Substance Use Disorder Services: King County COVID Impact & Rural Unincorporated Service Access

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Agenda

 Intro to Behavioral Health & Recovery Division vision & role in the substance use disorder (SUD) system

Impact to SUD services in King County related to COVID

Access to SUD services in rural unincorporated King County

Next Steps: Proviso Response



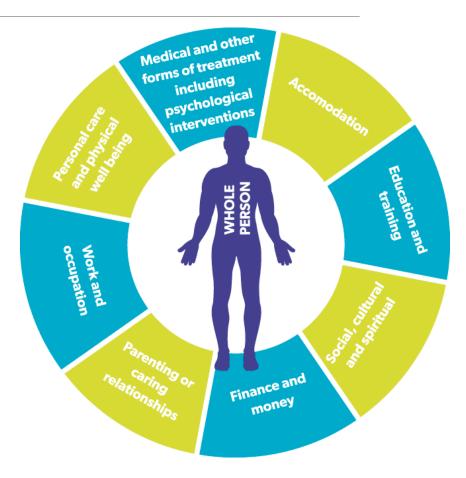
Intro to BHRD

King County's Vision

An integrated approach to whole-person care

Connection to social determinants of health programs (largely managed at the city- and county-level)

"No wrong door" to access needed services



What does BHRD do?

BHRD is a division within the Department of Community and Human Services (DCHS) BHRD's primary objectives and activities include:

- Managing the administration of behavioral health services and programs for low income King County residents;
- Contracting with provider agencies in the community to provide behavioral health services and treatment to low income King County residents;
- On a limited basis, providing services directly to King County residents;
- Performing delegated administrative functions on behalf of all 5 Medicaid managed care plans in King County.

To carry out the above activities, BHRD receives revenue from a variety of funders, and each funding source includes contractual requirements and/or regulations that govern the use of funds.

BHRD: Funding Streams

Medicaid

Funds contracted to BHRD by Medicaid managed care plans, to support behavioral health services for eligible Medicaid clients.

MIDD

Mental Illness & Drug Dependency Sales Tax

Local-funded initiatives to promote community-based health, decrease emergency system use, and fill critical gaps within and between the Medicaid & State funds.

State Funds & Other

Non-Medicaid funds contracted to BHRD by the State or the Medicaid managed care plans. This includes state-only funds, legislative provisos and federal grants.

How many people does BHRD serve annually?

2019: 63,425 unique clients served

2019:

2 3 N

services rendered

COVID Impact to SUD Services

COVID Survey: Access to Services Remains Strong

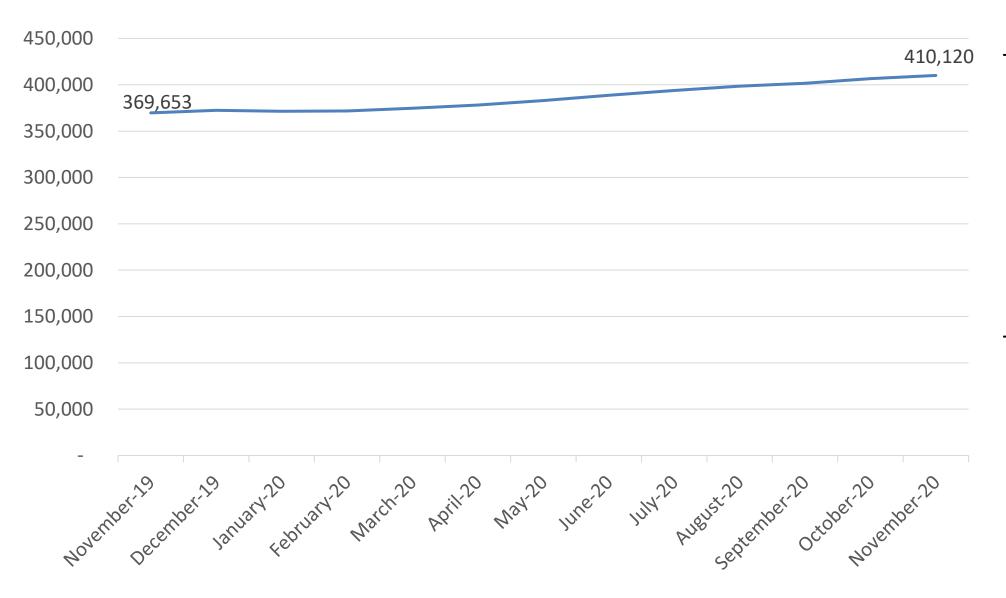
- About 25% of providers have altered service hours due to COVID
 - The majority have expanded hours to meet client needs and maintain social distancing
- ·Almost all agencies have needed to modify or "pivot" in some form
 - Telehealth
 - Reaching youth in new ways
 - Pop up clinics/additional outreach to vulnerable populations
 - Suspending group meetings or shortening zoom appointments
 - Outdoor services
- 90% of providers are still offering access to in-person services in addition to telehealth services.
- •30/35 outpatient providers are able to offer an appointment within 5 days of request, with all able to offer appointments within the required 14 day window

COVID: Challenges/Opportunities

- Overdose & Suicide Concerns related to COVID
 - Overall suicide rates in King County were stable as compared to 2017-2019
 - Youth suicide remained high in 2020 as compared to prior years, in keeping with a pre-COVID trend – COVID impact remains unknown
 - Recent spike in overdoses due to Fentanyl; COVID nexus currently unknown
- Telehealth presents significant opportunity but challenges with technology access remain
 - Able to use telemedicine to start clients on MAT such as buprenorphine
 - Technology for clients and providers remains a challenge as well as access to broadband in more rural parts of the County & State
 - Telehealth is being used in new and innovative ways, including use of peers and recovery support services

Medicaid Enrollment in King County

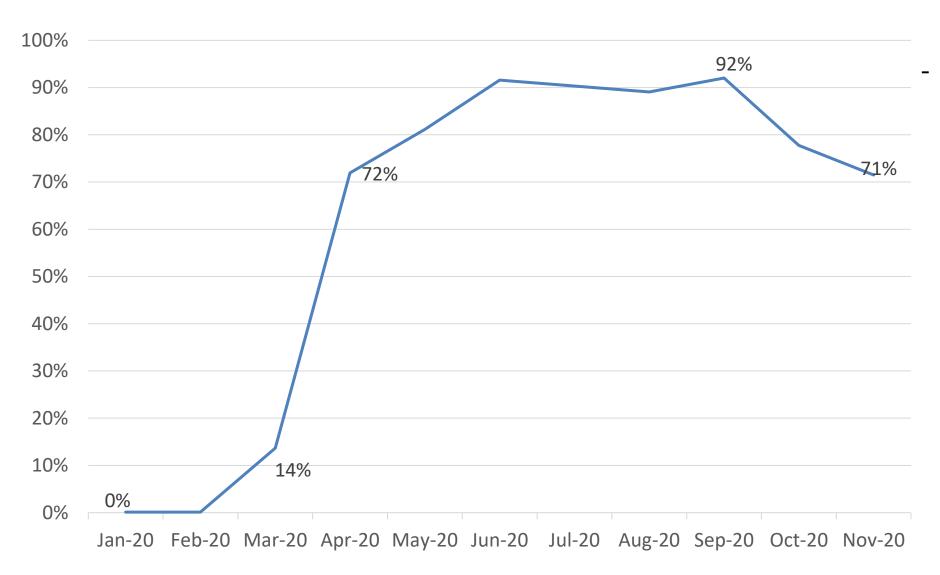
November 2019 – November 2020



- Number of
 King County
 residents
 enrolled in
 Medicaid up
 11% year over
 year
- led many to lose jobs, income, and employer-based coverage

Outpatient Visits Conducted via Telehealth

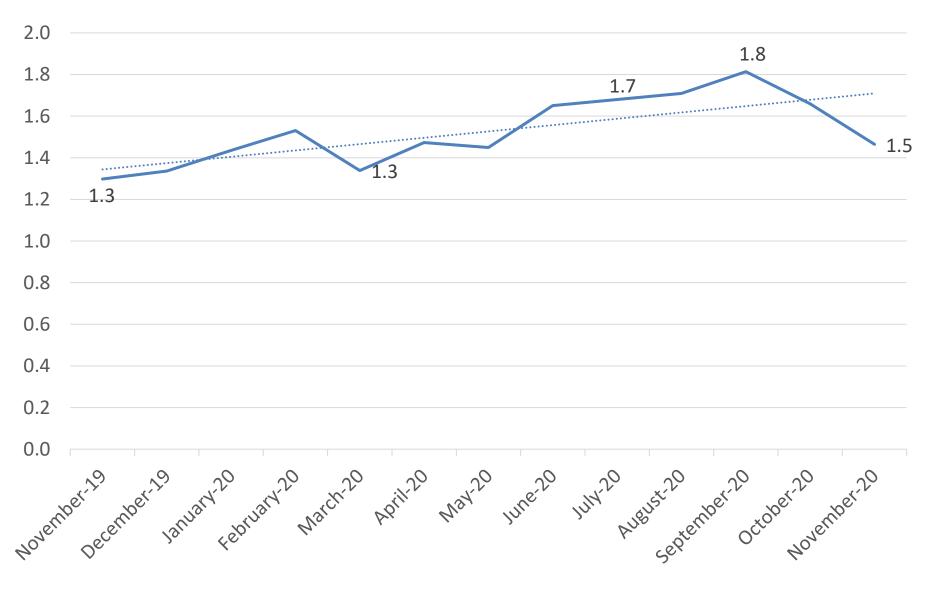
January 2020 – November 2020



KCICN providers
quickly pivoted from
0% of outpatient
visits provided via
telehealth in January
2020 to the majority
of visits conducted
this way during the
pandemic

Average ENCOUNTERS Per Open Benefit Per Month

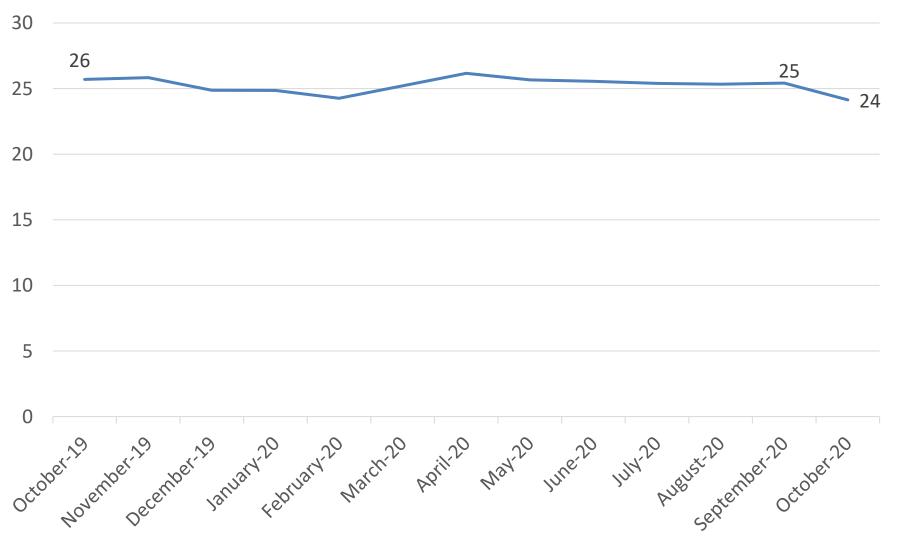
November 2019 – November 2020



- Encounters up 13% year over year
- Dip observed at start of pandemic after upward trajectory, but soon stabilized again

MOUD Doses per Open Benefit Per Month

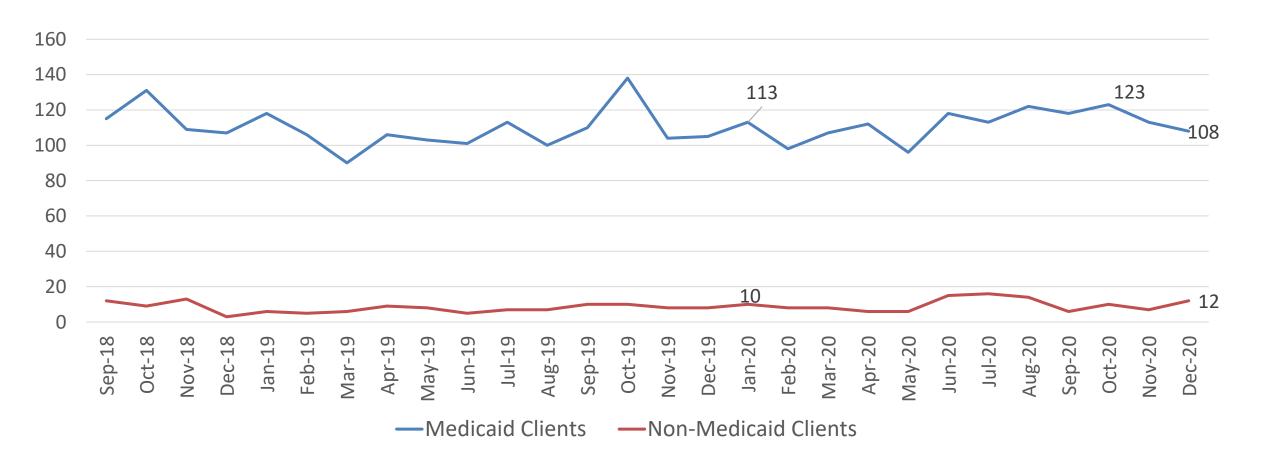
October 2019 – October 2020



- Dose rate down
 6% year over year,
 though recent
 months have also
 seen lags in MOUD
 dose encounter
 submissions
- On a month-tomonth basis, the MOUD dose rate has remained relatively stable throughout the pandemic

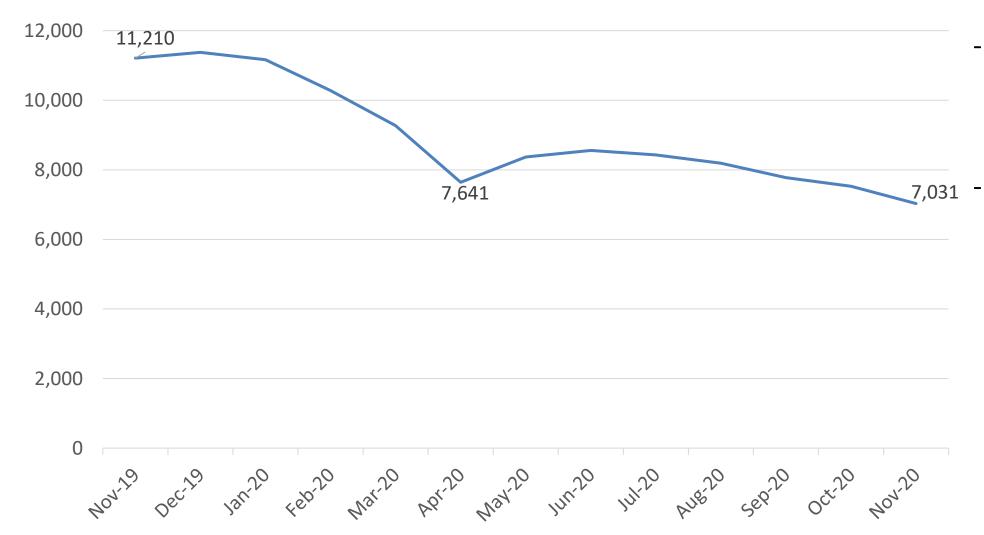
SUD Residential Admissions by Medicaid Enrollment

- SUD Residential admission volumes have generally remained stable over time.



Emergency Department Visits by Behavioral Health Clients

November 2019 – November 2020



ED visits down
37% year over
year

ED visits among
KCICN and KC ASO
clients declined
dramatically with
COVID and have
not yet returned
to baseline levels

Source: CMT data provided daily for all KCICN and KC BH-ASO clients.

Substance Use Disorder Service Continuum

Outpatient SUD

- 1:1
- Group Therapy
- Case Management
- Family Counseling
- Urinalysis
- Transportation

Medication Assisted Treatment

- Methadone
- Buprenorphine
- Naltrexone
- Treatment of opiate use disorder
- Dosing
- Low Barrier treatment

Crisis

- Hotline
- Mobile Outreach
- Designated Crisis Responders
- Emergency Services
 Patrol

Detox

- Medical care
- Physician supervision to withdrawal from substances
- Lower level: Sobering services
- New: Secure Detox

Specialty Services

- Peer Support
- Oxford House
- Supported employment & housing
- Specialty Courts
- Re-entry support programs

Residential SUD

- Intensive Inpatient (youth/adult)
- Co-occurring disorder treatment (youth/adult)
- Long-term Care
- Recovery House (youth/adult)
- Pregnant and Parenting Women

Services in Unincorporated King County

Map of Services in Unincorporated King County:

https://www.google.com/maps/d/viewer?mid=11vWDuFv-e8JURJvKfBlVY o6LacyOQC7&II=47.71264989430852%2C-122.10800037503371&z=9

MOUD

- As of Jan 30, 2021 there are 150 active MAT programs in King County
 - 32 of which are rapid access programs (access to medication within 24-48 hours)
 - 70 programs that will treat youth ages 13-18
- In unincorporated King County MAT is accessible on Vashon, in the Fairwood area, and in the unincorporated areas near Woodinville, Covington, and Enumclaw.

Outpatient

- 10 integrated MH/SUD agencies located in unincorporated King County; additional in bordering cities
- Includes culturally appropriate programs
- Youth and Adults can self-refer into these services
- Combination of providers that accept Medicaid-Medicare/Private Insurance/Private Pay/Low Cost Sliding Scale
- •Residential statewide network; new "no wrong door legislation" allows for self-referral

Next Steps Proviso: Rural Behavioral Health Services Report

- •The 2021-22 Biennial Budget Ordinance 19210 requires DCHS to complete a report on the provision of community-based substance use disorder services and mental health services in the rural unincorporated area of King County
- •The proviso requires:
 - Needs Assessment and Gap Analysis
 - Identification of opportunities to leverage current services and innovative models for future application
 - Outreach & Community Engagement
- •DCHS is currently exploring opportunities to address these needs with potential federal funds from the American Recovery Plan.

QUESTIONS?

