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KATIE HOBBS
GOVERNOR

CARMEN HEREDIA
DIRECTOR

January 27, 2025

The Honorable Katie Hobbs Governor of Arizona State Capitol 1700 West Washington Phoenix, AZ 85007

The Honorable Warren Petersen, President Arizona State Senate 1700 West Washington Phoenix, AZ 85007

The Honorable Steve Montenegro, Speaker Arizona State House of Representatives 1700 West Washington Phoenix, AZ 85007

Dear Governor Hobbs, President Petersen, and Speaker Montenegro:

In accordance with the A.R.S. §36-2907.14 and §36-2907.15, please find the enclosed report regarding the Outpatient Treatment Program (OTP) Plan Reporting and 24/7 Access Point Standards. Do not hesitate to contact me at (602) 417-4458 if you have any questions or would like additional information.

Sincerely,

Carmen Heredia Director

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January 1, 2024 - December 31, 2024

Katie Hobbs, Governor

Carmen Heredia, Director Arizona Health Care Cost Containment System



Per Arizona Revised Statute § 36-2907.14, "the Administration and its contractors may reimburse an Opioid Treatment Program provider for enrolled members only if the provider demonstrates enforcement of each plan contained in the annual report." Additionally, § 36-2907.15 indicates that the Administration and the Department of Health Services shall submit a report outlining:

- 1. The standards for designating centers of excellence,
- 2. The statewide list of designated centers of excellence and
- 3. A summary of the performance of the centers of excellence.

#### **Opioid Treatment Program Annual Reporting**

A.R.S. § 36-2907.14 requires all currently established Opioid Treatment Program (OTP) providers receiving Medicaid funding to submit an annual report to the Arizona Health Care Cost Containment System (AHCCCS). Additionally, those providers interested in establishing new OTPs are required to submit reports for review to receive AHCCCS funding. This reporting requires that providers supply the following:

- 1. A security plan,
- 2. A neighborhood engagement plan,
- 3. A comprehensive patient care plan,
- 4. A community relations and education plan, and
- 5. A diversion control plan.

In November 2024, AHCCCS received 54 plans from OTPs registered with AHCCCS and began reviewing the submissions. AHCCCS determined that two programs experienced leadership turnover in late 2024, and the new staff was unaware of the OTP's legislative reporting responsibilities. One agency failed to submit its plans. One agency, with two locations, submitted one partially complete set of plans for one of their locations, but no plans were submitted for the second location. AHCCCS provided technical assistance to these two provider agencies and their new leadership, and the resulting reports are complete and sufficient. There was one insufficient submission, and this provider received a letter of insufficiency requiring the resubmission of all items specified as insufficient, within 30 days. This provider has subsequently submitted all required components, and their report is now considered sufficient.

The remaining submissions were timely and complete, have been determined sufficient in all reporting areas, and were officially notified of their sufficiency on January 14, 2025.

#### 24/7 Access Points (previously known as Centers of Excellence)

As stipulated in A.R.S. §36-2907.15, AHCCCS and the Arizona Department of Health Services (ADHS) were required to develop standards for the designation of Centers of Excellence, or 24/7 Access Points, for treating opioid use disorders statewide. AHCCCS and ADHS developed the standards that included but were not limited to those outlined in the legislation. Additional requirements were added to ensure increased clinical and care coordination in alignment with the AHCCCS-integrated whole-person-centered care model. These standards are identified in Appendix A.

The 24/7 Access Point standards were finalized and posted to the AHCCCS website in December 2019, before AHCCCS-contracted health plans received the final standards for contracting and oversight of their OTP provider networks. The 24/7 Access Point providers listed on the AHCCCS website and identified in Appendix B meet the required standards.

The statewide learning collaborative activities between the 24/7 Access Point providers included the AHCCCS Regional Behavioral Health Authorities, all 24/7 Access Point providers, other opioid treatment programs, and AHCCCS staff. Virtual meetings began in April 2021 and have continued quarterly. These collaborative meetings have been focused on current staffing needs, ongoing community outreach strategies, planning and logistics surrounding mobile MAT clinics, alignment to updated 42 CFR Part 8.11 and 8.12 federal requirements, and best practices for open access to the community. The collaborative agrees that at this time, there is no need to increase 24/7 Access Points within the state.

#### APPENDIX A

#### Standards for Designation of 24/7 Access Points

- Must have obtained AHCCCS approval for each plan identified within A.R.S. 36-2907.14.
- Provides a 24/7 Access Point for individuals with Opioid Use Disorder (OUD) to receive immediate connection to Medication Assisted Treatment (MAT) services inclusive of morning, afternoon, evening, and late evening dosing hours.
- Provides all three FDA-approved medications for Medication Assisted Treatment (Methadone, Buprenorphine, Naltrexone), or be able to demonstrate dedicated partnerships with other providers in the community for warm handoffs that will occur on the same day.
- Provides individuals seeking OUD treatment access to psychosocial and recovery support services as a part of the MAT model. This shall be demonstrated with onsite 24/7 Access Point licensed general counselors and certified Peer Recovery Support Specialists.
- Must demonstrate the ability to provide and review information regarding Opioid
  Treatment Program Providers and Facilities with potential and current members
  and identified family members interested in treatment.
- Must demonstrate the ability to provide and review information regarding officebased opioid agonist treatment providers.
- Directly provides, or can demonstrate a direct relationship with identified partners, for whole person care through an integrated model, to address behavioral and physical health needs.
- Must conduct ongoing clinical assessments of patients through a multidisciplinary treatment planning process that indicates services and care levels through a person-centered approach.
- Must utilize ongoing review strategies to identify and prepare patients for graduation from 24/7 Access Points to other outpatient services. Providers must share with patients the goal of graduation to include:
  - a. Transition to OTP and other MAT providers in the community,
  - b. Transition to other outpatient primary care providers in the community through coordination with health plan and warm handoff to a new provider,

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- c. Transition to other outpatient counseling services in the community through coordination with the health plan and a warm handoff to the new provider.
- Provider must demonstrate the ability to provide reporting on:
  - a. Treatment capacity,
  - b. Quality of care metrics,
  - c. Patient outcomes, and
  - d. Member satisfaction.
- Provider must participate in statewide learning collaborative focused on:
  - a. Sharing of best practices and
  - b. Peer-to-peer support between 24/7 Access Point locations.



### **APPENDIX B**

24/7 Access Point Providers

#### CODAC Health, Recovery, and Wellness

380 E. Ft. Lowell Road, Tucson, AZ 85705 520-202-1786

#### Community Bridges, East Valley Addiction Recovery Center

560 S. Bellview, Mesa, AZ 85204 480-461-1711

#### **Community Medical Services**

2806 W. Cactus Road, Phoenix, AZ 85029

602-607-7000

#### **Intensive Treatment Systems, West Clinic**

4136 N. 75th Ave #116 Phoenix, AZ 85033 623-247-1234

