NATIONAL ASSOCIATION
OF
ADDICTION TREATMENT PROVIDERS

Discerning Ethical Addiction Treatment

NAATP Webinar Series

Association for Behavioral Health and Wellness

April 3, 2018
10:00 am MST

VOICE.

VISION.

LEADERSHIP.

Pamela Greenberg, CEO ABHW

Marvin Ventrell, JD-Executive Director, NAATP

Peter Thomas, Quality Assurance Officer, NAATP

Jay Crosson, MBA, Ethics Committee Chair, NAATP

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Agenda

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1. Our Common Concern

- Problematic Addiction Treatment Practices Hurt Everyone

  - The Consumer
  - The Payer
  - The Addiction Treatment Field at Large

- We Welcome Scrutiny
- Together We Can Clean this Up
- We Need to Identify the Bad Guys and the Good Guys

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Addiction in America

23 Million Have Addiction / SUD

    Primary Substance / Addiction is Alcohol (AUD) 17M
    Alcohol also accounts for most SUD Deaths

6 Million Drug Addiction

    Mostly Cocaine, Methamphetamine, and Opioids
    Opioids = 3 M
        But it Kills Fast – 30,000 + Annually (and rising)
        Roughly ½ & ½ Prescription vs Illicit

Sources: SAMHSA; NIDA: JAMA; Open Society Foundation

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About NAATP

- 1978 to 2018: 40th Anniversary Year
- The Trade Association for Treatment Providers
- Mission
- *To provide leadership, advocacy, training, and member support services to ensure the availability and highest quality of addiction treatment*
- Convening, Provider Resources, Consumer Resources, and Public Policy Advocacy
- Supporting the Provider and Advancing the Practice
  - Really a Trade Association +

2. Clinical and Operational Developments

- Disease Validation

- Recovery Validation

- 7 Key Environmental Influences

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Definition of Addiction:
A Primary/Chronic/Brain Disease +

- Addiction is a **primary, chronic** disease of **brain** reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic **biological, psychological, social and spiritual** manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.

- Addiction is characterized by inability to consistently abstain, impairment in behavioral control, craving, diminished recognition of significant problems with one's behaviors and interpersonal relationships, and a dysfunctional emotional response. Like other chronic diseases, addiction often involves cycles of relapse and remission. Without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death.

Source: ASAM

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Recovery: Over 20 Million Americans

A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential

4 Dimensions of Recovery   *Much More than Mere Survival*

1. *Health*: overcoming or managing one's disease(s) or symptoms—for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if one has an addiction problem—and for everyone in recovery, making informed, healthy choices that support physical and emotional wellbeing.

2. *Home:* a stable and safe place to live;

3. *Purpose:* meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society;

4. *Community*: relationships and social networks that provide support, friendship, love, and hope.

Source: SAMHSA

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7 Key Environmental Factors

1. Stigma Reduction
2. Movement Away from War on Drugs
3. Public and Political Recognition of Addiction
4. Affordable Care Act and Addiction as an Essential Health Care Benefit
5. Parity (MHPAEA)
6. The Opioid Crisis
7. Pharmacological Emphasis

    = A New Boom in Treatment as a Business
    = Addiction "Space" as a "Growth Industry"

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3. The Unscrupulous Profiteer

- A minority but aggressive highly competitive element of predatory entrepreneur coming into the addiction "space"
- Profit motivation above all
- If its not specifically prohibited, they will do it
- There is a criminal element as well

1. Patient Brokering
2. Predatory Web Practices
3. Insurance and Billing Abuses
4. Payment Kickbacks
5. Licensing and Accreditation Misrepresentation

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4. The Google Environment

- Primary method of patient locating treatment

- The wrong way to find health care

- Behavior and identity aggregation system

- Not designed to locate the right high quality care

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- Fall 2017

- Google Suspends Addiction AdWords

- NYT Expose and Addiction Industry Leaders Alert

- Based on misuse of the platform by addiction marketers

- Historic move with very little precedent

- November 2017 NAATP meets with Google to develop plan to allow appropriate marketing through regulation and vetting of advertisers

- Focus: SEO, AdWords, and Maps

- Plan to be revealed at NAATP National 2018

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5. The NAATP Response: The QAI

- Quality Assurance Initiative

- Goals

1. Promote Best Business Practice
2. Deter Problematic Business Practice
3. Assist Payers in the Discernment of Services
4. Inform Law and Policy Makers
5. Educate and Protect the Consumer
6. Train and Educate the Provider

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QAI Components

1. **The Rulebook: The QAI Guidebook**
2. **The Addiction Industry Directory – The AID**
3. **The Ethics Code**
4. Member Accountability
5. Cleaning House
6. The Google Criteria
7. Accreditation Movement

Bold = Today's Focus

The Quality Assurance Guidebook
The Competencies

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ADDICTION INDUSTRY DIRECTORY

- Our Membership List
- Vetted
- Transparent
- Comprehensive
- Accountable

- naatp.org/resources/addiction-industry-directory

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6. The NAATP Code of Ethics 2.0

- Adopted January 1, 2018
- Establishes a Uniform Industry Standard and a Common Foundation for Ethical Practice
- Significant Focus on

  - Marketing Accuracy
  - Marketing Transparency

- Addresses the Most Pressing Concerns - the Big 5

  (Patient Brokering, Predatory Web Practices, Insurance and Billing Abuses, Payment   Kickbacks, Licensing and Accreditation Misrepresentation)

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Code Sections

- Preamble
- Treatment
- Management
- Facilities
- Marketing
  - Financial Rewards
  - Deceptive Advertising
  - Client Identities

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Preamble

- We believe in SUD as a a potentially fatal primary chronic disease of the brain accompanied by psychological and social conditions

- NAATP members treat SUD along the entire continuum of care through best practices

- Best practices include values-based ethical business practice

- The Code defines unacceptable practices

- All NAATP members <u>must</u> adhere to the code

- NAATP Members <u>agree to be removed</u> for violation

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…Preamble

"NAATP members provide SUD treatment and support. In so doing, <u>NAATP members must adhere to the highest levels of professionalism and ethical conduct</u> through the entire continuum and spectrum of clinical and business services, including development and marketing, admissions, treatment services, management, human resources, and relationships with the public, press, and policy makers. To ensure that NAATP members adhere to such responsibility and accountability, NAATP has adopted this Code of Ethics (Code). All NAATP members <u>agree to abide by all provisions of the Code as a condition of membership</u> and <u>further agree to removal from membership</u> for violating the Code based upon such a determination by NAATP. NAATP also offers this Code as an ethical conduct guide for addiction treatment providers outside NAATP membership."

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Patient Brokering
Code Section IV, A, 1-5

Section IV: Marketing

A. Financial Rewards for Patient Referrals

1. Patient brokering is prohibited. No financial rewards, substantive gifts, or other remuneration may be offered for patient referrals. NAATP members must not provide compensation for a patient referral. A NAATP member must not charge or receive compensation for providing a referral.

2. .... may not compensate referral out…

3. … may not engage in the buying and selling of leads

4. … no inducements…

5. … no waiver of patient responsibility as to deductibles and co-pay…

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Predatory Web Practices
Code Section IV, B1, B2

- NAATP members must not engage in false, deceptive, or misleading statements, advertising, or marketing practices, including but not limited to, predatory web practices…

- NAATP members must be transparent regarding their identity and service. NAATP members must provide prominent-information in all their advertising, on their websites, and in their collateral marketing materials about the type and model of services, corporate entity, treatment program brand, licensing, accreditation, location of facility or facilities, and staff credentials.

Predatory Web Practices
Code Section IV, B4

- Web directories that use facilities images, name, logos, and trademarks that do not clearly identify that facility's direct phone number and website are prohibited. Banners and borders on websites that utilize a web directory's call center number, especially when conveying an appearance of being a consultant or independent specialist, are prohibited.

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- Fee structures must be <u>reasonable, transparent, and available to the public.</u>

- NAATP members must collect reasonable fees and rent from the patient for sober living and other non-clinical or ancillary services provided alongside outpatient services.

-   Routine waiver of patient financial responsibility related to deductibles and co-pays is prohibited. Waivers must not be provided except in the case of demonstrable financial hardship based on written objective criteria.

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Payment Kickbacks
Code Section IV A2, B1

- NAATP members may refer families or individuals to treatment or recovery support professionals, including interventionists, continuing care providers, monitoring agencies, and referral sources that offer services to patients prior to or after residential or outpatient treatment. NAATP members must not compensate such individuals or organizations in exchange for referrals, either in the form of direct payment, consulting contracts, fee splitting, or other compensation.

- NAATP members must not engage in …including but not limited to, predatory web practices, payment kickbacks, services, and license and accreditation misrepresentation. Facilities operating under a "Florida model" providing outpatient clinical services along with a housing component must label clearly their program as such, and distinguish themselves from licensed residential facilities.
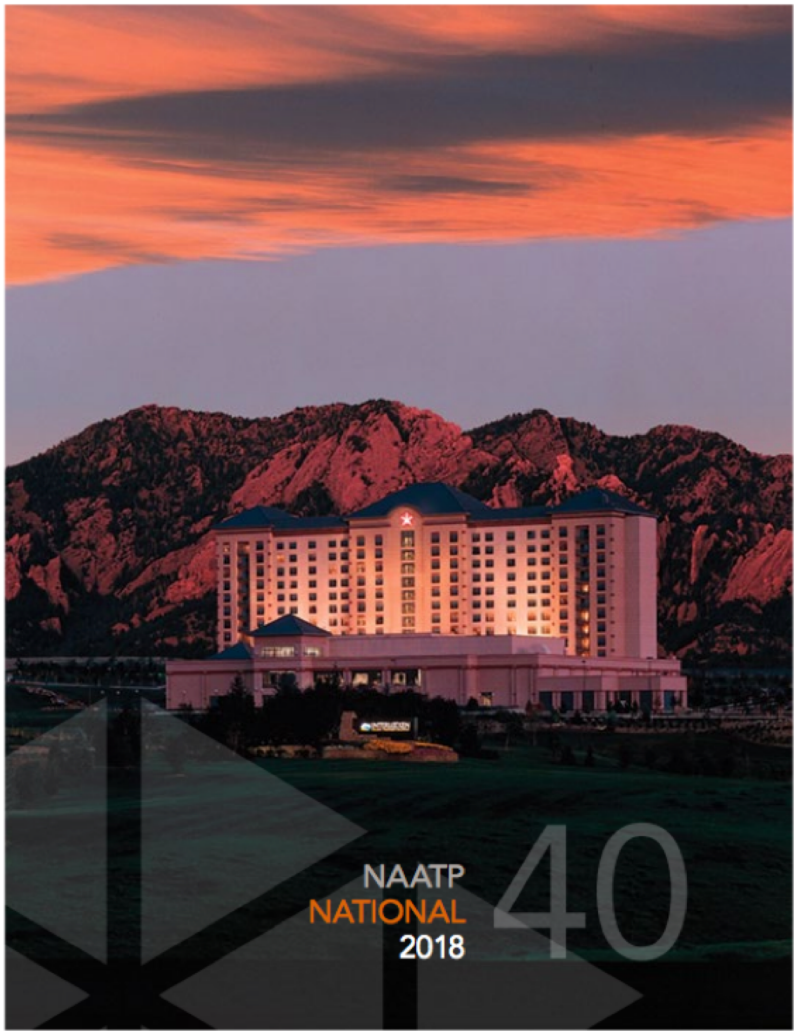
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Section I: Treatment

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E. NAATP members must be licensed for all services for which their regulatory body provides licensure and must comply with all such licensure requirements.

The Code does not cover Accreditation but Guidebook will.

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Q & A

Join us in Denver!
2018 National Addiction Leadership Conference

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Materials

- NAATP Membership Guide
  - https://www.naatp.org/sites/naatp.org/files/NAATP_Member%20Guide_Interactive.SinglePage.pdf
- NAATP Code of Ethics 2.0
  - naatp.org/resources/ethics
- The NAATP Addiction Industry Directory (The AID)
  - naatp.org/resources/addiction-industry-directory
- *Addiction Leader*, Spring 2018 Issue
  - naatp.org/sites/naatp.org/files/NAATP_Newsletter_V3%20Issue%201%20Spring%202018_Online_0.pdf

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Thank you!

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