TUFTS Health Plan

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Non-24-Hour Diversionary Services Enhanced Structured Outpatient Addiction Program (SOAP) for Pregnant and Postpartum Members Performance Specifications

These performance specifications apply to the following Tufts Health Plan products:

- ☐ Tufts Health Plan Commercial[1]
- ☐ Tufts Medicare Preferred HMO (a Medicare Advantage product)[2]
- ☐ Tufts Medicare Preferred PPO (a Medicare Advantage product)[3]
- ☐ Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)[2]

These performance specifications apply to the following Tufts Health Public Plans products:

- ☐ Tufts Health Direct (a Massachusetts Qualified Health Plan (QHP) (a commercial product)
- ☒ Tufts Health Together (a MassHealth MCO Plan and Accountable Care Partnership Plans)
- ☐ Tufts Health RITogether (a Rhode Island Medicaid Plan)
- ☒ Tufts Health One Care (a dual-eligible product)

Providers contracted for this level of care or service will be expected to comply with applicable regulations set forth in the Code of Massachusetts Regulations and all requirements of these service-specific performance specifications. Additionally, providers contracted for this service and all contracted services are held accountable to the General performance specifications, located online at tuftshealthplan.com in the Provider Resource Center. The requirements outlined within these service-specific performance specifications take precedence over those in the General performance specifications.

The requirements outlined within these service specific performance specifications take precedence over those in the General performance specifications. Additionally, 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.

The following Enhanced Structured Outpatient Addiction Program (SOAP, ASAM Intensive Outpatient Program) for Pregnant and Postpartum Members performance specifications are a subset of the SOAP performance specifications. As such, Enhanced SOAP for Pregnant and Postpartum Members providers agree to adhere to both the SOAP performance specifications and to the Enhanced SOAP for Pregnant and Postpartum Members performance specifications contained within. Where there are differences between the SOAP and Enhanced SOAP for Pregnant and Postpartum Members performance specifications, these Enhanced SOAP for Pregnant and Postpartum Members specifications take precedence.

DEFINITION

Enhanced SOAP (ASAM Intensive Outpatient Program) for Pregnant and Postpartum Members consists of short-term, clinically intensive, structured, day and/or evening substance use disorder services for pregnant or postpartum Members. 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 SOAPs (ASAM Intensive Outpatient Program) for Pregnant or postpartum Members are provided to members who are pregnant or postpartum and who are not experiencing and/or are not at risk of experiencing acute or severe withdrawal symptoms as a result of their substance use. Members 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.

Members 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 members psychosocial well-being has stabilized. Enhanced SOAP for

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[1] Commercial products include HMO, POS, PPO, and CareLink℠ when Tufts Health Plan is the primary administrator.

[2] Tufts Medicare Preferred and Tufts Health Plan SCO are collectively referred to in this payment policy as Senior Products.

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Pregnant and Postpartum Members 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 programs will provide ASAM Intensive Outpatient Program services until the member's symptoms can be safely managed at a less intensive level of care.

COMPONENTS OF SERVICE

1. The Enhanced SOAP (ASAM Intensive Outpatient Program) for Pregnant and Postpartum Members complies with all provisions of the corresponding section in the General Performance Specifications.
2. The provider complies with requirements of the Department of Public Health (DPH) Bureau of Substance Addiction Services (BSAS) 105 CMR 164 Licensure of Substance Use Disorder Treatment Programs, including reporting requirements.
3. The program is responsible for updating its available capacity, one time per week on the Massachusetts Behavioral Health Access website. The program is responsible for keeping all administrative and contact information up to date on the website. The program is responsible for training staff on the use of the website to locate other services for members, particularly in planning aftercare services.
4. In addition to the service components required in the SOAP level of care, the Enhanced SOAP for Perinatal Members is required to provide the following
   - The provider admits and has the capacity to treat pregnant or postpartum Members 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.
   - The provider arranges all necessary medical and obstetric consultations within 48 hours of admission and documents this in the Member's health record.
   - 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 member's health record.
5. The Enhanced SOAP for pregnant and postpartum Members assists members 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.
6. The Enhanced SOAP for pregnant and postpartum members assists the member in accessing medical services. All such activities are documented in the Member's health record.
   a. If the member has not undergone a complete physical examination within the past six months, the Enhanced SOAP is responsible for assisting the member in scheduling an appointment with their primary care clinician (PCC). Such efforts including any contact with the member's PCC are documented in the Member's health record.
   b. If the member does not have a PCC, the Enhanced SOAP follows the requirements delineated in the General Performance Specifications.
   c. If the member does not have an OB/GYN, midwife, or other obstetric health care provider, the Enhanced SOAP must refer them to one.
      - If a patient consents to the E-SOAP referring them to an obstetric healthcare provider, the E-SOAP must also follow-up to ensure patient attends their scheduled visit.
   d. When needed, the Enhanced SOAP assists members in making appointments at local walk-in medical service centers.
   e. When indicated, the Enhanced SOAP encourages the member to undergo HIV, syphilis, hepatitis B and C, chlamydia, gonorrhea, and PAP testing.

STAFFING REQUIREMENTS

1. If 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 waivered 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 (ASAM Intensive Outpatient Program) for Pregnant and Postpartum Members complies with all provisions of the corresponding section in the General performance Specifications.
3. The Enhanced SOAP for Pregnant and Postpartum Members 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 Provider Manual.
4. Enhanced SOAP for Pregnant and Postpartum Members staff have knowledge of the local resources for Members 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.
5. Ongoing, in-service trainings for staff that address working with members who are pregnant are documented and provided for all Enhanced SOAP staff.
6. Program staff coordinate care with the Member's PCC and obstetrician/gynecologist, midwife, or other obstetric health care provider and consult with those providers as needed.

PROCESS SPECIFICATIONS

Assessment, Treatment/ Recovery Planning, and Documentation

1. The Enhanced SOAP (ASAM Intensive Outpatient Program) for Pregnant and Postpartum Members complies with all provisions of the corresponding section in the General Performance Specifications.
2. 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 members through mood and anxiety disorders
    - Ensuring that they have supports for newborn care
3. Ensure that Behavioral Health Clinical Assessments conducted by Behavioral Health Providers are in writing, dated and signed, and include, at a minimum, the following:
    a) Clinical formulation, rationale for admission or continuance of care, discussion of any possible diversionary or lower levels of care, recommendations, and strengths.
4. The assessment, treatment/recovery plan, and discharge plans are developed in consultation with the Member'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.
5. In addition to the requirements outlined in the SOAP performance specifications, the Enhanced SOAP for Pregnant and Postpartum Members documents in each Member'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 (ASAM Intensive Outpatient Program) for Pregnant Members makes reasonable efforts to discharge members to stable and safe living situations. Such efforts are documented in the Member's health record.
2. The Enhanced SOAP for Pregnant Members ensures that members are discharged with connections to obstetrics, pediatrics, and primary care clinicians. They must also connect members to resources including but not limited to mental health support, lactation support, and community resources for families (home visiting, WIC, diaper banks, etc.)

SERVICE, COMMUNITY AND COLLATERAL LINKAGES

1. The Enhanced SOAP (ASAM Intensive Outpatient Program) for Pregnant Members complies with all provisions of the corresponding section in the General Performance Specifications.
2. The Enhanced SOAP for Pregnant Members establishes working relationships with appropriate community-based programs that serve individuals who are pregnant, which may include but are not limited to:
    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.

3. The Enhanced SOAP for Pregnant Members provides referrals to these community-based programs, assists Members in linking to those services, and documents all efforts and referrals made in the Member's health record.

QUALITY MANAGEMENT (QM)

1. Enhanced SOAP (ASAM Intensive Outpatient Program) providers must have a quality management plan inclusive of a continuous QI process to evaluate care provided and review adherence to policies and procedures within the program. Data may be collected via satisfaction surveys, electronic medical records, and other formats to inform the QI process.
2. Providers must report Enterprise Service Management (ESM) data to BSAS, as directed by BSAS and/or EOHHS.
3. The provider must submit required notifications to BSAS per 105 CMR 164.000: *Licensure of Substance Use Disorder Treatment Programs* and EHS, and managed care plans as appropriate.

DOCUMENT HISTORY

- January 2024: Tufts Health One Care (a dual-eligible product) name change.
- June 2023: Updates based on performance specifications provided by MassHealth