













#### ABH January Committee Meetings

Monday, January 10 Billing, 10 a.m.

Tuesday, January 11 ACCS, 2:30 p.m.

Friday, January 14
Children's Services,
10 a.m.
Corporate
Compliance, 10 a.m.

Tuesday, January 18 OTP, 9:30 a.m.

Wednesday, January 19
Quality & Outcomes,
10 a.m.

Thursday, January 20 RRS/TSS, 10 a.m.

Friday, January 21 MIDP/DUIL/SOA, 10 a.m.

Tuesday, January 25 DEI&J, 12 p.m.

Friday, January 28 CBHI, 10 a.m.

## **Best Wishes!**

Connie Peters, ABH's Vice President for Addiction Services is retiring this month. Connie has been with ABH and our predecessor organization for 21 years. Her achievements are legion. She spearheaded the Massachusetts Coalition for Addiction Services, bringing together a dozen disparate but likeminded advocacy organizations to strengthen support for the expansion of SUD prevention, treatment and recovery support services, under the Bureau of Substance Addiction Services or BSAS. Connie is also a national leader. As Pres-



ident of the then-State Associations of Addiction Services, Connie skillfully led the merger of that organization with the National Council for Behavioral Health, now the National Council for Mental Wellbeing.

Anyone who knows Connie knows how dedicated she is to improving addiction treatment services and we will miss her dearly. We wish Connie all the best as she embarks on this new phase of life.

## **Extension of Methadone Take-home Flexibilities**

SAMHSA has extended the methadone take-home flexibilities put in place under the COVID-19 Public Health Emergency. Take-home flexibilities will be extended for one year after the Covid-19 Public Health Emergency ends. The extension and its terms go into effect at the end of the Public Health Emergency. Once in effect, the exemption will replace and supersede the exemption announced in SAMHSA's OTP guidance issued on March 16, 2020 (see OTP guidance issued on March 16, 2020 (PDF | 216 KB).

The full guidance and FAQs are available at Methadone Take-Home Flexibilities Extension Guidance | SAMHSA.

# **Update on ARPA Spending Bill**

On December 2, the State House of Representatives and Senate voted to approve a \$4B compromise spending plan to allocate a portion of federal American Rescue Plan Act (ARPA) dollars and \$1.5B in surplus tax revenue. The Governor then signed the majority of the bill into law, though he did return the bill with vetoes and amendments for the purpose of streamlining the process for fund distribution. This includes removing the Essential Employee Premium Pay program advisory panel (to which we are named) and putting EOHHS in charge of the BH Trust Fund commission (to which we are named) and the BH trust fund expenditures. The final spending plan includes several provision that ABH supports, including:

- \$400M reserve for to enhance and expand access to mental and behavioral health supports and services, including:
  - \$110M for loan repayment programs for doctors (psychiatrists and psychologists/primary care physicians), master's-level professionals (NPs, PAs, APRNs, pediatric clinical nurse specialists and licensed behavioral health providers, bachelor's-level professionals (community health workers, recovery coaches and family partners), inpatient mental health nurse practitioners and inpatient mental health workers. These funds are available to individuals working in community health centers, community mental health centers (note: current program interprets this to include licensed community SUD programs), and acute psychiatric units.
  - \$500k on a public awareness campaign about the loan repayment program,
  - ♦ \$10M in grants for PACT services,
  - \$15M to expand co-response models with police departments and mental health clinicians,
  - \$5M for an online portal to facilitate the coordination of services for individuals who are boarding with behavioral health needs.
  - \$1.5M to advance adoption of pediatric behavioral health urgent care,
  - \$5M to promote the awareness and use of available behavioral health services, and
  - \$198.7M in a Behavioral Health Trust Fund to be administered by the Department of Public Health, with recommendations from a behavioral health advisory commission to which ABH is named a commission member;
- \$30M reserve for the human service workforce, including \$16.5M for loan repayment programs;
- \$150M reserve to support the production of permanent supportive housing;
- \$500M for COVID-19 Essential Employee Premium Pay Program, to disperse \$500-\$2,000 of premium pay for in-person workers with household incomes at or below 300% FPL; and,
- \$300M reserve for Medicaid home- and community-based services (ABH understands this funds prior commitments).

ABH offers our sincere gratitude to the entire State Legislature, and especially Senate President Spilka, House Speaker Mariano, and Conference Committee members Chair Michlewitz, Chair Rodrigues, Vice Chair Friedman, Vice Chair Ferrante, Rep. Smola and Senator O'Connor. This historic infusion of funds into our system would not be possible without their leadership and the continued recognition of the essential behavioral health services provided by our members.

As always, please do not hesitate to reach out with any questions or concerns!

# ABH COVID-19 Landing Page

ABH has created a
COVID-19
resource page
where we are
collecting the
guidance most
relevant to ABH
members:

https://www.abhma ss.org/newsroom/a nnouncements/guid ance-on-covid-19.html.

# **Updated Residential and Congregate Care Programs COVID-19 Guidance**

The Executive Office of Health and Human Services has updated the Residential and Congregate Care Programs 2019 Novel Coronavirus (COVID-19) Guidance as of November 19, 2021. This updated document provides new guidance for admitting new residents into congregate care settings as follows:

- New admissions should be assessed at least once per day for signs and symptoms of COVID-19 infection, including fever.
- New admissions should have point-of-care antigen (i.e. BinaxNOW test) or molecular testing performed at admission.
- For congregate care settings that follow quarantine requirements for new admissions, point-of-care antigen or molecular testing may replace quarantine if the following conditions are met: the test result is negative and the new admission does not have any signs or symptoms of COVID-19. If these conditions are met, then they may be placed in a room with current residents who are fully vaccinated and/or recovered from COVID-19 within the past three months, if a private room is not available, and participate in activities.

A link to the updated guidance document can be found

here: <a href="https://www.mass.gov/info-details/covid-19-public-health-guidance-and-directives">https://www.mass.gov/info-details/covid-19-public-health-guidance-and-directives</a>.

Additionally, EOHHS Secretary Sudders has written a <u>holiday letter</u> to all families with a loved one in congregate care. The letter provides helpful guidance on vaccinations, visits and travel guidance.

# **Statewide Community Crisis Options**

The Massachusetts Behavioral Health Partnership in collaboration with Emergency Services Program (ESP) providers and other key stakeholders has developed new marketing materials to ensure individuals are aware of their community-based alternatives when they are experiencing a crisis related to mental health or substance disorders. The statewide ESP provides 24/7/365 crisis help – without you or your loved one having to go to a hospital emergency room. Here is the ESP overview video and brochure for view/download below: MA Behavioral Health Emergency Services Program from Beacon Health Options.

#### **Brochures:**

- Digital ESP Mobile Crisis Trifold English
- Digital ESP Mobile Crisis Trifold Spanish
- For Print ESP Mobile Crisis Trifold English
- For Print ESP Mobile Crisis Trifold Spanish

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# MassHealth MCE Bulletin: Behavioral Health Urgent Care Providers

As you may know, as part of the Baker-Polito Administration's Roadmap for Behavioral Health Reform, MassHealth is implementing key initiatives to ensure individuals are able to access mental health and addiction treatment services where and when they need them. A major component of this vision is to establish and expand timely access to robust urgent behavioral health treatment.

We are excited to share that MassHealth has published a <u>bulletin</u> outlining the process for MassHealth-enrolled Mental Health Centers (MHCs) to qualify as Behavioral Health Urgent Care providers. As detailed in the <u>bulletin</u>, Behavioral Health Urgent Care providers must increase timely access to treatment for MassHealth members, including offering same- or next-day appointments and night and weekend hours.

The bulletin, effective January I, 2022, describes the Behavioral Health Urgent Care program and establishes the requirements for MCEs regarding MHCs that are participating in the Behavioral Health Urgent Care program and that are a part of the MCE's network.

Additionally, this bulletin guides the MassHealth behavioral health vendor to identify MHCs that wish to participate in the Behavioral Health Urgent Care program.

The bulletin can be viewed/downloaded here: <a href="https://www.mass.gov/doc/managed-care-entity-bulletin-76-behavioral-health-urgent-care-providers/download">https://www.mass.gov/doc/managed-care-entity-bulletin-76-behavioral-health-urgent-care-providers/download</a>.

MassHealth has provided the following email for general questions to be directed to MassHealthOBHQuestions@mass.gov.

We look forward to working with our members, the MCEs, and MassHealth on ensuring a successful roll out and implementation of this critical initiative.

## **Interesting Reads**

- Staffing woes plague mental health agencies. Commonwealth Magazine.
- Hospitals help mental health patients by sending them away. Commonwealth Magazine.
- '<u>I Can Go Anywhere</u>': How Service Dogs Help Veterans With PTSD. Kaiser Health News.
- <u>California Joins States Trying to Shorten Wait Times for Mental Health Care</u>. Kaiser Health News.
- The Judge Who Keeps People Out of Jail: In northern New Mexico, a district court judge has a radical approach to addressing addiction. Washington Post.
- Editorial: Mental health access should top post-pandemic priorities. Boston Globe.
- Biden's drug czar wants to expand use of addiction medication. Washington Post.
- Watch: No Extra Resources for Children Orphaned by Covid. PBS News Hour. Kasier Health News.