

President Obama Signs Health Care Reform

Late March, President Obama signed the health care reform bill, which promises to change the way we receive health care and expands coverage to millions of people.

In recent months, discussions have taken place regarding how funding for substance abuse treatment may change as a result of health care reform. The following two presentations provided a glimpse of the potential changes that may take effect for the coming federal fiscal year (October 2010-2011).

Substance Abuse Priorities under the Obama Administration

Below are highlights from Dr. Richard Rawson's Presentation

- Under the Obama plan, new money will go through the Medicaid System or insurance industry. The three areas that will be emphasized are:
 1. Involvement of licensed medical professionals.
 2. Use of evidence based practices.
 3. Greater integration/cooperation between public health organizations.
- Integration of substance abuse and psychiatry. Building relationships and networks with doctors and medical professionals will benefit agencies.
- Memorandums of understanding, contracts and agreements among agencies will be needed to provide the integrated care defined in the new legislation.
- Smaller programs/agencies will have to become more sophisticated or may need to merge with larger programs/agencies.
- Patient-centered care and comparative effectiveness will be encouraged.
- Behavioral Health Consultants will be employed to communicate with providers & medical professionals.

Demand Reduction in 2010 Drug Control Strategy: Prevention, Treatment & Recovery

Below are highlights from the "Domestic Drug Czar," Dr. Tom McLellan's Presentation

- The three areas that are being considered to improve treatment are use of evidence-based interventions, the measurement of results, and investment in infrastructures.
- According to the public health approach, there are five priorities that will be emphasized: a national prevention system, the engagement of primary care, strategies to close the addiction treatment gap, special care for offenders, and improved data systems.
- To create linkages between systems of care, the areas of focus will include:
 1. Intervention - Prevention Prepared Communities and Coordinated federal purchasing of services.
 2. Screening - Detect emerging cases of addiction, anticipate drug side effects, anticipate non-compliance.
 3. Continuing Care Model - Primary Care (expand the MediCal codes and financing, train/motivate generalist physicians, and reduce drug overdose); Specialty Care (referral to specialty doctors that have vast knowledge to one particular area of a chronic illness or health condition) and Primary Continuing Care (Re-intervene, monitor, and support patients)
 4. Data Systems - Maintain a legacy system (Pilot Community Performance Measures will show early warning signs of new drugs and problems) and Measurement (data will show what is working and what needs to be re-evaluated for quality services).

How exactly all of this will come into play is still being debated. We will continue to provide more information on this topic as it comes available.