

Deputy Secretary Shannon McMahon Department of Health and Mental Hygiene Herbert R. O'Conor State Office Building 201 West Preston Street Baltimore, Maryland, 21201

Dear Deputy Secretary McMahon,

Thank you for the opportunity to comment on the recent Methadone Re-bundling Proposal issued by Medicaid's Behavioral Health Unit. While we appreciate the goal of the proposal to increase counseling services provided by Opioid Treatment Programs (OTPs), we are concerned about the proposal's unintended, negative results on access to substance use disorder services through OTPs and subsequent increase in emergency department use.

The proposal states that Medicaid intends to un-bundle the methadone maintenance service and lower the reimbursement rate for the medication administration portion of the service. This proposed reduction in reimbursement rates may cause several OTPs to cease operations, creating a situation where access to important substance use disorder services would become severely limited for a very vulnerable population.

Adequate access to outpatient behavioral health services is greatly important to Maryland's hospitals, who, under the state's new all-payer waiver with the Centers for Medicare and Medicaid Services, are focused on ensuring their patients get the right care, at the right time, and in the right setting.

Currently, the demand for behavioral health services is so great that patients are overwhelming hospitals. When the proper outpatient behavioral health services are not available, individuals seek treatment in hospital emergency departments. In 2014 alone, there were more than 100,000 behavioral health visits to emergency departments; 35 percent of these visits were related to substance use disorders. While emergency departments often serve as the safety net for those without access to community-based services, OTPs are specifically suited to care for the specialized needs of these patients as safely and effectively as possible. Limiting OTP access will, therefore, not only shut off access to care in the appropriate setting but will also exacerbate emergency department crowding.

Again, we thank you for the opportunity comment on the Methadone Re-bundling Proposal. Maryland's hospitals stand committed to improving access to behavioral health services, but in ways that ensure the sustainability of an adequate network of behavioral health providers. We therefore request that the state review and revise its proposal to protect access to OTPs.

Sincerely,

Maansi K. Raswant

Director, Policy & Data Analytics

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