



ENHANCED STRUCTURED OUTPATIENT ADDICTION PROGRAM (SOAP) FOR ENROLLEES WHO ARE EXPERIENCING HOMELESSNESS

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 Enrollees Experiencing Homelessness consists of short-term, clinically intensive, structured, day and/or evening substance use disorder services for Enrollees who are experiencing homelessness. 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 Enrollees Experiencing Homelessness services is provided to Enrollees who are not experiencing and/or are not at risk of experiencing acute or severe withdrawal symptoms because of their substance use. Enrollees receiving SOAP services 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. Admission is appropriate for Enrollees who meet diagnostic and dimensional admission criteria specified in accordance with the American Society of Addiction Medicine Criteria®.

Exclusion criteria must be based on clinical presentation and must not include automatic exclusions based on stable medical conditions, medications prescribed including Medication for Addiction Treatment (MAT)/ Medication for Opioid Use Disorder (MOUD), compliance with medications, lack of prescription refills, or previous unsuccessful treatment attempts.

Enrollees in Enhanced SOAP for Enrollees Experiencing Homelessness meet continued stay criteria for the clinical services offered by the program until the goals from the individualized plan have been met, and/or the Enrollees psychosocial well-being has stabilized, or Enrollee requires a higher level of care. Enhanced SOAP for Enrollees Experiencing Homelessness services is only provided in Department of

Public Health (DPH/BSAS)-licensed, freestanding facilities skilled in addiction recovery treatment, outpatient departments in acute-care hospitals, or licensed outpatient clinics and facilities.

The following Enhanced SOAP for Enrollees Experiencing Homelessness performance specifications are a subset of the SOAP performance specifications. As such, Enhanced SOAP for Enrollees Experiencing Homelessness providers agree to adhere to both the SOAP performance specifications and to the Enhanced SOAP for Enrollees Experiencing Homelessness performance specifications contained within. Where there are differences between the SOAP and Enhanced SOAP for Enrollees Experiencing Homelessness performance specifications, these Enhanced SOAP for Enrollees Experiencing Homelessness 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*.
2. In addition to the service components required in the SOAP level of care, the Enhanced SOAP for Enrollees Experiencing Homelessness provider is required to provide the following:
 - a) Resources and assistance in accessing supportive programs, such as meal programs, food pantries, food stamps (i.e., Supplemental Nutrition Assistance Program), clothing, etc.
 - b) Connecting Enrollees to Community Support Programs for Homeless Individuals (CSP-HI) and other housing-specific resources
3. The Enhanced SOAP for Enrollees Experiencing Homelessness provider assists Enrollees with arranging and/or utilizing community-based transportation resources (e.g., public transportation resources, PT-1 forms, etc.). All efforts are documented in the Enrollee's health record.
4. The Enhanced SOAP for Enrollees Experiencing Homelessness provider completes a housing assessment and housing needs are noted in the treatment/recovery plan. The Enhanced SOAP for Enrollees Experiencing Homelessness provider must provide coordination of or linkage to housing services, and specifically connects the Enrollee with Community Support Programs, including CSP for chronically homeless individuals (CSP-HI) providers. All efforts to assist Enrollees with housing are documented in the Enrollee's health record.
5. The Enhanced SOAP for Enrollees Experiencing Homelessness 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 Enrollees Experiencing Homelessness 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 Enrollees Experiencing Homelessness provider follows the requirements delineated in the General performance specifications.
 - c) When needed, the Enhanced SOAP for Enrollees Experiencing Homelessness provider assists Enrollees in making appointments at local walk-in medical service centers.
 - d) When indicated, the Enhanced SOAP for Enrollees Experiencing Homelessness

provider encourages the Enrollee to undergo HIV, hepatitis, and TB testing.

6. 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 Enrollees Experiencing Homelessness 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 Enrollees Experiencing Homelessness staff have knowledge of the local resources for Enrollees who are homeless 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 that address working with individuals who are homeless are documented and provided for all Enhanced SOAP for Enrollees Experiencing Homelessness staff.

SERVICE, COMMUNITY AND OTHER LINKAGES

1. The Enhanced SOAP for Enrollees Experiencing Homelessness provider connects Enrollees with organizations that can assist Enrollees in securing permanent and supportive living arrangements to foster their recovery, and documents all efforts and referrals made in the Enrollee's health record. This includes:
 - a) Ensures the availability of shelter beds for Enrollees enrolled in the program, either on-site or through documented Affiliation Agreements or Memorandums of Understanding (MOU) with a local shelter or other housing program. These beds are licensed through DPH-Bureau of Substance Abuse Services (BSAS) or another appropriate entity.
 - b) Assists Enrollees in securing permanent and supportive living arrangements to foster their recovery.
 - c) Establishes working relationships with appropriate community-based programs that serve individuals who are homeless.
 - d) Provides referrals to these community-based programs and assists Enrollees in linking to those services.

PROCESS SPECIFICATIONS

Assessment, Treatment Planning, and Documentation

1. In addition to the requirements outlined in the SOAP performance specifications, the Enhanced SOAP for Enrollees Experiencing Homelessness provider documents in each Enrollee's treatment/recovery plan their utilization of the services that specifically address the needs of individuals who are homeless.

Discharge Planning and Documentation

1. The Enhanced SOAP for Enrollees Experiencing Homelessness provider must ensure that Enrollees have access to organizations providing housing support as part of discharge planning. Such efforts are documented in the Enrollee's health record.

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.