The NAATP QAI & The Tradition of Values-Based Addiction Treatment

Doug Tieman
President & CEO, Caron Treatment Centers
Educational Goals

• Learn to examine “what we do” through an ethical & value-based lens

• Implement critical standards of care necessary to be consistent with the rest of the healthcare system to build trust in the substance use disorder treatment sector

• Understand how to market substance use disorder treatment as a chronic disease

• Position and promote one’s organization in an appropriate, value-based and ethical way – “Healthcare”
Business Practices, Marketing, Standards of Care and Outcomes

THE BIG NOT SO-PRETTY PICTURE
Our History
The 3Cs

Collaborate & Cooperate vs. Competition

• Competition increased – and that’s good
• Some competitors’ tactics have made headlines for fraud, waste & abuse allegations & convictions
• *Still* must collaborate and cooperate around standards
Our Reality
What the Public Sees

• Qualitative
  – No nationwide oversight

• Ethics
  – Not as clear in behavioral health as they should be

• Modalities
  – Medications
  – 12-steps
  – Yoga
  – Beach
  – ???

• Care
  – Not seeing concern

• Staff
  – Unqualified
  – Understaffed

• Outcomes
  – Not identified or no standards of measurement
  – “What are my chances for success?”
Summary
What the Public Sees

- Credibility questioned & lack of trust in treatment facilities
- No guidance for identifying quality programs

“Real Goal”: Treatment Centers are just in it for the $$
How Opioid Treatment Has Fueled the Epidemic!

By Christopher B. Smithers

Treating addiction, especially opioid addiction, is as challenging as treating cancer. For more than half a century the Smithers Foundation has been supporting research and treatment of alcoholism and substance abuse. What is important and what must remain consistent in the field of recovery, is the employ of medical and psychiatric personnel and professionals trained in this field who are educated in the latest advances in addiction treatment and to make sure that an addict who wants help is first examined and then treated by these experts.

Our concern is that in the growing field of so called “sober houses” and many treatment centers you find none of this. We’re referring to poorly regulated and unprofessional facilities operated by profiteers. It is not uncommon for an overdose victim to be a current or former resident of a sober house or unprofessional facility.

We may be painting with a wide brush but unfortunately the sober house and treatment center run by medical professionals is a rarity. The Internet is full of glossy advertisements offering comfortable residential conditions.

One “upscale sober living” facility in New York offers this:

We offer First Class amenities including our own personal chef, full maid service, and weekly sober activities. A distinctive attribute of the house is the calm and peaceful ambiance. Serenity can be found in our beautiful, tranquil outdoor courtyard.

Their extensive website makes no mention of medical professionals on staff. Typically, these facilities do not offer much medical care or quality counseling or oversight of the residents and do not employ professionals or a trained medical staff. Addicts and families are fooled into thinking that this luxury sounding place is the way to sobriety for themselves or their loved one when in reality they are unknowingly putting themselves or their loved one in another unhealthy situation.

We believe that an attractive environment with quality amenities is important, but without a professional medical staff on duty 24/7 this is just a Trojan horse.

New York Times, Sunday, October 1, 2017

Full-page advertorial by Christopher Smithers
“So Here We Are”
Déjà Vu - 1980s on Steroids

- FBI/Insurance and Medicare Fraud/Scandal/Charges
- 2nd verse same as the first – whole lot louder
  – Internet
Today/Tomorrow
The Ethical Lens

Healthcare not a timeshare

• The Law
• Ethics

DISCLAIMER: The content of this presentation is not all inclusive and is for informational purposes only. This is not a substitute for consulting the statutes and their regulations or for legal advice.
What’s Legal and Ethical

• Legal – What the law says
• Ethical – What’s right, “Standards”
• Accountability and compliance
Know The Law
Regardless of Intent – Illegal is Illegal

- Willful
- Ends justify the means
- Ignorance
Federal Laws that Apply

**Fraud – Patient Attraction**
- Stark Law
- Anti-Kickback Statute

**Abuse - Billing**
- False Claims Act
- Criminal Healthcare Fraud Statute

**Fraud & Abuse - Other**
- The Exclusion Statute
- Deficit Reduction Act
- Whistleblower Protection Act

Get to know them!

Overview of the applicable laws available at [www.caron.org/NAATP2018](http://www.caron.org/NAATP2018)

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When There Are No Laws – Who Determines If It’s Ethical?

2016 Definition of Treatment Field Ethics

• What I do is ethical – What YOU do is not

• Not good enough!

• We need STANDARDS

So Who Determines Ethical Standards?
STANDARDS

Examples of Unethical Clinical Behavior*

- Having a relationship with a patient
- Facebook friends with patients
- Staff members accepting gifts, money, loans, etc. from patients or families of patients

Examples of Unethical Business Practices**

- Referring all patients to the same sober living facility
- Awarding a contractual arrangement for services/goods to a friend and not through a bidding process

*Identified by NAADAC

**Identified by the Institute for Supply Management
Addiction Treatment’s Problem

- Limited regulation or consistency
- Limited legal enforcement
- Limited standards - including outcomes
- Limited research into addiction treatment
- No national Centers of Excellence criteria

No way for patients/providers/insurance/government to determine what works

Results Anything Goes?
NAATP Leadership
Tradition of Value-Based Addiction Treatment

In the Past
• Placement criteria with ASAM

Current
• Quality Assurance Initiative
• Outcomes
• Google - LegitScripts
NAATP Leadership
A Deeper Dive

• Guide to Treatment Program Selection
  – Including questions to ask treatment centers

• Outcomes Pilot
  – 3-year Pilot Study being completed

• Quality Assurance Initiative
  – “Code of Ethics”
Quality Assurance Initiative

-The Resource Guidebook-

• Treatment
• Management
• Facilities
• Marketing
  – Clear standards
  – Complaint process
  – Policing action
Marketing Guidelines Address

- Patient Brokering
- Predatory Practices
- Deceptive Web Directory Call Aggregation
- Insurance & Billing Abuses
- Payment Kickbacks
- License & Accreditation Misrepresentation
Addiction is a disease of relapse and remission
Relapse is not a failure, but a symptom

HOW WE TALK ABOUT CHRONIC DISEASE
Where Treatment is Today

• Where cancer treatment was at in the 1960s
  – Stigmatized – The “C” word
  – Lacking research and effective treatment
  – Siloed

• Get the treatment provided by the center, not necessarily what is medically needed or necessary
## Chronic Illness Model

<table>
<thead>
<tr>
<th></th>
<th>DIABETES</th>
<th>SUD</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Symptoms</strong></td>
<td>Clear &amp; Acceptable</td>
<td>• Unclear</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Stigma</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Denial</td>
</tr>
<tr>
<td><strong>Physician Visit</strong></td>
<td>• Informed</td>
<td>• Untrained</td>
</tr>
<tr>
<td></td>
<td>• Educated</td>
<td>• No Tests</td>
</tr>
<tr>
<td></td>
<td>• “Testing”</td>
<td></td>
</tr>
<tr>
<td><strong>Information Search</strong></td>
<td>• Highly Regulated</td>
<td>• Unregulated</td>
</tr>
<tr>
<td></td>
<td>• “Medical”</td>
<td>• Predatory</td>
</tr>
<tr>
<td><strong>Treatment</strong></td>
<td>Carefully Selected</td>
<td>“Hit” or “Miss”</td>
</tr>
</tbody>
</table>
# Chronic Illness Model

<table>
<thead>
<tr>
<th></th>
<th>DIABETES</th>
<th>SUD</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Disease Management</strong></td>
<td>Directed by PCP</td>
<td>PCP – Unlikely</td>
</tr>
<tr>
<td><strong>Insurance</strong></td>
<td>• Pays Important –</td>
<td>Limited</td>
</tr>
<tr>
<td></td>
<td>• Costs Offset</td>
<td></td>
</tr>
<tr>
<td><strong>Relapse</strong></td>
<td>• Early Detection</td>
<td>• Emergency</td>
</tr>
<tr>
<td></td>
<td>• Additional Tx</td>
<td>• Moral Failure</td>
</tr>
<tr>
<td></td>
<td>• Specialist</td>
<td>• Treatment Failed</td>
</tr>
</tbody>
</table>
SUDs

The Insurance Gap

- % of Insurance
- Insurance Pays
  - 40% of HC
  - 10% of SUD
- WSJ

Wall Street Journal, March 9, 2018, print edition as 'Rehab Costs Add to Anguish of Addiction.'
Ending the Cycle

TRANSITIONING TO THE CHRONIC CARE MODEL
So What Is Your Message?
Vacation or Disease Treatment

- What patient/families want to hear vs. the care they require
- Customer-centric vs. patient-centric
  - Focus on amenities to qualifications
  - Locale to programming
So What Is Your Message?

• We Deliver High-Quality Healthcare Services
  – Staff qualifications
  – Evidence-based practices
  – Academic affiliations
  – Proper measurements
  – Quality indicators
  – Bonafide outcomes

• Realistic data based on what can be measured & validated
So What Is Your Message?

• *Addiction is a complex, chronic and treatable disease.*
  – Addiction is substance use disorder.
  – Like diabetes and heart disease, substance use disorder is a disease category that affects the brain and manifests differently in individuals.

• Healthcare has moved to an outcomes-based model, except addiction treatment
  – Complete abstinence has been the standard

• Only chronic disease where 100% long-term remission is success
Chronic Disease
Ethical Business Practices & Marketing
Improved Standards of Care and Outcomes

HOW DO WE GET THERE?

COOPERATE & COLLABORATE ON STANDARDS
Let’s Stop Focusing on What We *Shouldn’t* Be Doing

- Illegal
- Unethical
Let’s Start to Focus on What We *Should* Be Doing

- Standards
- Outcomes
- Transparency
- Centers of Excellence
- Treat this like the disease it is
- Treat those suffering with quality care
- NAATP Leadership -

What are best practices?

- Ethics shouldn’t be part of the conversation, it should be inherent to what we do
- Field is doing good work
- How do we do better?

The Results

- Improved Care for Consumers
- Better & More Consistent Reimbursement
NAATP

• Building consensus
• Quality Control Initiative
  – Guidebook
  – Training
  – Certification
• Policing
• Gold Seal
• Develop a self-regulating organization

Addresses Standards/Outcomes/
Transparency/“Trusted List”/Policing
Shatterproof

- Payors
- Providers
- Consumers
- Government (Licensing)

Addresses Standards/ “Trusted List”
ASAM/CARF*

- The American Society of Addiction Medicine (ASAM) & Commission on Accreditation of Rehabilitation Facilities (CARF) collaborating to develop certification for addiction treatment centers
- Certification will be based on *The ASAM Criteria* and assessed by CARF
- *The ASAM Criteria* are becoming a standard by work of ASAM, state governments & public & private payers

Addresses Standards/Centers of Excellence
Legal

• National
  – Legislation
  – Regulation
  – Federal Trade Commission

• State
  – Legislation
    • Florida, NY, CA
  – DA Efforts
  – Task Forces

Addresses Standards/Policing
Others

• Insurance Industry
  – Determines what to pay for
  – Determines how much to pay/value of services

• Google
  – Determines how we advertise

• More to come…
Media = Public Perception
Not Good

- Palm Beach Post
- NY Times
- Huffington Post
- Boston Globe
- Stat News
Embracing changes

RESTORING TRUST
What Should You Be Doing?

- Know the laws and ethics that affect the sector
  - NAATP as a resource
- Licensure/Accreditation/Certification
  - NAATP/ASAM/CARF/JACHO
- Robust Compliance Program
  - Accountability, Standards, Law
- Improve Quality Program for Measuring Outcomes
- Local/State Efforts – Lead or Join
- Your facility – promote your “green grass”
- Adopt a Patient Bill of Rights
The Future Must Start Now!

Additional Information and Resources: www.caron.org/NAATP2018
Resource Guide

Association Ethics & Guidelines

Marketing & Billing
NAATP Ethics & Quality Resources
- Values Statement
- Public Policy Statement
- Code of Ethics
- Ethics Complaint Process
- Quality Control Initiative

National Alliance for Recovery Residences Standards & Certification Program

Florida Association of Recovery Residences Standards Overview

Patient/Counseling/Relationships
- NAADAC/NCC AP Ethical Standards

Supply Management/Purchasing
Institute for Supply Management

Information/Resources

- Maryland Addiction Recovery Center – The Misconceptions of Amenities-Driven Addiction Treatment
- United for Ethics Now
- Alcoholism & Drug Abuse Weekly, "Google restricts internet advertising for treatment centers"

Caron Patient's Bill of Rights