May 11, 2022

» Oregon Nicotine Treatment and Recovery:

Expert Panel Meeting

A SOCIAL IMPACT COMPANY

»redegroup

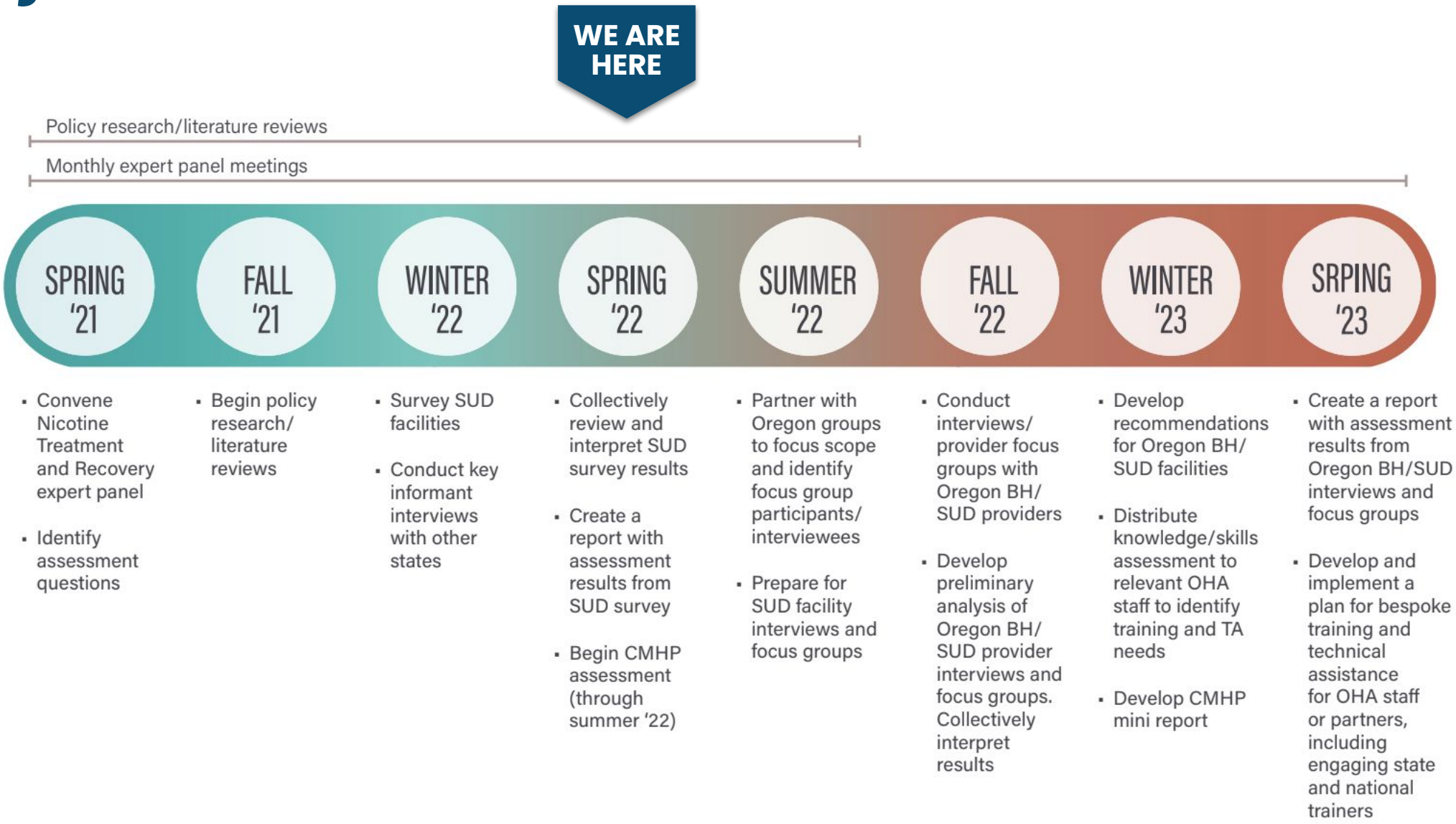
» Introductions

- Name
- Pronouns (optional)
- Organization
- Icebreaker question (optional): If you had to write a textbook, what would it be on?

» Agenda

Topic	How	Lead	Time
Welcome/ Introductions	Everyone shares their name, pronouns (optional) and organization	Beck	12:00-12:15
SUD Facility Policy	Policy review	Kaitlyn	12:15-12:30
SUD Survey	Update on data collection and preliminary analysis	Beck	12:30-1:00
Billing	Discuss barriers around nicotine dependence treatment billing	Jill	1:00-1:20
Wrap Up	Review next steps	Beck	1:20-1:30

Project timeline



» Tobacco Use in Behavioral Health Facilities: Policy Overview

RESIDENTIAL SUBSTANCE USE DISORDER FACILITIES

OHA Policy 140-001

> "Individuals in covered addictions and mental health facilities licensed and funded by OHA, shall not use any tobacco products inside or outside on the facility property or grounds. This requirement includes:
>
> a. Staff, volunteers, service recipients and visitors.
>
> b. Cigarettes, e-cigarettes or other inhalant delivery systems, as defined by ORS 431A.175, cigars, pipes or smokeless tobacco.
>
> c. Parking areas and private vehicles parked on the property or grounds.

OUTPATIENT BEHAVIORAL HEALTH SERVICES

Oregon Administrative Rule Division 19 309-019-0100

(6) Outpatient programs may not allow tobacco use in program facilities and on program grounds.

» Questions or Comments about Policy

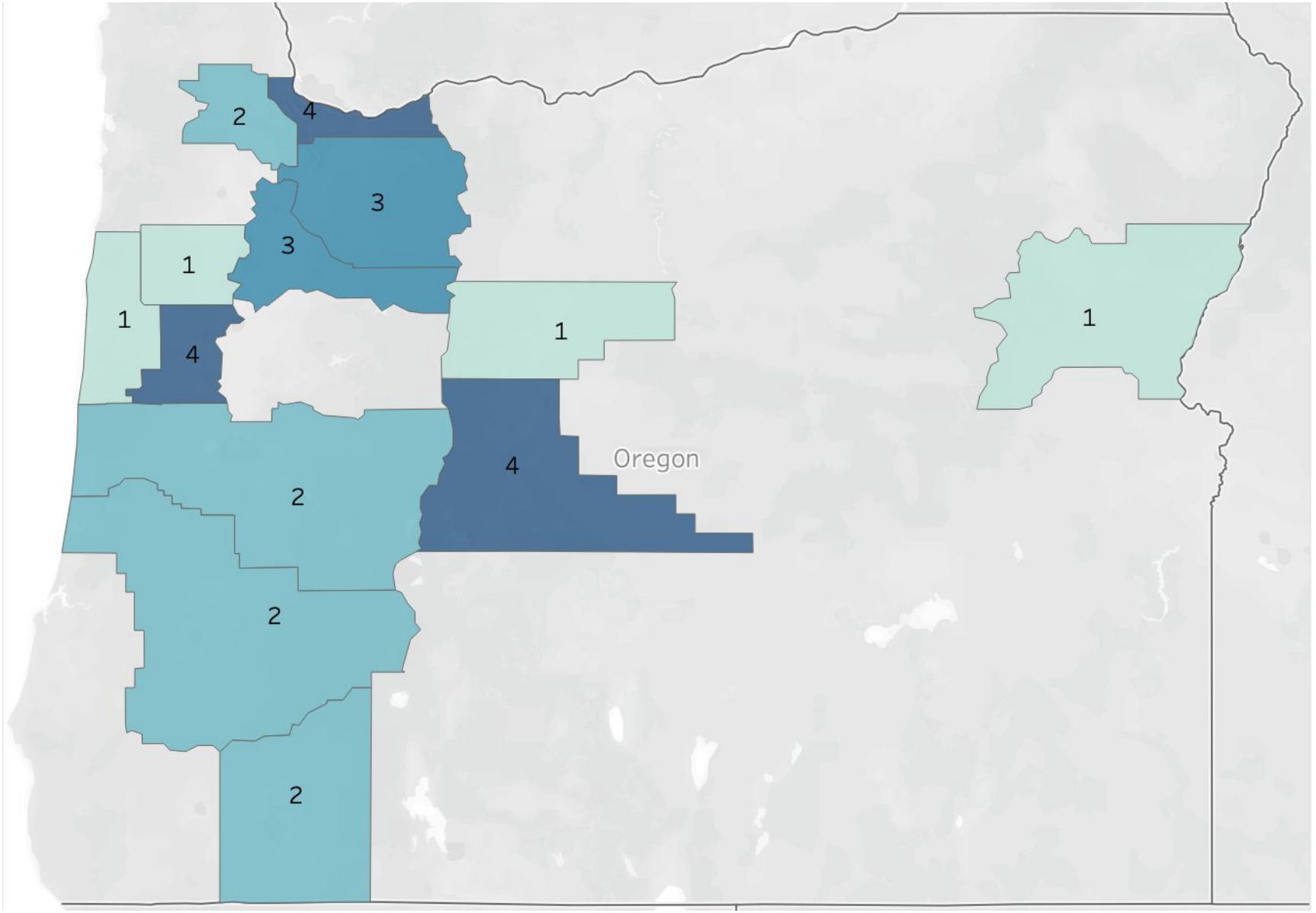
What questions do you have about the policies?

Do you feel like these policies are recognized in facilities you interact with?

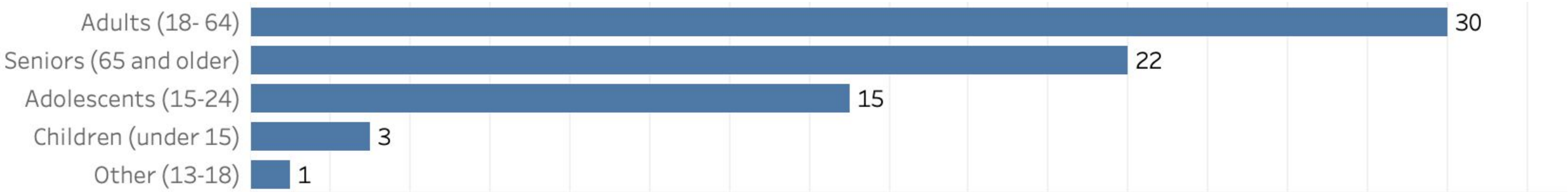
What could OHA provide to SUD facilities who are trying to adhere to the policy to support them in communicating with consumers or staff?

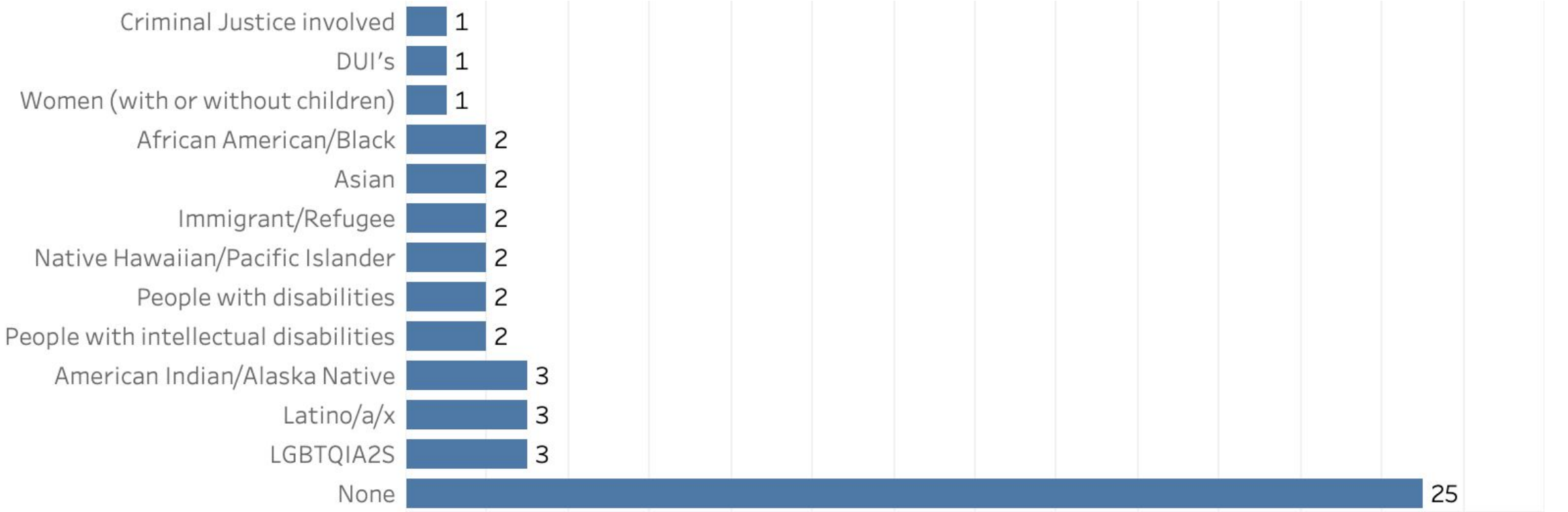
SUD survey: Preliminary results

30 unique, completed surveys

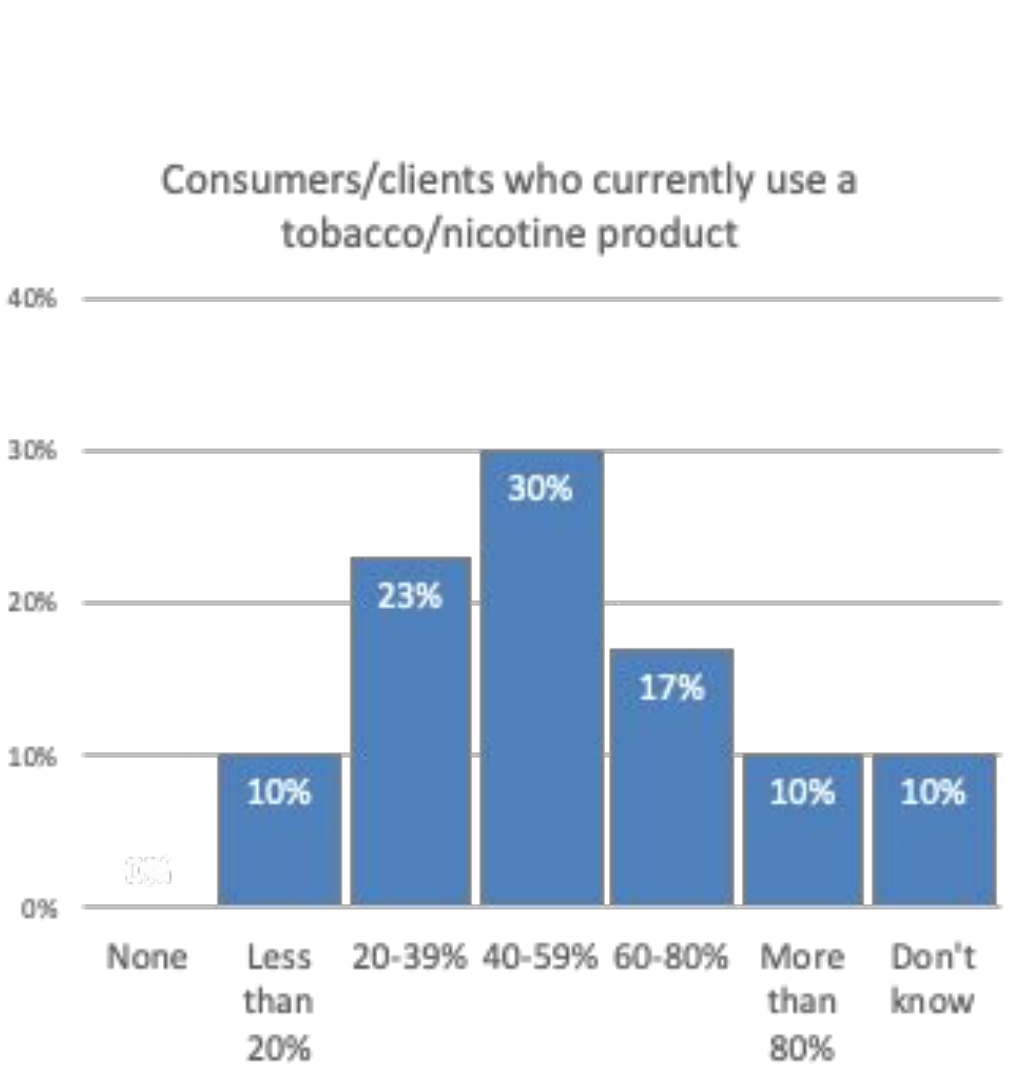


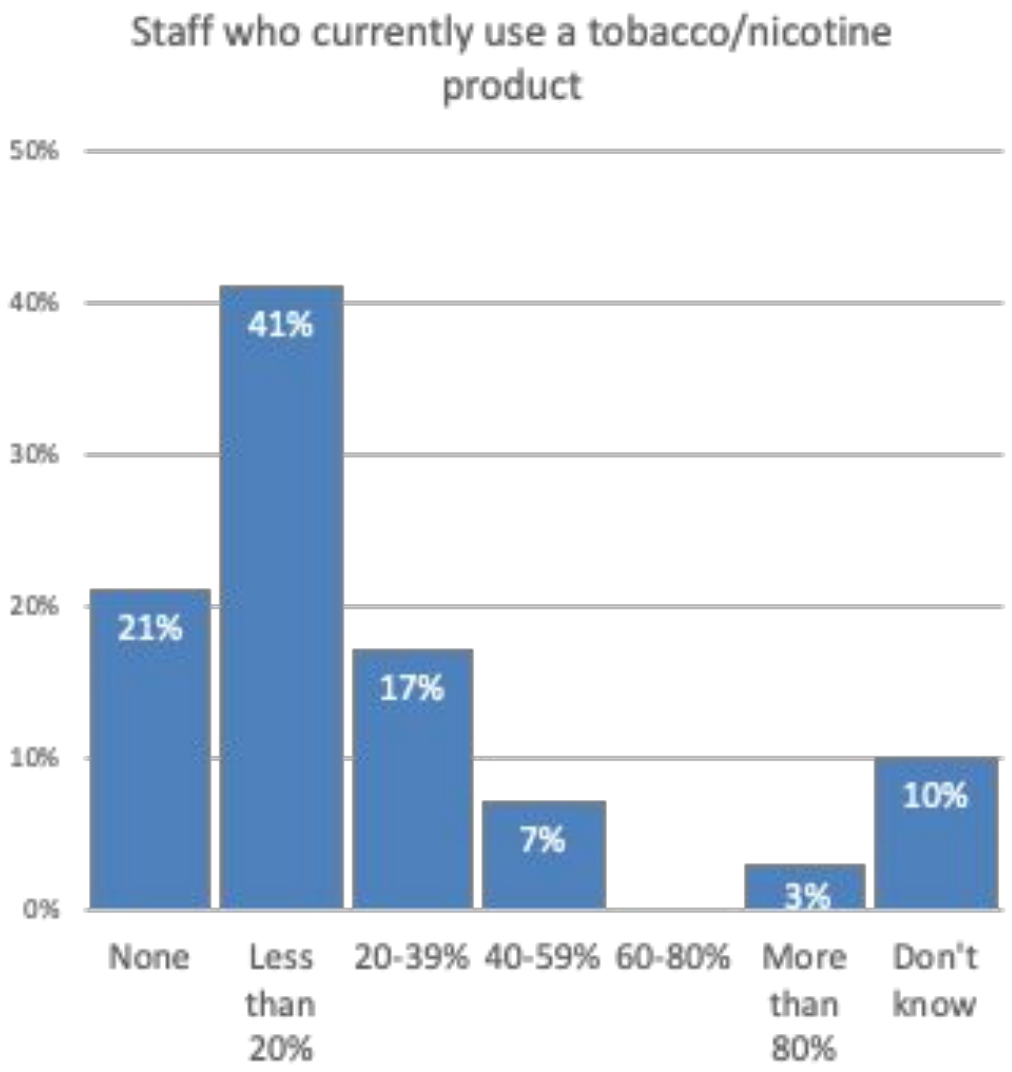
Populations served



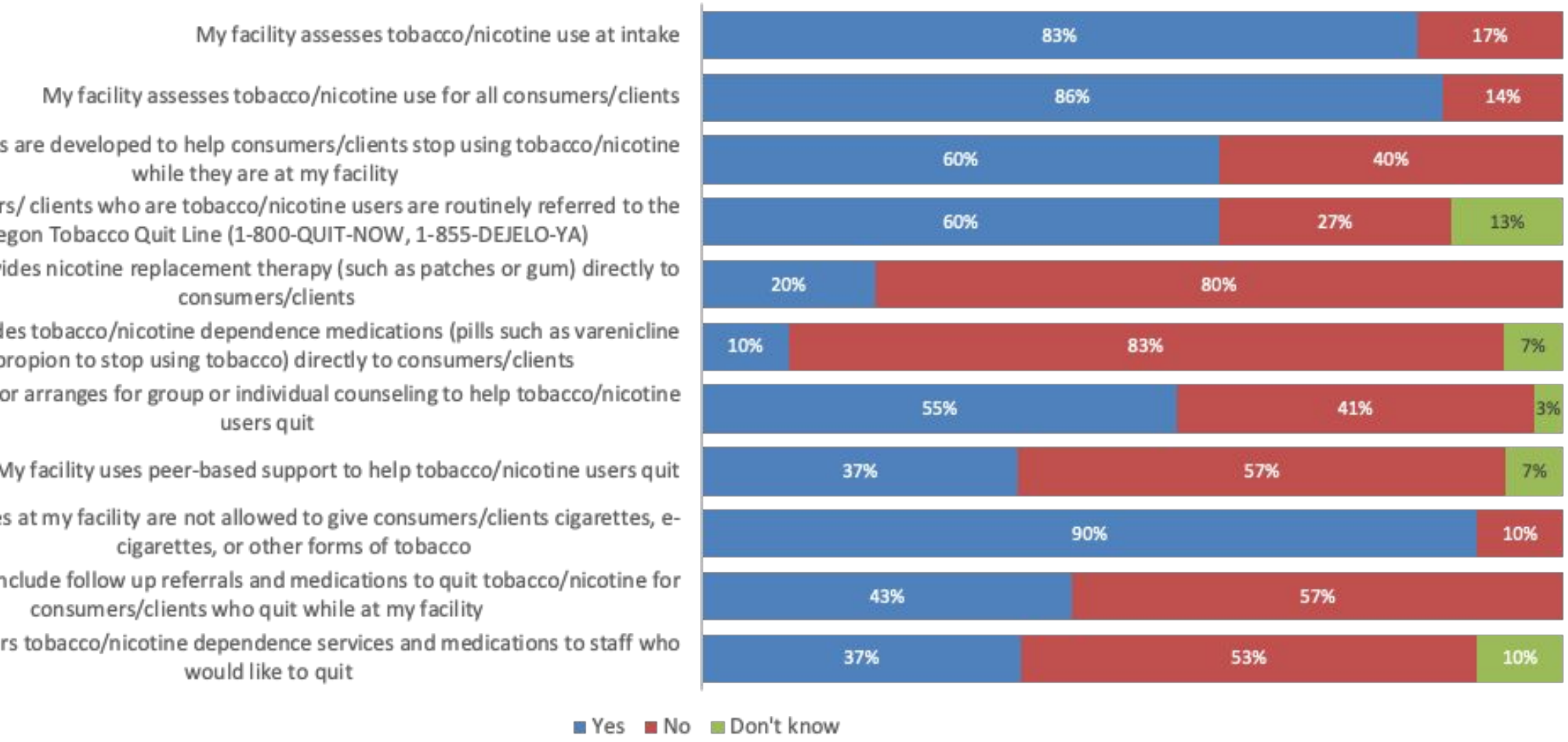


Estimates of tobacco users

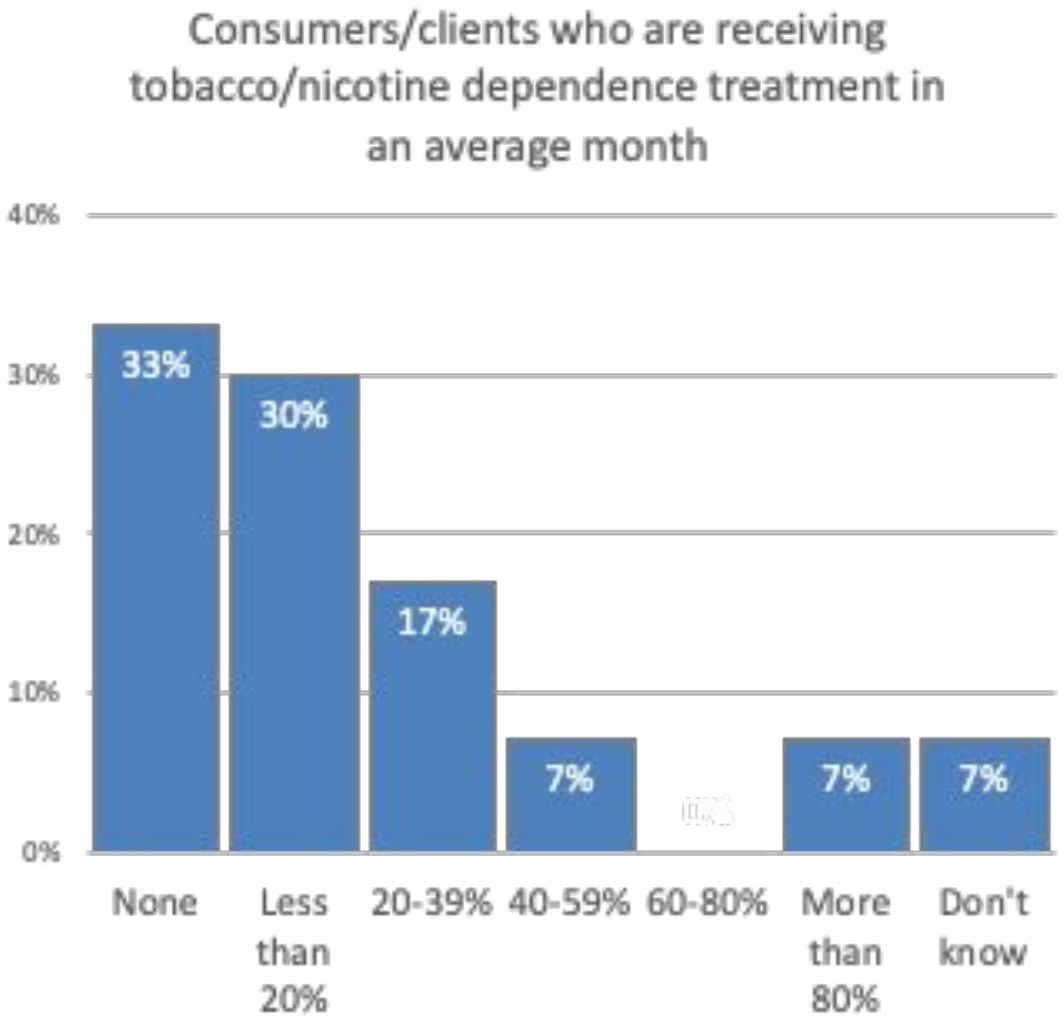




Tobacco/nicotine dependence treatment protocols that are in place and routinely practiced



Estimates of consumers/clients receiving nicotine treatment services

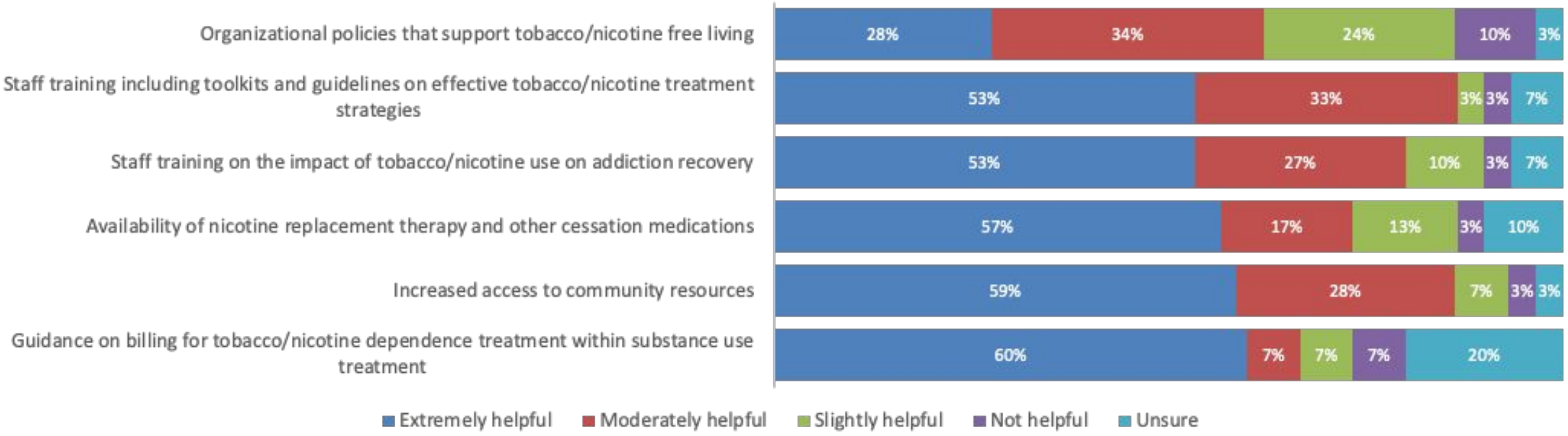


Tobacco/nicotine policies

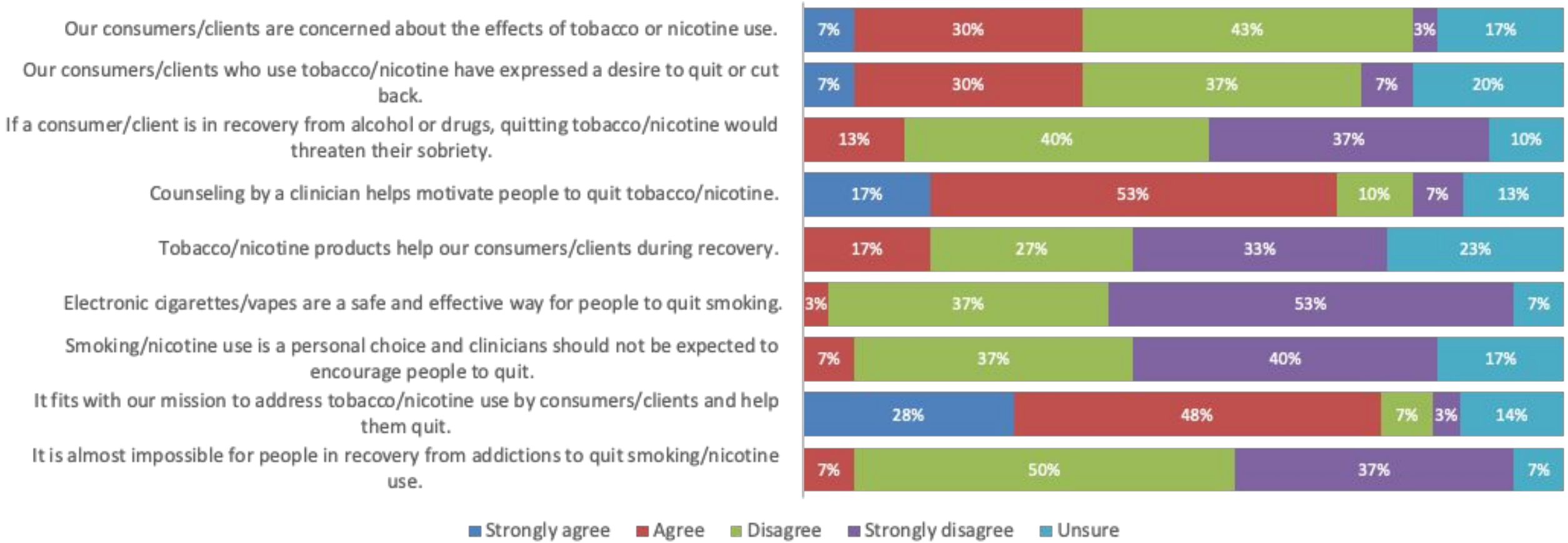
57% (17 facilities) selected a completely tobacco nicotine free policy has been implemented. Of the remaining 13 facilities (they could select all that apply):

Tobacco/nicotine policies cont.

Resources to improve tobacco treatment services for consumers/clients who have a substance use disorder



Attitudes and beliefs



» SUD Survey: Preliminary results

Questions, thoughts, reactions?

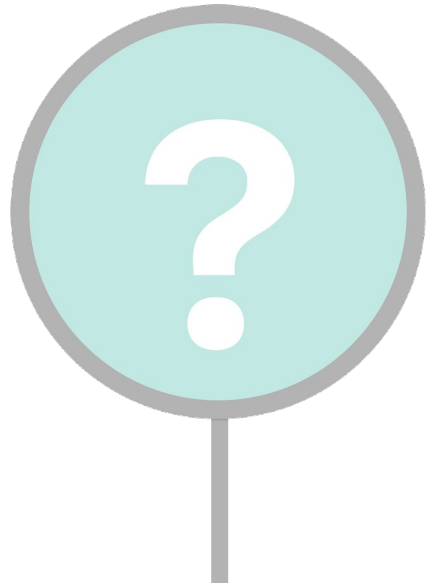
» Billing and reimbursement: Big Questions

- Reimbursement rates are too low; what would it take to change them?
- Why is it set up so that it is difficult for CBOs (or any other “non” traditional providers to do this work (and get paid)?
- What would it take to make it easier for CBOs (or any other “non” traditional providers to do this work (and get paid)?
- Nicotine dependency is not a primary billable diagnosis in substance use treatment; what would it take to change that?

What barriers, if any, challenges have you encountered with the current billing and reimbursement process with respect to set-up, efficiency and reliability, especially for OHP consumers?

What support or guidance do you get from your CCO or OHA that facilitates billing and reimbursement?

What should be better?



» CMHP preliminary assessment

Moving forward with three counties:

1. Lincoln: No contact yet with BH
2. Marion: One connection in BH
3. Deschutes: Participating

» Next steps

- Continue working on CMHP preliminary assessment
- Refine analysis of outpatient SUD survey data