

# State policies governing outpatient substance abuse treatment services: Do they provide for necessary wrap-around services?

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# Background

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- Ancillary and wrap-around services have been significantly associated with treatment retention and outcomes
  - Transportation assistance, child care, housing assistance, employment counseling, etc.
- Certain services (e.g., child care, transportation assistance) are critical for low-income women seeking treatment
- IOM Committee on Crossing the Quality Chasm (2007) found significant problems in transitional care involving the coordination of services between substance abuse treatment facilities and needed community services.

# Study Questions

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- Do state outpatient substance abuse treatment program authorizing policies require programs to provide/offer ancillary and wrap-around services?
- Do state Medicaid policies include coverage for ancillary/wrap-around services as part of the substance abuse-specific coverage provisions?

# Data Sources and Methods

- State outpatient treatment authorizing policies
  - State statutory and administrative laws obtained via primary legal research using Lexis
  - State verification (55% response rate)
  - Policies effective as of 1/1/06
- State Medicaid policies
  - State Medicaid plans obtained from CMS
  - State Medicaid statutory and administrative laws obtained via primary legal research using Lexis
  - Compared to data available on SAMHSA web site and Kaiser Family Foundation Medicaid Benefits Database
  - Medicaid policies effective as of 1/1/06
- “State” includes 50 states plus the District of Columbia

# Categories of services examined

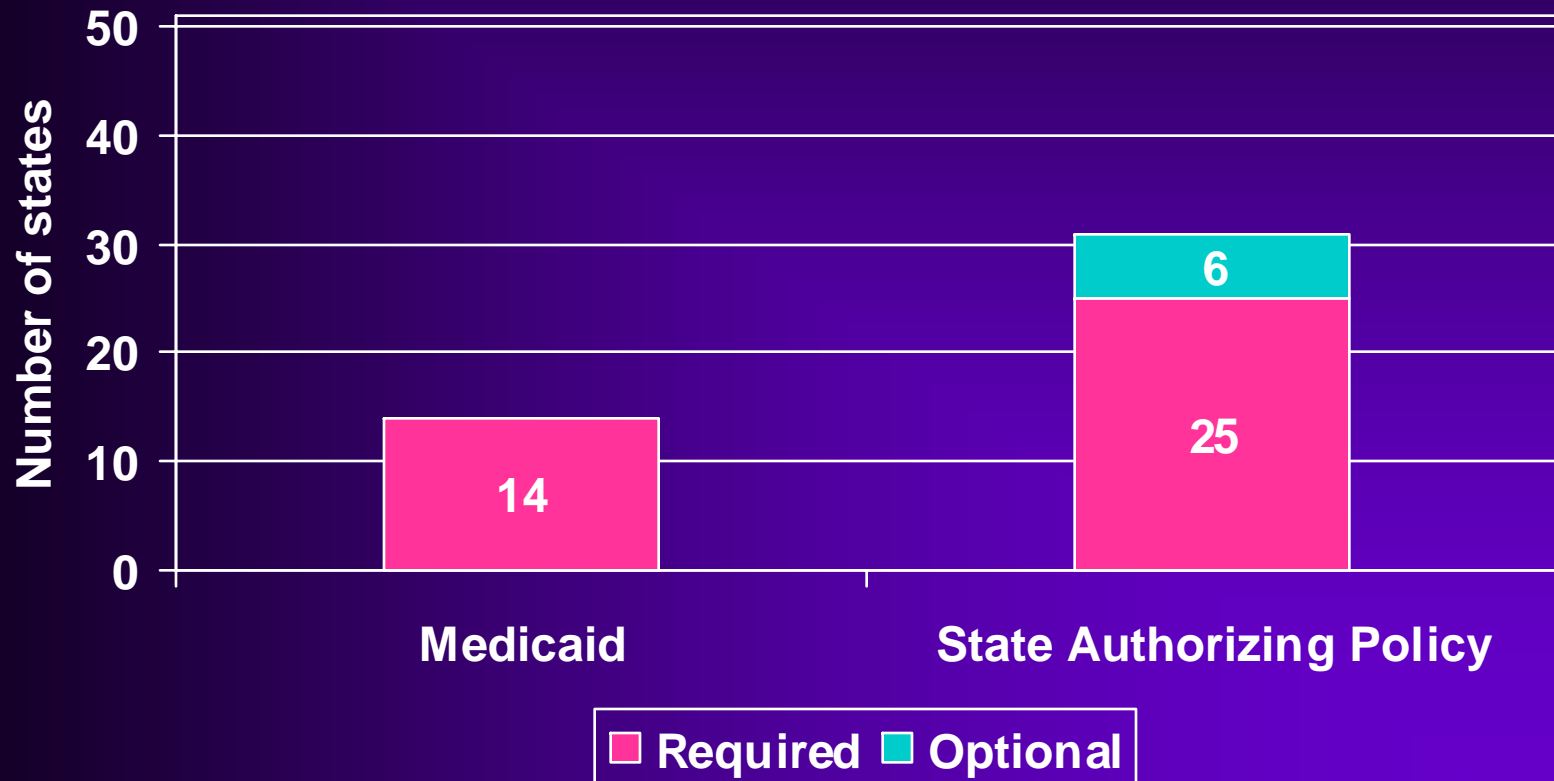
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- For both the authorizing and Medicaid policies:
  - Linkages to medical/social services
  - Case management
  - Employment counseling
  - Housing assistance
  - Transportation assistance
  - Childcare assistance
  - Relapse prevention
  - Continuing care/after care services
  - Discharge planning

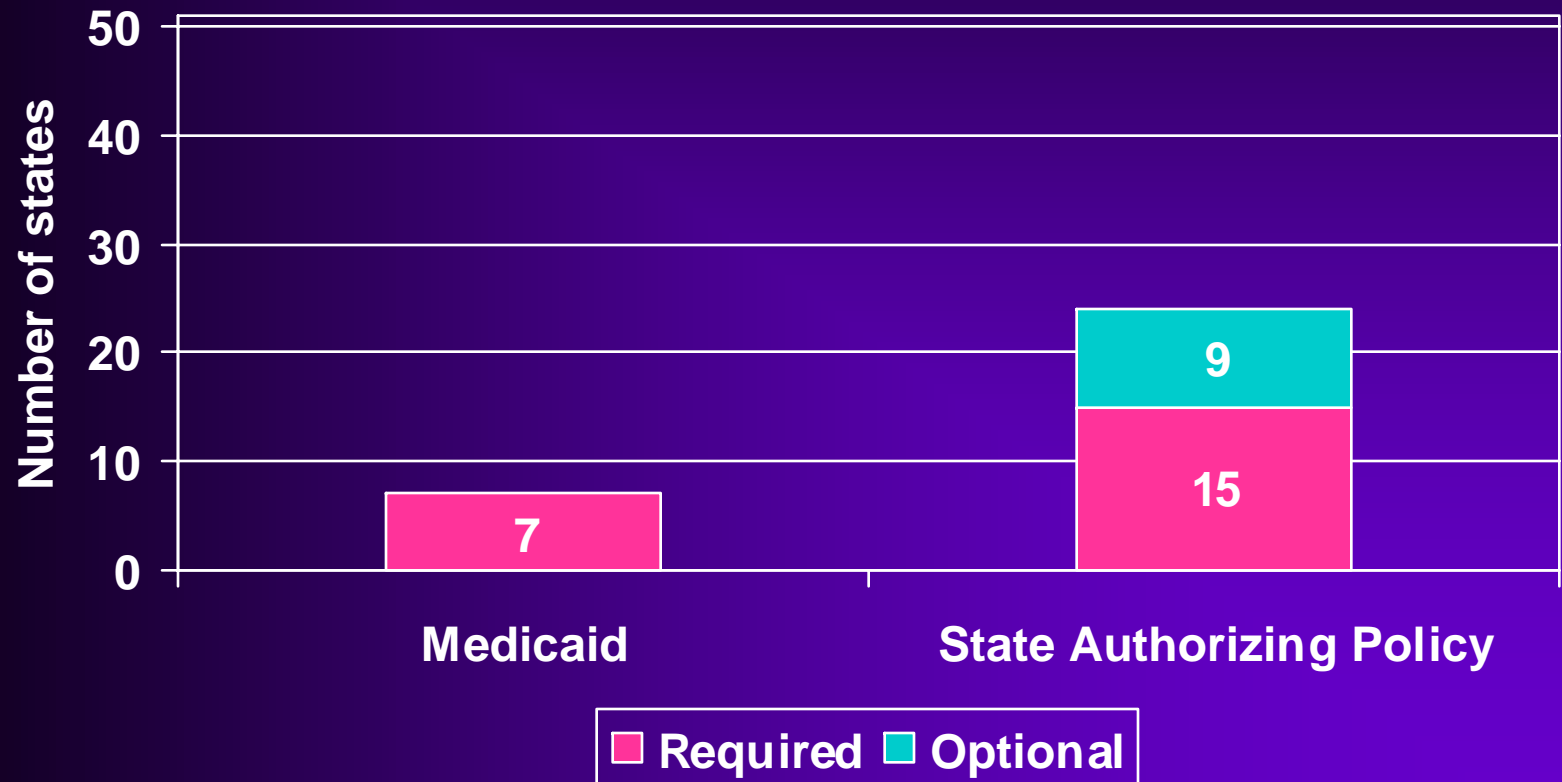
# Results

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# Linkages with Medical/Social Services

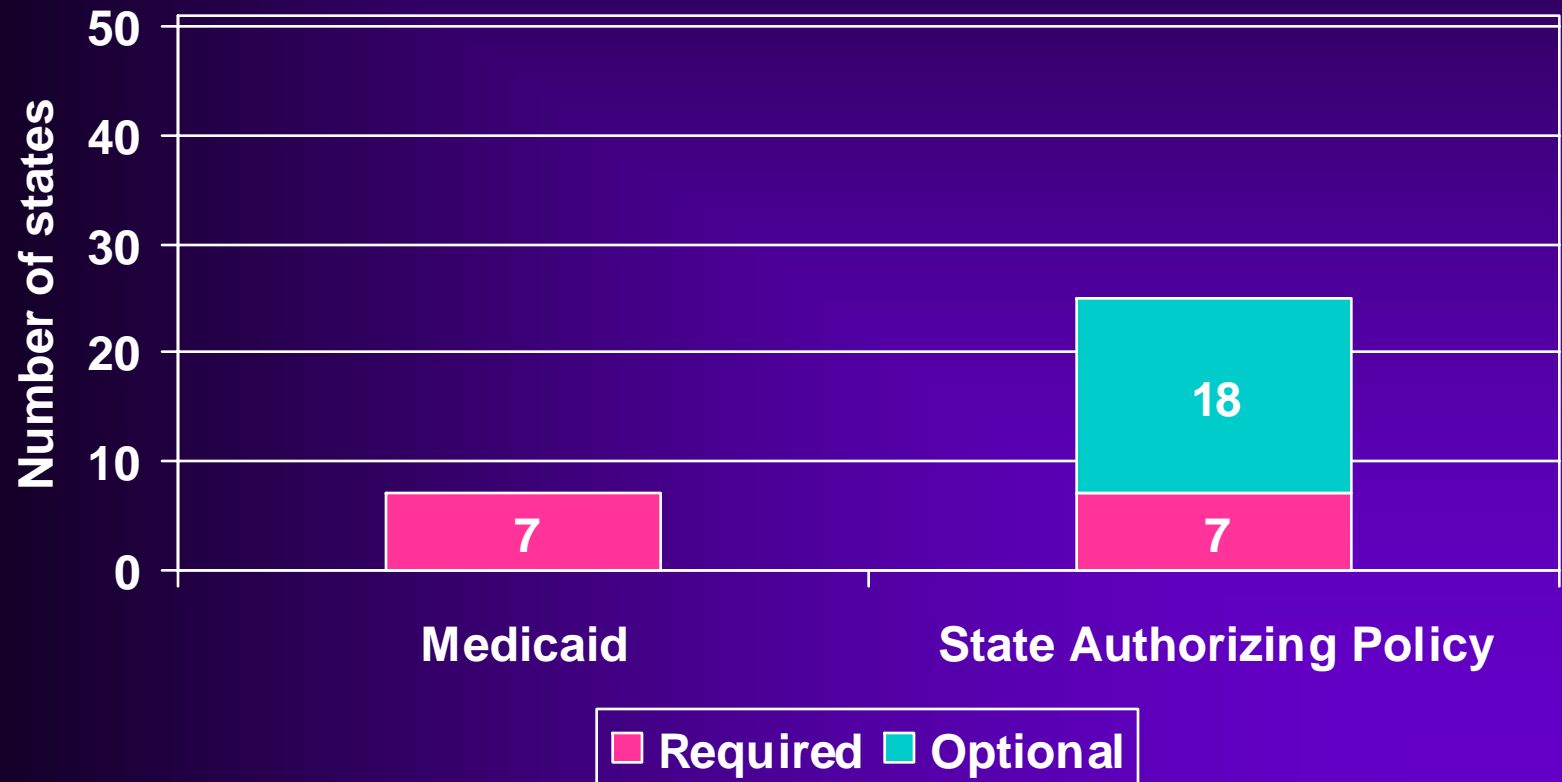


# Case Management

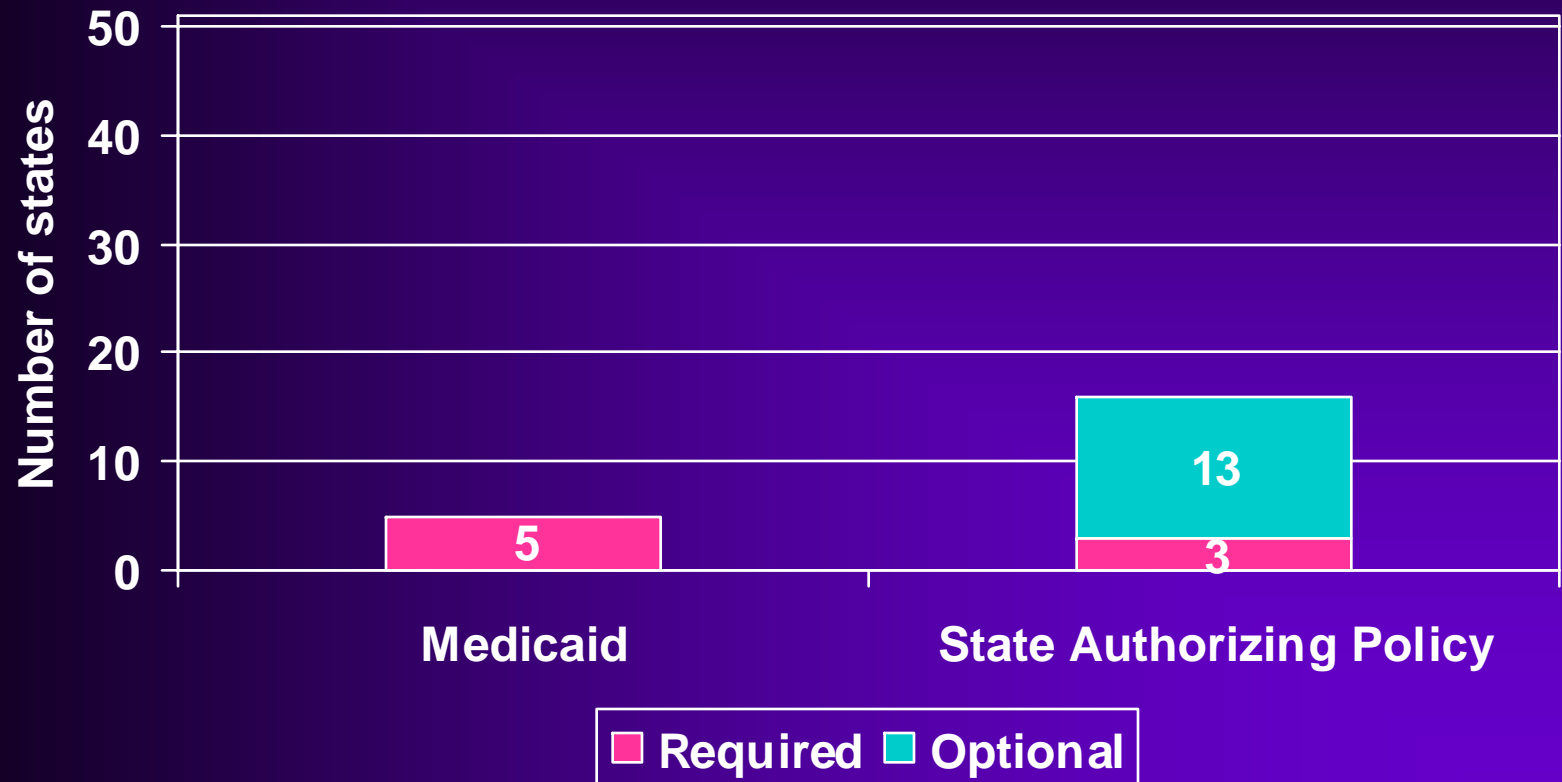




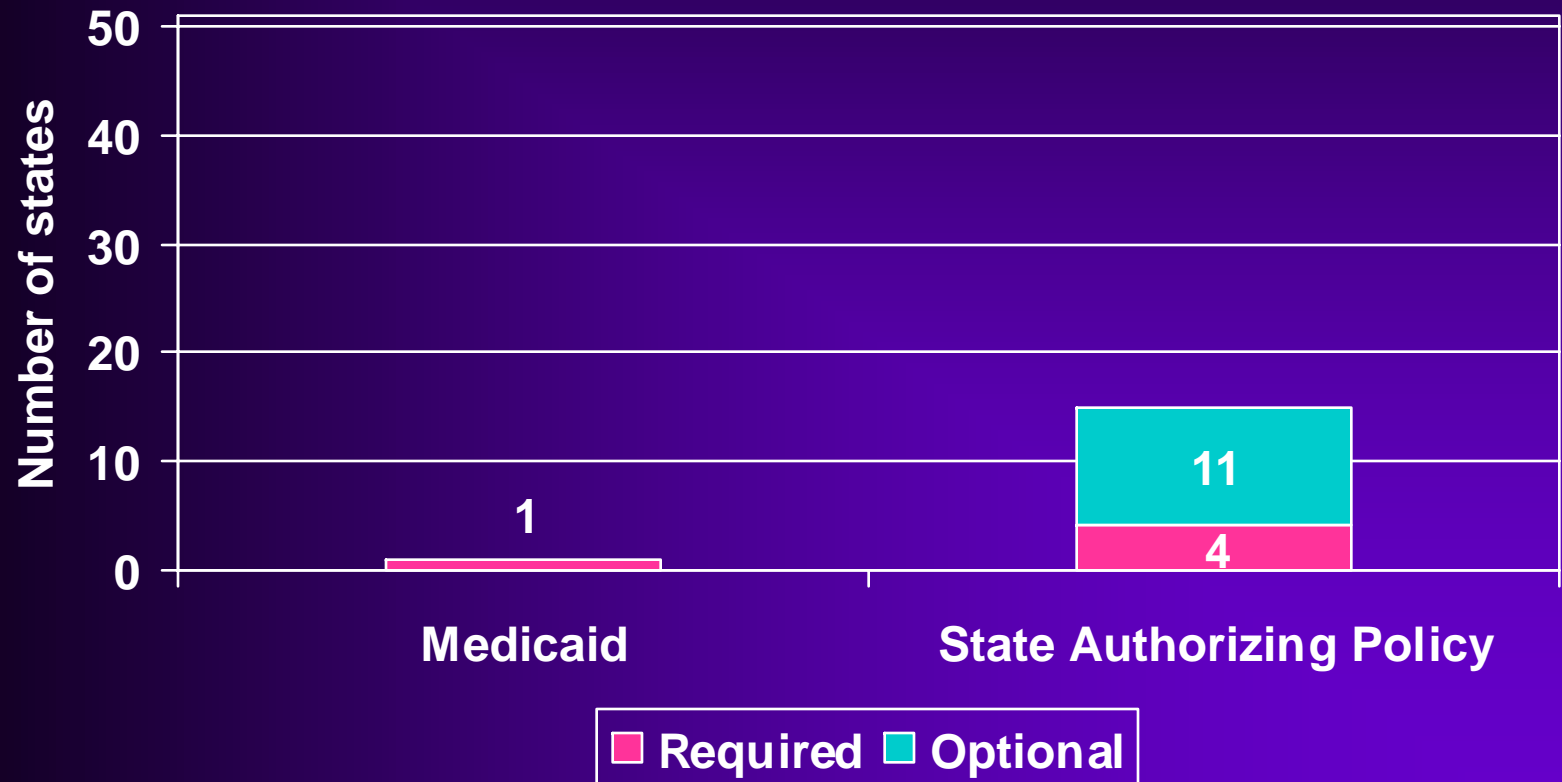
# Employment Counseling



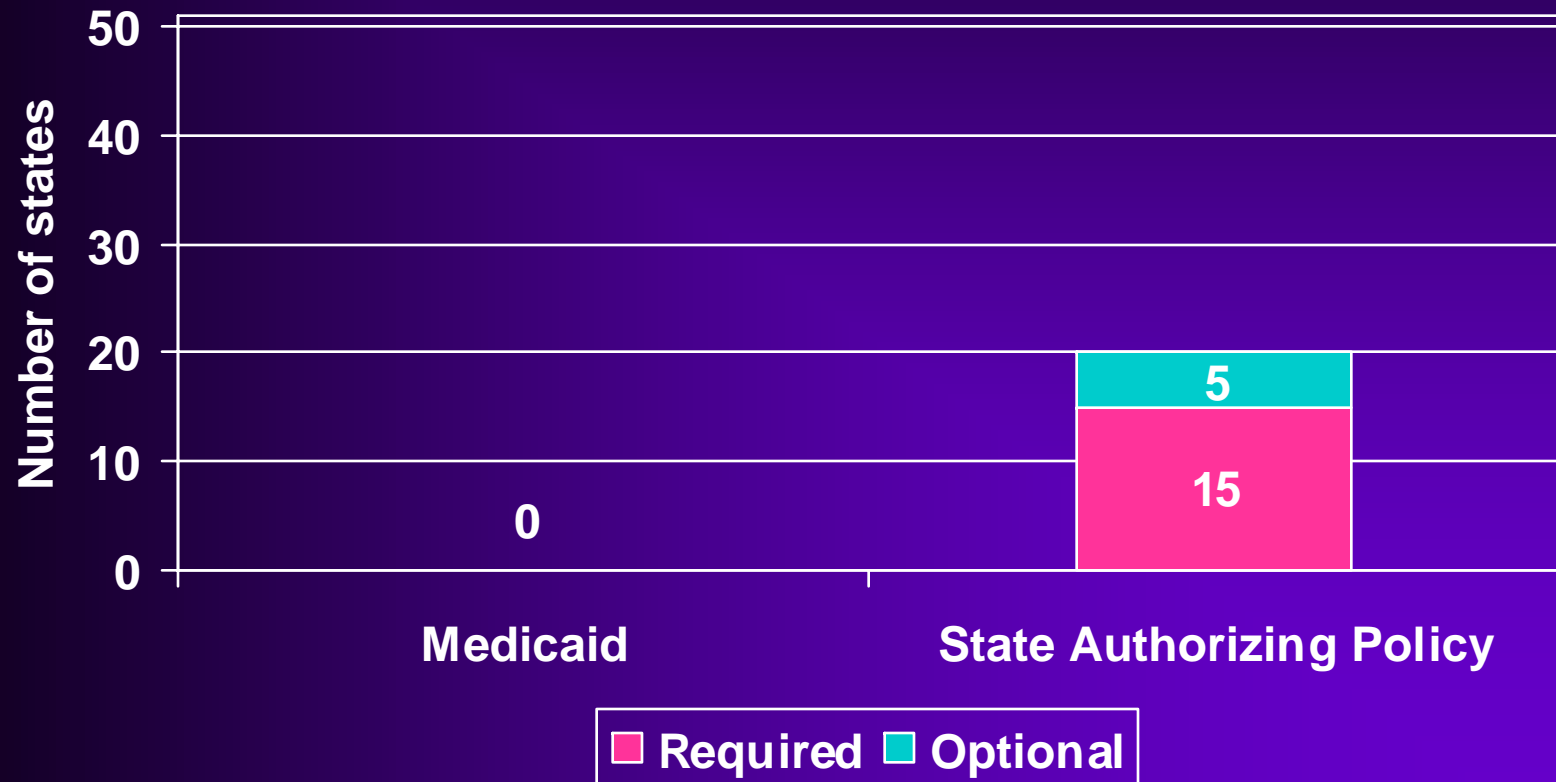
# Transportation Assistance



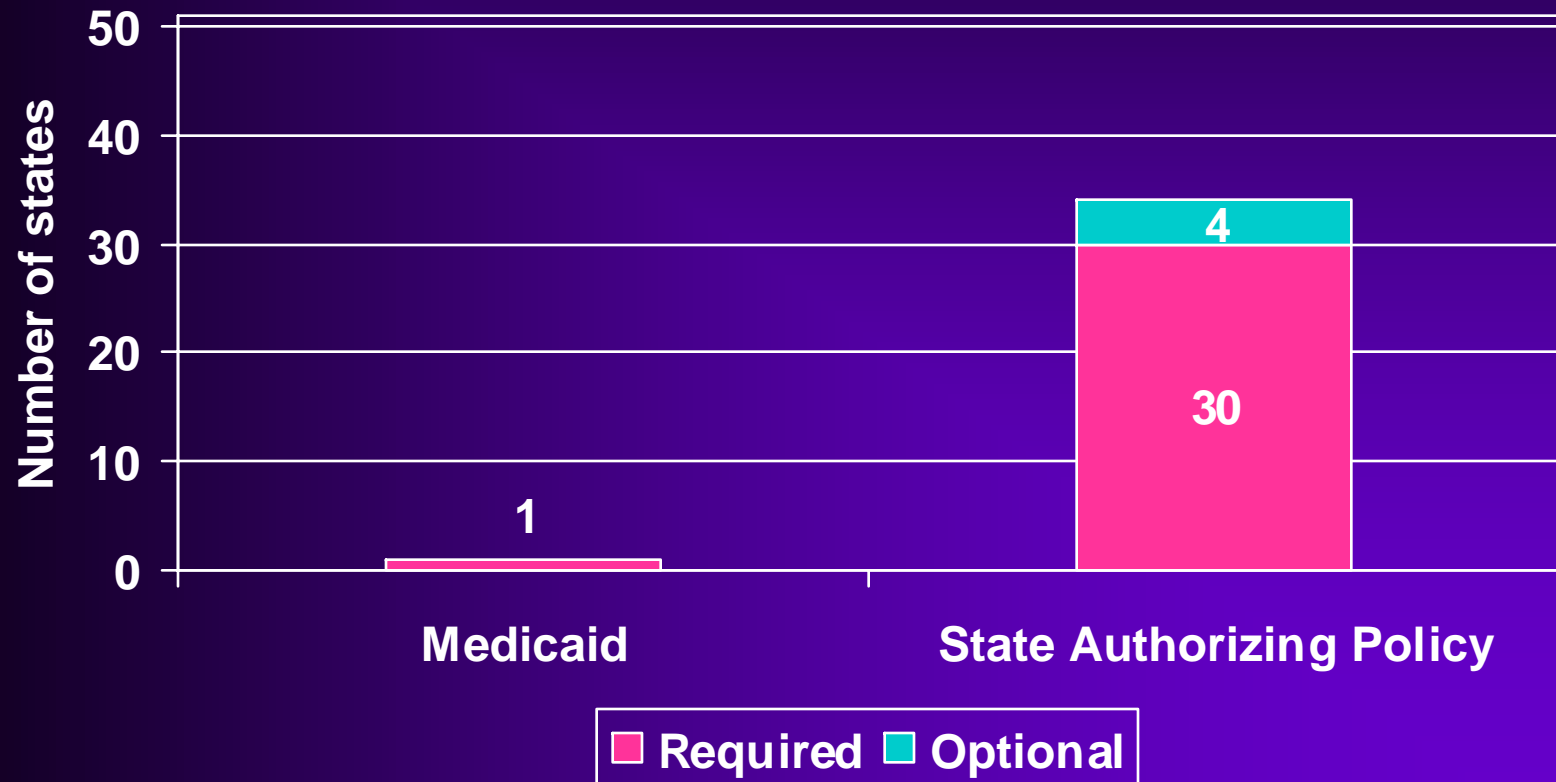
# Childcare Assistance



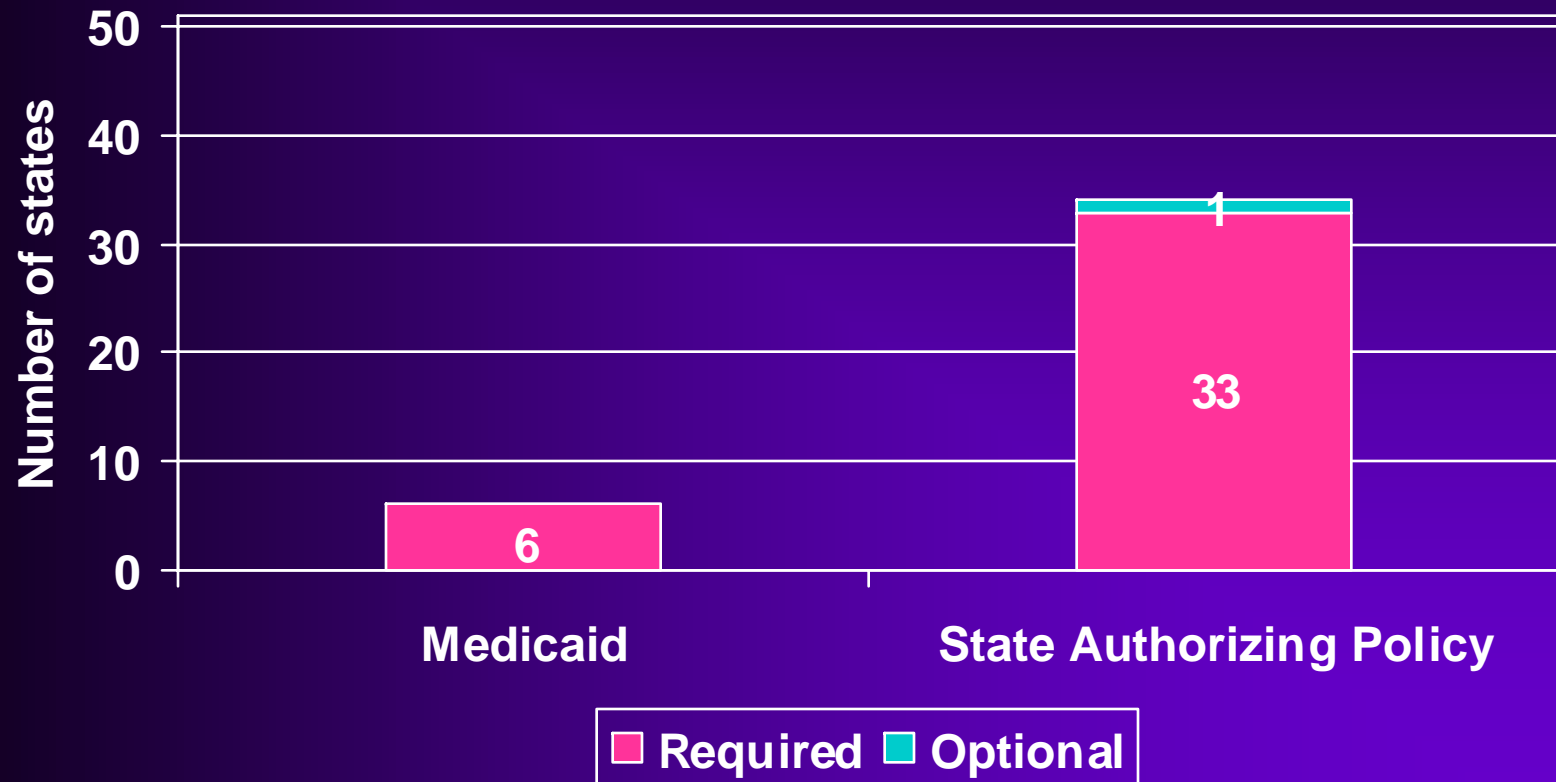
# Relapse Prevention



# Continuing care/after care services



# Discharge planning



# Implications

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- State authorizing policies for outpatient substance abuse treatment are more likely to require treatment-related services than ancillary services
  - Ancillary services are often considered optional services; as such, their likelihood of being offered may be limited.
- Substance abuse treatment-specific Medicaid provisions provide minimal coverage for necessary ancillary and wrap-around services
  - Possible that low-income substance abusing Medicaid recipients will not be able to seek out treatment because of limited ancillary services

# Limitations

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- Medicaid policy coding limited to substance abuse-specific coverage requirements
  - Need to examine broader Medicaid coverage provisions
- Data limited to 2006 only; changes since 1/1/06 not captured
- No linkages with actual treatment program practices or client outcomes



# Next steps

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- Data-related
  - Examine the broader Medicaid policy provisions
  - Verify Medicaid coding with state Medicaid officials
- Analysis-related
  - Examine relationship between state authorizing policy requirements for ancillary/transitional services and reported treatment program practices
  - Examine the relationship between Medicaid coverage requirements and treatment program provision of services for Medicaid clients