ZOOM MEETING REMINDERS



Thank you for joining today's SOR 4.0 TAP Multi-Year Targeted Project (MYTP) Informational Webinar!

- To create a positive meeting environment for all, we ask that you:
 - Remember that all participants are muted upon entry to the call. To unmute, follow the directions below:
 - If joining by phone, press *6 to unmute yourself.
 - If you are joining on your computer, hover over your name in the participant list and click unmute to unmute yourself.
 - When you are not speaking, please put your phone on mute to avoid any background noise.
 - Please join with the video option if you are able.
 - Please use the chat feature to ask questions or provide feedback throughout the meeting.
 - Please do not put the call on hold as it will play your hold music or a dial tone for all other attendees.



DELAWARE DEPARTMENT OF HEALTH AND SOCIAL SERVICES DIVISION OF SUBSTANCE ABUSE AND MENTAL HEALTH

STATE OPIOID RESPONSE GRANT 4.0 Tier Award Program (TAP) Multi-Year Targeted Project INFORMATIONAL WEBINAR

January 22, 2025



WELCOME AND OPENING REMARKS



DSAMH SOR Team

- Brent Waninger, Director, Executive Programs and Grant Administration
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- Sherry Szczuka, Deputy Chief, SOR Program Implementation
- Nilima Ramaswamy, Deputy Chief, SOR Program Management
- Ilia King, Planner IV
- James Larks, Planner IV
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- Kanesha Tucker, SOR Grant Analyst
- Liam Black, Executive Assistant
- Tina Preston, Administrative Specialist III, SOR

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AGENDA



Background of SOR Program

SOR 4.0 Tier Award Program: Solicitation Overview

• Multi-Year Targeted Project (MYTP)

Application Materials

Timeline

Data Reporting

Wrap-up and Next Steps





BACKGROUND OF SOR PROGRAM

Brent Waninger, Director, Executive Programs and Grant Administration



BACKGROUND OF SOR



National State Opioid Response (SOR) Initiative:

- Purpose: To address the overdose crisis, primarily driven by illicit fentanyl, in part by:
 - Increasing access to medications for OUD treatment and supporting prevention, harm reduction, treatment, and recovery services.
 - Providing resources to states and territories for evidence-based treatments, practices, and interventions for OUD and STUD.

DSAMH's SOR Initiative

- **Statewide Focus**: Implement multifaceted efforts to enhance Delaware's system of care for OUD/STUD.
- Key Populations:
 - · Pregnant and parenting individuals
 - · Racial and ethnic minorities
 - · Justice-involved individuals
 - LGBTQ+ individuals
 - Young people (school-aged and transition-aged)

SOR 4.0 VISION & PRIORITIES

Vision

• Delawareans have positive treatment outcomes and long-term recovery from OUD and STUD.

Priorities

- Delawareans have rapid access to low-barrier medications for OUD
- · Delawareans have access to services that address stimulant use
- · Special health needs populations have ready access to services
- · Social determinants of health are addressed concurrently to treatment
- · Delawareans have support navigating care transitions and do not fall through the cracks
- Delawareans are reached, who would not otherwise be, through screening, assertive outreach, and engagement
- Partnerships and new care pathways are created with entities that have high touch engagement with people who have OUD/STUD, and that facilitate pathways to long-term recovery





SOLICITATION OVERVIEW: SOR 4.0 TAP Multi-Year Targeted Project (MYTP)

Brent Waninger, Director, Executive Programs and Grant Administration



TIER AWARD PROGRAM (TAP) OVERVIEW



What is TAP?

 A DSAMH initiative to award SOR funding to expand the State's capacity to engage and serve populations with OUD/STUD. TAP began in 2021 under Delaware's SOR 2 grant and is entering its third iteration under the SOR 4 grant.

How is TAP funded?

- DSAMH's SOR 4 grant is funded by the U.S. Substance Use And Mental Health Services Administration (SAMHSA).
- This solicitation is for new funding opportunities under SOR 4 TAP Multi-Year Targeted Project (MYTP), available to eligible organizations for the period of May 2025 through September 29, 2027.
- *Note:* Funding opportunities for TAP Tiers 4.A, 4.B, and 4.C were released under separate solicitations and are currently closed for this FY.

TAP MYTP SOLICITATION OVERVIEW



Purpose

 To enhance the capacity of SUD/OUD treatment providers to integrate care for medically complex patients into their services. The goal is to support providers as they incrementally develop workforce, care models, and billing processes to provide medically informed substance use care across the continuum of care.



TAP MYTP PROJECT SCOPE & OBJECTIVES

The MYTP funding opportunity will support projects that:

Incrementally build provider capacity:

- Develop a phased plan to strengthen medical service delivery for current and prospective clients over the project's duration.
- Collaborate across the continuum of care to enhance the ability to receive and transfer medically complex clients across levels of care.

Initiate delivery of key medical services:

 Identify the medical needs of the client population and hire key staff to provide care for existing clients (e.g., hiring a nurse to care for wounds).

Integrate medical care into SUD care:

- Deliver co-treatment models to treat identified client needs such as wound care, long-acting injectable medications, infectious disease management, and/or general physical health care services (e.g., developing a modified ACT Team for clients with medical complexity, adding a consulting nurse practitioner role).
- Equip programs to address unmet low-to-mid-level medical needs, reducing treatment refusal rates.

Promote system sustainability:

• Encourage innovation by funding upfront investment in care models with potential for long-term sustainability through Medicaid reimbursement.

TAP MYTP FOCUS ON OUTCOMES



This funding opportunity emphasizes *state-determined outcomes* and invites providers to *partner with DSAMH* to implement a structured, phased approach to service enhancement. MYTP projects will focus on improving care outcomes, including:

- Reduction in hospital readmission rates and emergency department visits for individuals with co-occurring medical and substance use conditions;
- >Improved care coordination and follow-through between healthcare providers;
- >Increased engagement in care within 30 days post-discharge from a hospital;
- Improved health and social outcomes such as decrease in symptoms, reduction in use, and improved patient-reported quality of life; and
- Reduced disparities in service utilization and outcomes across racial, ethnic, or socioeconomic groups.

Providers with innovative, scalable ideas to address these challenges are encouraged to apply.

TAP MYTP: WHAT ORGANIZATIONS ARE ELIGIBLE?



- Organizations that have successfully implemented a DSAMH-funded SOR Tier Award Program (TAP) or Health Equity Advancement Project (HEAP) project previously.
- Existing MH/SUD Agencies/Providers:
 - Programs that provide substance use and/or mental health treatment or recovery services with two years of experience providing relevant services. *Note:* Added weight will be given to applications for projects implemented at residential treatment facilities.
- Projects implemented through MYTP are subject to DSAMH licensure requirements.
- DSAMH will accept applications from single agencies/providers or partnerships between two or more organizations.

APPLICANTS MUST ALSO DEMONSTRATE:

- The ability to hire and integrate skilled medical staff (e.g., RNs, NPs, wound care specialists) into their SUD programs.
- A clear plan to achieve sustainable service delivery, including strategies for managing medically complex populations and reducing avoidable hospital admissions and readmissions.
- Reasonable and appropriate budgetary requests aligned with the level of effort and impact proposed.

TAP MYTP FUNDING PARAMETERS

- Term: May 1, 2025 Sept. 29, 2027
- Funding: Up to \$300,000 annually, capped at \$750,000 total
 - Year 1: Up to \$150,000 (May 1 September 29, 2025)
 - Year 2: Up to \$300,000 (FY 26)
 - Year 3: Up to \$300,000 (FY 27)
- Awards: Limited to two high-impact projects maximum
- Award Factors: Based on client reach, clinical/system impact, and proposed service scope
- Budget Requirements: Must align with project scope, reasonable costs, and funding limits
 - DSAMH may adjust funding levels as needed
 - Unjustified funding requests will be returned for revision or may be rejected





KEY APPLICATION RESOURCES

Sherry Szczuka, Deputy Chief, SOR Program Implementation



RESOURCES AND TEMPLATES



Solicitation

Application Form with Embedded Implementation Plan

Budget Template

Budget Tutorial

All Available on the ATRC Website: https://atrc.dhss.delaware.gov/funding-opportunities#tap

BUDGET TEMPLATE



Live Demonstration





Sherry Szczuka, Deputy Chief, SOR Program Implementation



TAP MYTP AWARD TIMELINE*



Milestone	Date
Solicitation Release	January 9, 2025
Informational Webinar	Today, January 22, 2025, 11:00am – 12:00pm ET
Applications Due	February 10, 2025
Provider Meetings	February 20, 21, <u>or</u> 24, 2025 (scheduled with eligible applicants, after application is received and reviewed).
Anticipated Award Start Date	May 1, 2025

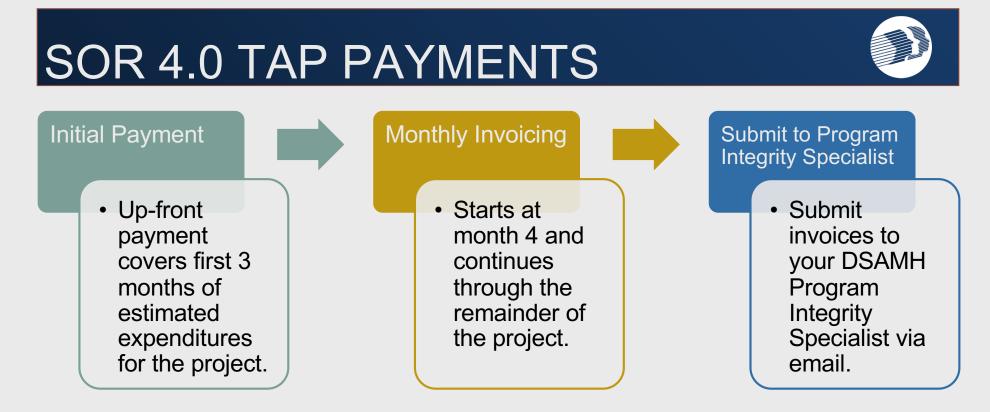
*Timeline subject to change. Delays during the review process may affect agreement start dates.



TAP PAYMENT STRUCTURE

Ilia King, Planner IV





Note: Subrecipients will be required to submit detailed budgets for Year 2 and Year 3 closer to the start of those Fiscal Years in place of the "projected budgets" submitted as part of the application.



TECHNICAL ASSISTANCE



MYTP IMPLEMENTATION TA OVERVIEW:

Mandatory support and coaching will be provided to awardees throughout the implementation period, including:

Quarterly Awardee Meetings:

• Support awardees, foster idea exchange, and share TAP, SOR grant, and SAMHSA updates.

Project-Based Learning Network Series*:

- Required participation in structured peer learning cohorts (ECHO-style).
- Bi-weekly sessions (first 6 months), then monthly.
- Focus on content knowledge, peer networking, project feedback, and performance improvement.

Case-Based Discussions:

• Sessions featuring real-world case studies on integrated care challenges and solutions.

Presentations and Coaching on Key Topics, such as:

- Integrated SUD and medical care models.
- Medical needs in SUD populations (e.g., wound care, infectious disease).
- Multidisciplinary team training.
- Managing co-occurring conditions (e.g., HIV, Hepatitis C).
- Client engagement and treatment adherence strategies.
- Sustainability and scalability of integrated care models.

*Format may be adapted to meet subrecipient needs.



ADDITIONAL TA SUPPORTS (CONT'D)

Annual SOR Conference:

• Optional attendance at spring in-person conference.

Optional Project-Specific Coaching:

• Federal Opioid Response Network, Bowling Business Strategies, Health Management Associates, and DSAMH ATRC materials.

Individual Technical Assistance:

• May be assigned by DSAMH to ensure project alignment with SAMHSA standards and completion within the federal funding cycle.



TECHNICAL ASSISTANCE (CONT'D)

ATRC Website: https://atrc.dhss.delaware.gov

- Resource Library
- Training & Technical Assistance
 - Calendar of Events (TA Schedule will be posted here)
- Data Hub
- News... and more!

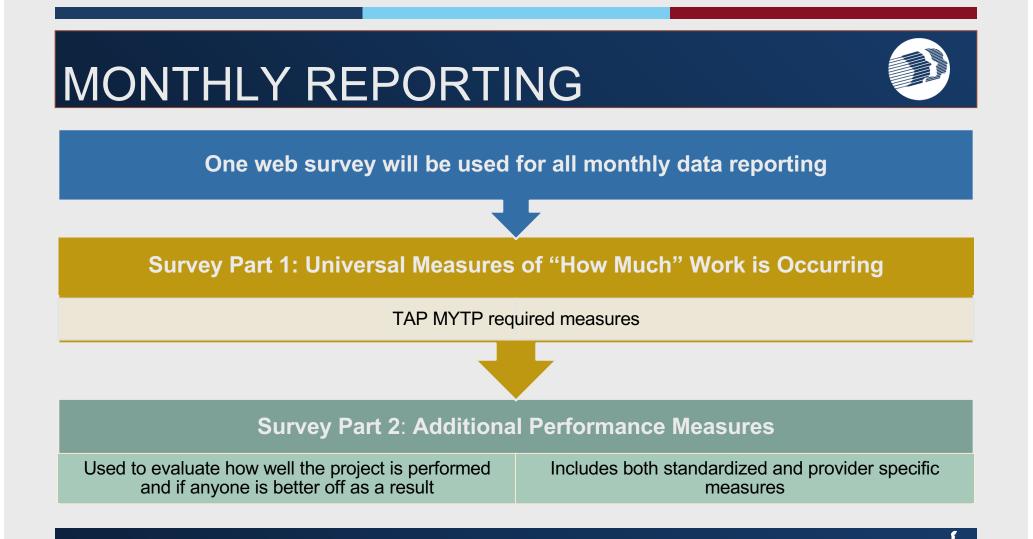






REPORTING REQUIREMENTS





UNIVERSAL PERFORMANCE MEASURES



TAP MYTP required universal measures: "How Much"

Naloxone	SDOH referral	MOUD	MOUD referral	Denial	Medicaid Enrollment	Intervention	GPRA
written and	count of those	MOUD - Number of unduplicated clients who were prescribed or administered each of the following MOUD in the last month through this TAP-funded project. • buprenorphine • oral naltrexone • long-acting, injectable naltrexone • methadone	Number of unduplicated clients who were referred (internally or externally) to MOUD treatment in the last month.	referred to your organization in the last month and were denied	In the last month, what is the number of times that clients were linked to Medicaid enrollment services.	Number of unduplicated clients receiving intervention in the last month.	The Center for Substance Abuse Treatment (CSAT) Government Performance Results and Modernization Act (GPRA) Client-Level data collection at baseline, follow-up, and discharge is required for individuals receiving treatment AND/OR recovery support services



PROCESS MEASURES



TAP MYTP required process measures: "How Well"

Hospital Admission Rates	Emergency Department Utilization	Integrated Care Plans	Time to Treatment Initiation	Engagement in Treatment
Rate of individuals who were admitted to any hospital for any reason. <i>Note: This measure will be</i> <i>required following the</i> <i>launch of Delaware</i> <i>Treatment and Referral</i> <i>Network's DTRN360</i> <i>behavioral health</i> <i>coordination platform.</i>	Rate of individuals who were treated at the Emergency Department for any reason. <i>Note: This measure will be required <u>following the launch</u> <u>of Delaware Treatment and Referral Network's DTRN360 behavioral health coordination platform.</u></i>	Percentage of individuals with comprehensive care plans that include both medical and behavioral health components.	Percentage of individuals who initiate SUD treatment within 14 days of OUD diagnosis.	Rate of individuals who had two or more additional SUD services within 30 days of the initiation of a SUD treatment encounter.



DATA REPORTING DEFINITION RESOURCE



TAP Data Definitions will be made available on the ATRC website

- Defines terms used in universal and standardized measures
- Does NOT define unique provider performance measures.

Questions? Contact DSAMH.ORT@Delaware.gov



NEXT STEPS



- > Review all solicitation materials thoroughly on the ATRC Website:
 - <u>https://atrc.dhss.delaware.gov/funding-opportunities#tap</u>
- > Submit any questions to <u>DSAMH.ORT@Delaware.gov.</u>
- Submit completed applications by <u>February 10, 2025</u>, to <u>DSAMH.ORT@Delaware.gov</u>.



QUESTIONS



- Please type questions in the chat box.
- Email questions to: DSAMH.ORT@Delaware.gov



THANK YOU!



Thank you!

