PDF or the electronic/software version) can be used as a standalone assessment for diagnosing substance use disorders or for co-occurring disorders. They can also be used alongside any existing assessment that a provider uses.

How will this tie into the new Co-occurring Disorders roll out which calls for an integrated assessment that addresses SUD, MH and Problem Gambling? Will we have to do yet another document that is "integrated" in order to be designated as a co-occurring program?

Co-occurring disorders programs can use The ASAM Criteria or Software as a standalone assessment for diagnosing co-occurring disorders.

How will ASAM integrate with MOTS? Will OHA cover those costs?

For SUD clients, MOTS captures two data points that relate to *The ASAM Criteria*: "Assessed Level of Care" and "Current Level of Care." These requirements will not change. Providers who use the Client Entry web portal should be familiar with these two data points. Providers who submit data by electronic means should be entering it into their EHR/EMR, and the submission process should pick up what MOTS needs. There should be no additional cost for this.

Please email the 1115 SUD Waiver team at sud.waiver@dhsosha.state.or.us to ask questions, offer feedback and to request support.