

Role of SAPT Block Grant in Non-Medicaid Expansion States

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Alcohol and Other Drug Abuse
Services (DAODAS)

South Carolina Department of Alcohol and Other Drug Abuse Services

Budget - \$88 million - All Sources

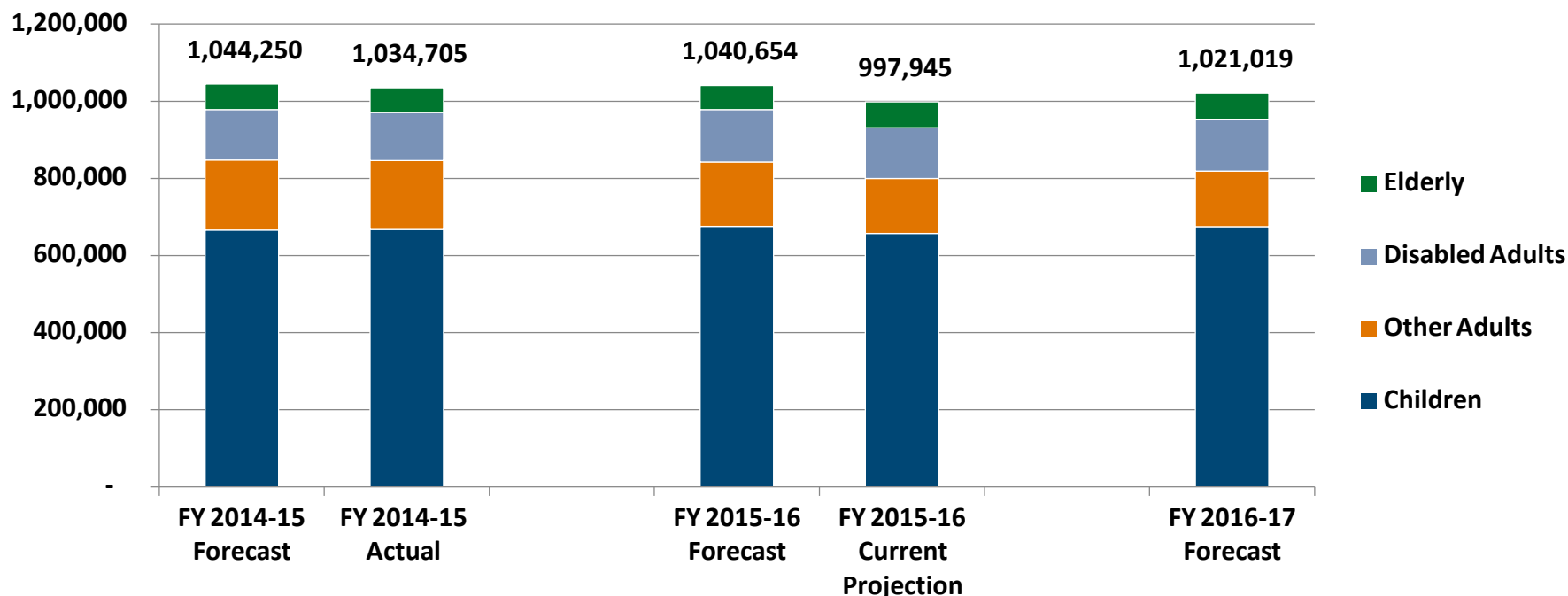
- SSA -\$33 Million / County Government, Grants - \$17 Million / Medicaid - \$16 million / Client Fees - \$13 Million / Other - \$8 Million
- Clients – 39,000 Intakes / 32,000 Admissions
- Strategic Goals – Health Care Integration / Capacity Building / Recovery
 - 2 Year Planning Process – Balanced Score Card Approach
 - 6 Visionary Objectives – Collaboration / Health Care Integration / Quality Funding Impact / Service Continuum Organizational Capacity
 - Organizational Structure – DAODAS is a Cabinet Agency / Contract with 33 Providers - 46 Counties

South Carolina Department of Health and Human Services ACA Mandates / Progress

41 ACA Related Projects

- Single Streamlined Application
- Interface with Federally Facilitated Exchange
- 2011 - Express Lane Eligibility – Children (500,000)
 - Automatic Medicaid Renewals for Children with SNAP / TANF
- 2012 - Express Lane Eligibility - New Applicants (200,000)
 - New Applicant - Eligible Child was SNAP/TANF Eligible but not eligible for Medicaid – Automatic Eligibility
- Staffing - Created dedicated processing centers, launched 2nd and 3rd shifts at key sites

Full-Benefit Membership



- Full-benefit membership continues to hold around 1 million, even with required restart of annual reviews.
 - Added an additional month of prior notice of reviews.
 - Authorized plans to outreach to members to complete annual review forms.



Medicaid Accountability and Quality Improvement Initiative

Health Outcomes Initiative

(ACA Plan B)

General Appropriations Act of 2014 = Act 101

Goal: To improve community health , DHHS may explore various health outreach, education, patient wellness and incentive programs and may pilot health interventions targeting diabetes, smoking cessation, weigh management, heart disease, and other health conditions. These programs may be expanded as their potential to improve health and lower costs as identified by DHHS.

Substance Abuse System Impact

General Appropriations Act of 2015 – Act 286

Defined Safety Net Providers – Local Alcohol and Drug Abuse Authorities

\$2 Million - To provide alcohol and drug rehabilitation services and any other services offered by Provider for the low income uninsured, and contribute to the overall improvement of the State's health quality.

General Appropriations Act of 2016 – Act 91

Healthy Outcome Plans (HOP)

- HOP focuses on high-utilizers of emergency rooms and/or inpatient services
 - HOPs are paid for each enrollee under care plan management
 - 60% of enrollees screened are in high need of further evaluation for behavioral health intervention
 - 8% reduction in preventable ER visits, 11% for those with care plans
 - 9% reduction in chronic disease-related preventable inpatient stays
- Enrollment update, as of December 31, 2015:
 - 13,779 HOP participants against an FY 2015-16 goal of 13,314
 - 89% of enrollees have a developed care plan so far

44 HOPs, including all 56 Medicaid-designated hospitals

70 primary care safety net providers
(FQHC, RHC, Free Clinic)

30 participating behavioral health clinics
(DMH, DAODAS)



South Carolina Department of Health and Human Services						
HOP Comparative Enrollment - December 2015 ¹						
Hospital	SC Rural	FY2016 Target Population	Enrolled	Percent Enrolled ²	Total Participant Care Plan	Percent Care Plan ³
Abbeville County Hospital	R	79	86	109%	86	100%
Aiken Regional Medical Center		198	314	159%	314	100%
Allendale County Hospital	R	79	76	96%	76	100%
AnMed Health		523	452	86%	445	98%
Baptist Easley Hospital		123	115	93%	112	97%
Barnwell (Southern Palmetto Hospital)	R	79	67	85%	66	99%
Beaufort Hospital		298	188	63%	188	100%
Cannon Memorial Hospital		79	35	44%	35	100%
Carolina Pines		79	96	122%	96	100%
Charleston Tri-County		2,439	1,824	75%	1,215	67%
Chester County Hospital	R	79	46	58%	46	100%
CHS - Florence		113	71	63%	18	25%
Clarendon Memorial Hospital	R	123	125	102%	125	100%
Coastal Carolina	R	114	81	71%	79	98%
Colleton Medical Center	R	244	184	75%	179	97%
Conway Medical Center		252	280	111%	280	100%
Edgefield County Hospital	R	79	105	133%	104	99%
Fairfield Memorial Hospital	R	79	52	66%	52	100%
Georgetown		254	392	154%	392	100%
Grand Strand General Hospital		268	356	133%	356	100%
Greenville Health System		1,557	2,365	152%	1,799	76%
Hampton Regional Medical Center	R	79	82	104%	81	99%
Hilton Head Hospital		89	63	71%	63	100%
KershawHealth Medical Center		92	93	101%	92	99%
Lake City Community Hospital	R	79	56	71%	56	100%
Lexington Medical Center		441	343	78%	343	100%
Loris Community Hospital		137	211	154%	211	100%
Marion County Medical - CHS	R	208	80	38%	80	100%
McLeod Health Cheraw*/**	R	120	198	165%	198	100%
McLeod Health Dillon	R	127	152	120%	137	90%
McLeod Regional Med Ctr		578	611	106%	548	90%
Newberry County Hospital	R	117	107	91%	89	83%
Oconee Memorial Hospital		152	234	154%	233	100%
Palmetto Health Richland		1,043	986	95%	954	97%
Piedmont Medical Center		309	383	124%	383	100%
Providence Hospital		284	294	104%	294	100%
Self Regional Healthcare		265	342	129%	341	100%
Spartanburg Regional Medical		766	823	107%	815	99%
Springs Memorial		113	85	75%	55	65%
St. Francis (Bon Secours)		382	535	140%	432	81%
The Regional Medical Center		249	238	96%	238	100%
Tuomey Regional Medical		230	256	111%	256	100%
Upstate Carolina Medical		135	125	93%	125	100%
Wallace Thomson (Union Medical Center)	R	102	96	94%	88	92%
Williamsburg Regional	R	79	76	96%	76	100%

FY 2017 Healthy Outcomes Program Distribution By Provider						
County/Agency	\$10k base	Poverty Level	Uninsured	Total	% of HOP	FY16 %
Aiken	\$10,000	\$19,974	\$22,030	\$52,004	3.25%	3.02%
Allendale/Hampton/Jasper	\$10,000	\$9,258	\$11,621	\$30,880	1.93%	3.04%
Anderson/Oconee	\$10,000	\$34,717	\$32,607	\$77,324	4.83%	4.49%
Barnwell	\$10,000	\$2,962	\$4,066	\$17,029	1.06%	1.72%
Beaufort	\$10,000	\$22,968	\$17,478	\$50,446	3.15%	3.04%
Berkeley	\$10,000	\$26,258	\$22,177	\$58,434	3.65%	3.19%
Charleston	\$10,000	\$47,862	\$46,993	\$104,854	6.55%	4.83%
Cherokee	\$10,000	\$8,114	\$9,950	\$28,064	1.75%	2.03%
Chester	\$10,000	\$4,648	\$5,203	\$19,851	1.24%	1.82%
Clarendon	\$10,000	\$4,817	\$6,646	\$21,462	1.34%	1.83%
Colleton	\$10,000	\$6,051	\$6,676	\$22,727	1.42%	1.87%
Darlington	\$10,000	\$9,236	\$13,981	\$33,217	2.08%	2.15%
Dorchester	\$10,000	\$17,882	\$14,176	\$42,058	2.63%	2.80%
Fairfield	\$10,000	\$3,053	\$3,910	\$16,963	1.06%	1.73%
Florence	\$10,000	\$17,757	\$20,221	\$47,978	3.00%	2.80%
Georgetown	\$10,000	\$8,498	\$9,504	\$28,002	1.75%	2.07%
Greenville	\$10,000	\$64,225	\$55,843	\$130,069	8.13%	5.79%
Greenwood/Edge/Abb/McC	\$10,000	\$17,817	\$21,355	\$49,173	3.07%	4.26%
Horry	\$10,000	\$47,125	\$40,680	\$97,805	6.11%	4.06%
Kershaw/Lee/Chesterfield	\$10,000	\$18,532	\$20,552	\$49,083	3.07%	3.71%
Lancaster	\$10,000	\$10,547	\$10,955	\$31,502	1.97%	2.23%
Laurens	\$10,000	\$9,087	\$10,986	\$30,073	1.88%	2.13%
Lexington/Richland	\$10,000	\$76,696	\$76,838	\$163,534	10.22%	8.15%
Marion/Dillon/Marlboro	\$10,000	\$13,626	\$19,229	\$42,856	2.68%	3.39%
Newberry / Saluda	\$10,000	\$9,020	\$8,622	\$27,642	1.73%	3.55%
Orangeburg/Calhoun/Bamberg	\$10,000	\$17,059	\$22,266	\$49,325	3.08%	3.68%
Pickens	\$10,000	\$15,742	\$15,699	\$41,441	2.59%	2.63%
Spartanburg	\$10,000	\$43,346	\$39,495	\$92,841	5.80%	4.20%
Sumter	\$10,000	\$14,361	\$16,320	\$40,681	2.54%	2.52%
Union	\$10,000	\$3,518	\$3,834	\$17,352	1.08%	1.78%
Williamsburg	\$10,000	\$5,223	\$7,873	\$23,096	1.44%	1.83%
York	\$10,000	\$30,023	\$22,213	\$62,236	3.89%	3.65%
TOTALS	\$320,000	\$640,000	\$640,000	\$1,600,000	100.00%	100.00%

DAODAS Block Grant Assessment Program

DAODAS – November of 2014 / Pilot to address two of SAMHSA's recommendations regarding the use of the Substance Abuse Prevention and Treatment Block Grant (SAPT) award.

SAMHSA's Block Grant Plan announcement recommends that states use Block Grant funds to:

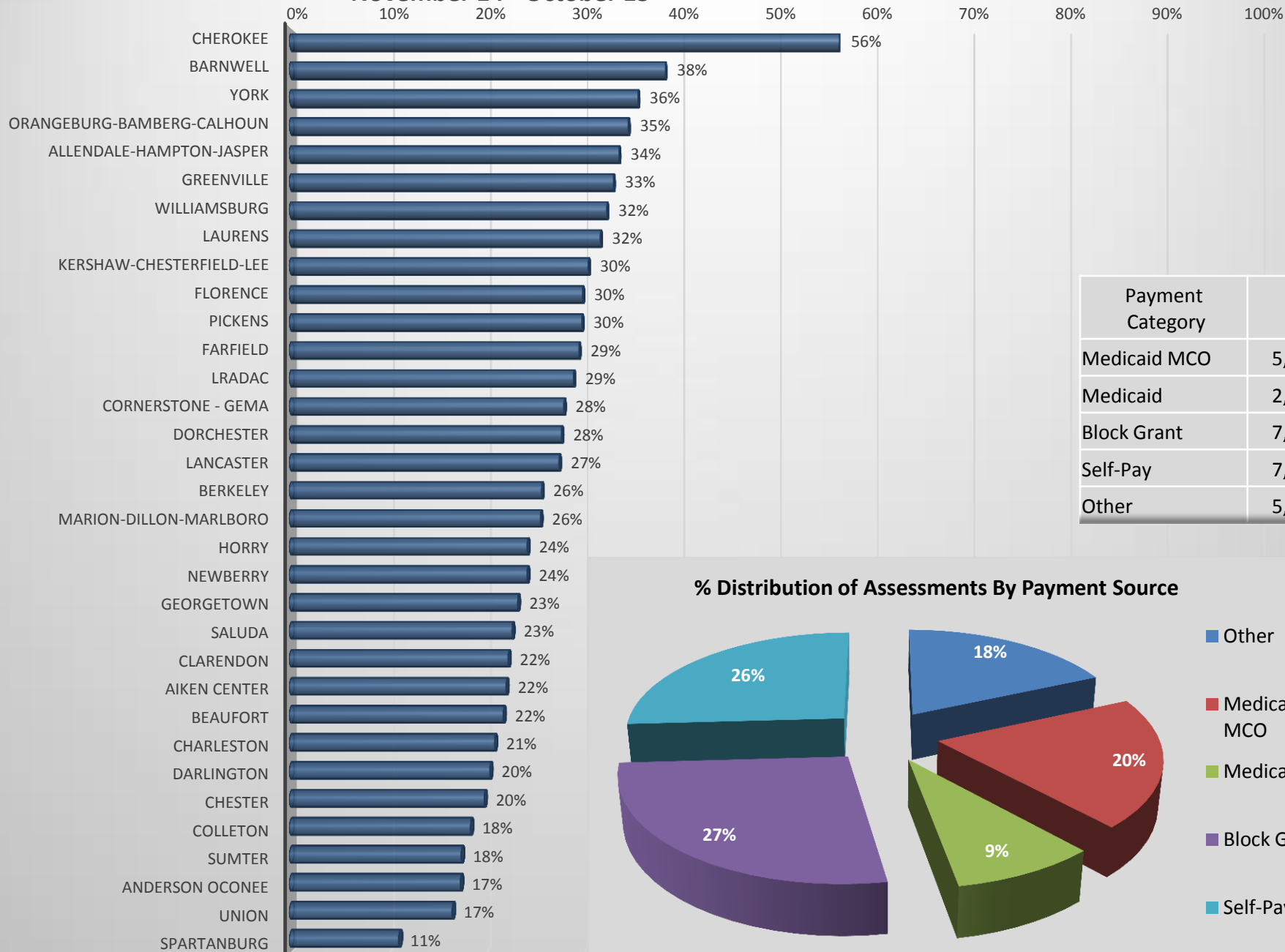
- 1) Fund priority treatment and support services for uninsured individuals.
- 2) Fund priority treatment and support services not covered by insurance.

Goals: Direct Link of Block Grant Dollars to Service
 Remove Financial Barriers
 Funding Equality
 Universal Participation
 Administrative Simplicity

April 2016 – 12,443 Initial and Follow-Up Assessments / \$1,913,000

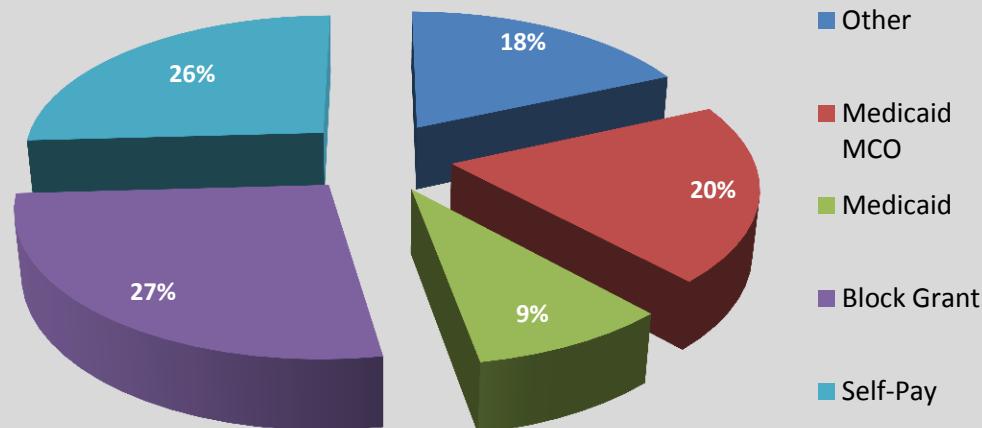
% of Assessments Funded Through Block Grant

November 14 - October 15



Payment Category	N
Medicaid MCO	5,666
Medicaid	2,558
Block Grant	7,645
Self-Pay	7,365
Other	5,214

% Distribution of Assessments By Payment Source



DAODAS SERVICE EXPANSION

- DAODAS –FY17/ Expand the Effort to 20% of the Unrestricted Block Grant Funds
 - \$1,600.000
- 1) Fund priority treatment and support services for uninsured individuals.
- 2) Fund priority treatment and support services not covered by insurance.
- Goals: Direct Link of Block Grant Dollars to Service
 - Remove Financial Barriers
 - Funding Equality
 - Universal Participation
 - Administrative Simplicity
- Overarching Goal: Increase service retention and average length of stay.