

## **SUPPORT Act Section 1003: Planning Grants for the Demonstration Project to Increase Substance Use Disorder Provider Capacity**

**State Medicaid Agency:** District of Columbia

**Key Focus Populations:** Medicare-Medicaid dual-eligibles, individuals with co-occurring mental health conditions, and individuals with co-morbid physical health conditions participating in Health Homes

**Funding Amount:** \$4,616,075

**Program Areas of Focus<sup>1</sup>:** The information below summarizes the grantee's initial areas of focus through the planning grant awards, which are to:

- Provide a more seamless experience of care that integrates behavioral and physical health, improve treatment rates for substance use disorder (SUD), and promote healthier lives for District of Columbia residents.
- Conduct a comprehensive needs assessment of Medicaid provider capacity to diagnose and treat SUD, including assessing payment redesign options to increase and sustain provider capacity to address SUD.
- Provide education and technical assistance to Medicaid providers to build capacity to integrate behavioral and physical health care and treat individuals with SUD in community settings.
- Reduce the impact of negative treatment bias among community providers and implement a competency-based approach to enhance Medicaid providers' ability to diagnose and treat SUD.
- Build infrastructure to enable structured data collection and communication with behavioral health providers, including developing and implementing consent management tools to facilitate appropriate exchange of 42 CFR Part 2 data.

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<sup>1</sup> The purpose of the planning grants is to increase the capacity of Medicaid providers to deliver SUD treatment or recovery services through:

- An ongoing assessment of the substance use disorder treatment needs of the state;
- Recruitment, training, and technical assistance for Medicaid providers that offer substance use disorder treatment or recovery services; and
- Improved reimbursement for and expansion of the number or treatment capacity of Medicaid providers.