



ENHANCED STRUCTURED OUTPATIENT ADDICTION PROGRAM (SOAP) FOR PREGANANT AND POSTPARTUM ENROLLEES

PURPOSE

Performance specifications are intended to enhance MassHealth Enrollee experience and outcomes by promoting transparency and consistency across Plans and providers. Performance specifications are expectations imposed on providers who contract for these specific and related services. Information contained in this document is based on publicly available documents, Plan expectations, your contract, and MassHealth guidance. This information should be and will look materially like any other MassHealth contracted Plan. Performance specifications, your provider manual, and other requirements can be found at providerexpress.com.

Providers contracted for this level of care or service are expected to comply with applicable regulations set forth in the Code of Massachusetts Regulations, and all requirements of these service-specific performance specifications. In addition, providers of all contracted services are held accountable to the General Performance Specifications. Where there are differences between the service-specific and General Performance Specifications, the service-specific specifications take precedence.

OVERVIEW

Enhanced SOAP (ASAM Intensive Outpatient Program) for Pregnant and Postpartum Enrollees consists of short-term, clinically intensive, structured, day and/or evening substance use disorder services for pregnant or postpartum Enrollees. These programs may be used as a transition service in the continuum of care or directly accessed from the community and other levels of care. Enhanced SOAP for Pregnant or Postpartum Enrollees are provided to Enrollees who are pregnant or postpartum and who are not experiencing and/or are not at risk of experiencing acute or severe withdrawal symptoms because of their substance use. Enrollees receiving Enhanced SOAP do not require the clinical intensity or supervision of a 24-hour diversionary level of care, nor can they be effectively treated in a less intensive outpatient level of care.

Enrollees in Enhanced SOAP meet continued stay criteria for the clinical services offered by the Program until the goals from the individualized plan have been met, and/or Enrollees psychosocial well-being has stabilized. Enhanced SOAP for Pregnant and Postpartum Enrollees services are only provided in Department of Public Health (DPH)-licensed, freestanding facilities skilled in addiction recovery treatment, outpatient departments in acute-care hospitals, or licensed outpatient clinics and facilities.

Exclusion criteria must be based on clinical presentation and must not include automatic exclusions based on stable medical conditions, homelessness, medications prescribed including MOUD, compliance with medications, lack of prescription refills, or previous unsuccessful treatment attempts.

Enhanced SOAP for Pregnant and Postpartum Enrollees will provide ASAM Intensive Outpatient Program services until the Enrollee's symptoms can be safely managed at a less intensive level of care.

The following Enhanced SOAP for Pregnant and Postpartum Enrollees performance specifications are a subset of the SOAP performance specifications. As such, Enhanced SOAP for Pregnant and Postpartum Enrollees providers agree to adhere to both the SOAP performance specifications and to the Enhanced SOAP for Pregnant and Postpartum Enrollees performance specifications contained within. Where there are differences between the SOAP and Enhanced SOAP for Pregnant and Postpartum Enrollees performance specifications, these Enhanced SOAP for Pregnant and Postpartum Enrollees specifications take precedence.

SERVICE COMPONENTS

1. Providers must meet all Department of Public Health/Bureau of Substance Addiction Services (DPH/BSAS) contractual and regulatory requirements within 105 CMR 164.000 *Licensure of Substance Use Disorder Treatment Programs*, including reporting requirements, and must have the adolescent "designation" on their BSAS license.
2. In addition to the requirements of the SOAP level of care, the Enhanced SOAP for Pregnant and Postpartum Enrollees provider is required to provide the following:
 - a) The provider admits and has the capacity to treat pregnant or postpartum Enrollees who are currently receiving medications for addiction treatment or for opioid use disorders. Such capacity may take the form of documented, active Affiliation Agreements with providers licensed to provide such treatments.
 - b) The provider arranges all necessary medical and obstetric consultations within 48 hours of admission and documents this in the Enrollee's health record.
 - c) The provider ensures at minimum one session per day that provides education and counseling on prenatal and postpartum care, HIV/AIDS, and other health-related issues, which is documented in the Enrollee's health record.
3. The Enhanced SOAP for Pregnant and Postpartum Enrollees provider assists Enrollees with arranging and/or utilizing community-based transportation resources (e.g., public transportation resources, PT-1 forms, etc.). The Program makes best effort to directly provide transportation to essential appointments (i.e., medical, behavioral health, and OB/GYN.) temporarily, while transitioning to these community-based transportation resources.
4. The Enhanced SOAP for Pregnant and Postpartum Enrollees provider assists the Enrollee in accessing medical services. All such activities are documented in the Enrollee's health record.
 - a) If the Enrollee has not undergone a complete physical examination within the past six months, the Enhanced SOAP for Pregnant and Postpartum Enrollees provider is responsible for assisting the Enrollee in scheduling an appointment with their primary care clinician (PCC). Such efforts including any contact with the Enrollee's PCC are documented in the Enrollee's health record.
 - b) If the Enrollee does not have a PCC, the Enhanced SOAP for Pregnant and Postpartum Enrollees provider follows the requirements delineated in the General performance specifications.
 - c) If the Enrollee does not have an OB/GYN, midwife, or other obstetric health care provider, the Enhanced SOAP for Pregnant and Postpartum Enrollees provider must

refer them to one.

- d) If patient consents to the Enhanced SOAP for Pregnant and Postpartum Enrollees provider referring them to an obstetric healthcare provider, the Enhanced SOAP for Pregnant and Postpartum Enrollees provider must also follow-up to ensure patient attends their scheduled visit.
 - e) When needed, the Enhanced SOAP for Pregnant and Postpartum Enrollees provider assists Enrollees in making appointments at local walk-in medical service centers.
 - f) When indicated, the Enhanced SOAP for Pregnant and Postpartum Enrollees provider encourages the Enrollee to undergo HIV, syphilis, hepatitis B and C, chlamydia, gonorrhea, and Pap testing.
5. The Program is responsible for updating its available capacity, one time per week on the Massachusetts Behavioral Health Access website (www.MABHAccess.com). The Program is also responsible for keeping all administrative and contact information up to date on the website. The Program is also responsible for training staff on the use of the website to locate other services for Enrollees, particularly in planning aftercare services.

STAFFING REQUIREMENTS

1. If the Program is experiencing a hardship in meeting these specifications, BSAS has a process for waiving regulatory and contractual requirements. The waiver process is described in the Department of Public Health (DPH) Bureau of Substance Addiction Services (BSAS) 105 CMR 164. The provider is responsible for informing the payer of any waived requirements if the waiver is approved. Providers are additionally responsible for communicating hardships that are not regulatory in nature to payers.
2. The Enhanced SOAP for Pregnant and Postpartum Enrollees provider complies with the staffing requirements of the applicable licensing body, the staffing requirements in the Plan service-specific performance specifications, and the credentialing criteria outlined in the Plan provider manual found at providerexpress.com.
3. Enhanced SOAP for Pregnant and Postpartum Enrollees staff have knowledge of the local resources for Enrollees who are pregnant or postpartum within their community as well as the unique medical, behavioral health, legal, safety, vocational, financial, and transportation needs faced by this population.
4. Ongoing, in-service trainings for staff that address working with Enrollees who are pregnant are documented and provided for all Enhanced SOAP for Pregnant and Postpartum Enrollees staff.
5. Program staff coordinate care with the Enrollee's PCC and obstetrician/gynecologist, midwife, or other obstetric health care provider and consult with those providers as needed.

SERVICE, COMMUNITY AND OTHER LINKAGES

1. The Enhanced SOAP for Pregnant and Postpartum Enrollees provider maintains written affiliation agreements with local providers. Such agreements include the referral process, as well as the transition, aftercare, and discharge processes.
 - a) Social services organizations: CBHI, the Behavioral Health Helpline, mobile crisis interventions, domestic violence shelters and violence prevention programs, housing assistance programs (including CSP-HI or CSP-JI), and legal services.

- b) Family services organizations: Home visiting programs, diaper banks and other community- based organizations that provide baby supplies, Healthy Start, Women, Infants, and Children (WIC) and other nutritional programs, high-risk infant/family support programs, early intervention programs and organizations that provide childcare or babysitting.
 - c) Medical services: Family/reproductive health programs, doula care, prenatal care, lactation, and infant feeding support.
2. The Enhanced SOAP for Pregnant and Postpartum Enrollees provider makes referrals to these community-based programs, assists Enrollees in linking to those services, and documents all efforts and referrals made in the Enrollee’s health record.

PROCESS SPECIFICATIONS

Assessment, Treatment Planning, and Documentation

1. The assessment, treatment/recovery plan, and discharge plan address prenatal care issues (or postpartum issues, as appropriate). Issues include but are not limited to addressing lactation, assuring appropriate medications for a pregnant or postpartum person, supporting Enrollees through mood and anxiety disorders, and ensuring that they have supports for newborn care.
2. The assessment, treatment/recovery plan, and discharge plans are developed in consultation with the Enrollee’s primary care clinician (PCC) and/or obstetrician/gynecologist, midwife, or other obstetric health care provider. If a pre-existing obstetrician/gynecologist, midwife, or other obstetric health care provider cannot be identified, the provider makes a referral immediately upon admission.
3. In addition to the requirements outlined in the SOAP performance specifications, the Enhanced SOAP for Pregnant and Postpartum Enrollees provider documents in each Enrollee’s treatment/recovery plan their utilization of the services that specifically address the needs of individuals who are pregnant.

Discharge Planning and Documentation

1. The Enhanced SOAP for Pregnant and Postpartum Enrollees provider makes reasonable efforts to discharge Enrollees to stable and safe living situations. Such efforts are documented in the Enrollee’s health record.
2. The Enhanced SOAP for Pregnant Enrollees provider ensures that Enrollees are discharged with connections to obstetrics, pediatrics, and primary care clinicians. They must also connect Enrollees to resources including but not limited to mental health support, lactation support, and community resources for families (home visiting, WIC, diaper banks, etc.).

QUALITY MANAGEMENT

1. The provider will develop and maintain a quality management plan that is consistent with their contractual responsibilities to Optum, and which utilizes appropriate measures to monitor, measure, and improve the activities and services it provides.
2. A continuous quality improvement process is utilized and may include outcome measures and satisfaction surveys to measure and improve the quality of care and services delivered to Enrollees, including youth and their families.

3. Clinical outcomes data must be made available to Optum upon request and must be consistent with the performance specifications of this service.
4. Providers must report any adverse incidents and other reportable events that occur to the relevant authorities.