SUBSTANCE USE DISORDER PATIENT PLACEMENT CRITERIA USED BY STATES SUPPORTING STATEMENT

PART A. JUSTIFICATION

1. Circumstances of information collection

The Office of the Assistant Secretary for Planning and Evaluation (ASPE) at the U.S. Department of Health and Human Services (HHS) is requesting approval from the Office of Management and Budget (OMB) for a one-time, voluntary survey of state agencies regarding the use of substance use disorder (SUD) patient placement criteria and assessment tools. ASPE requests clearance to collect data to enhance current understanding of these issues using the Survey on Substance Use Disorder Patient Placement Criteria instrument (see Attachment A).

a. Statement of need for understanding the available data on SUD placement criteria

The opioid crisis has highlighted inadequate capacity for SUD treatment. To address issues of capacity, state and federal policymakers need information regarding the type of treatment needed by those seeking care, and the availability of these SUD modalities. Many states and organizations use intake and patient placement assessments to determine where to place patients in treatment based on the appropriate level of care. However, there is no national database on the treatment needs of individuals by level of care.

This survey is one component of a project to assess the feasibility of gathering and utilizing needs assessment data to identify and address unmet patient needs by levels of care. The project falls under Section 301 of the Public Health Service Act (42U.S.C. 241) [280-1a]. The proposed survey of state Medicaid and behavioral health administrative entities will provide ASPE with information on the types of patient placement data states collect and maintain, and the degree to which the data can be used to understand the SUD treatment gap. The results will help inform basic knowledge for decision makers in HHS, which in turn can lead to direct, practical actions in helping people who are seeking SUD treatments.

b. Overview of study design and evaluation questions

The objective of the project is to determine the feasibility of gathering and using data within and across states to assess the distribution of SUD treatment needs by level of care. The following research questions guide the project:

- 1. How are needs assessments (i.e., intake and placement assessments) administered and what is the context in which they are administered?
- 2. How could data from recorded assessments be obtained for analysis?
- 3. How have states and organizations analyzed the data?
- 4. What other analyses could be conducted with the data?

ASPE and its contractor (RTI International) have reviewed available information sources and the literature, and have performed expert and stakeholder discussions with individuals from eight states. Results from these activities indicated the following:

- States use SUD placement criteria, but this use varies across and within states;
- States maintain data on SUD placements, but the detail and scope of population varies; and
- States rarely use the available data to assess the treatment gap by level of care.

To further this understanding across all 50 states and the District of Columbia, we propose a 17-question survey of state entities administering Medicaid funds and federal and state public funding for SUD placement services. Participation in the proposed survey will be voluntary. Organizations will be clearly notified that their participation in the survey is voluntary and that they can end their participation at any time.

2. Purpose and use of information

The data collected under this submission will help ASPE address evaluation questions one through three (listed above). The survey data will have significant practical utility because the results will allow ASPE to engage with states that are potentially willing to share their data and begin the process of developing a multistate dataset of needs assessment that can be updated over time. Such a dataset is necessary for understanding and addressing treatment needs in the nation on an ongoing basis. Without the proposed survey, alternative data collection efforts would be required to ensure SUD treatment capacity appropriately aligns with population need.

The 17-question survey asks about the state requirements for using placement criteria and related assessment tools for placement. Remaining questions ask how data from the placement criteria and/or assessment tools are maintained; if level of care data has been used to help determine service gaps and need for greater capacity; and whether the respondent could provide weblinks to available information on the criteria used in their state.

The project is expected to be completed in one year, with three months of data collection and one month of analysis.

3. Use of information technology

Respondents will be invited by email to participate in the survey (see Attachment B). The email will contain a link for the respondent to complete and submit responses via REDCap, a secure web application for building and managing online surveys and databases. All respondents are employees of state agencies and are expected to have available secure internet connections. The survey approach will be familiar to most people who complete online surveys, and the format is less burdensome for the respondent to complete than alternatives such as an emailed word processor document or mailed paper form. The survey contains straightforward skip patterns that are readily embedded in the online format but are cumbersome to incorporate in other electronic or hard copy formats.

4. Efforts to identify duplication

In formulating this data collection effort, ASPE has carefully considered how to avoid duplication by having the contractor review existing data sources and solicit input from subject matter experts. The data sources reviewed include the published results from a survey on

placement assessments in 2005, state websites describing intake requirements, state documentation of screening and placement tools, and state Medicaid waiver applications. ASPE is not aware of any similar data collections that have been completed recently. The most similar data are 14 years old. Since that time, the field has developed new placement criteria and assessment tools, and states have evolved in how they capture, maintain, and use their data. These changes mean that the previously available data do not accurately respond to the purpose of this project.

5. Involvement of small entities

This data collection does not have significant involvement of small entities.

6. Consequences if information is collected less frequently

The survey will be administered once. If the data are not collected, ASPE will not have adequate information to answer its evaluation questions.

7. Special circumstances

This information collection fully complies with 5 CFR 1320.5(d)(2).

8. Consultation outside of agency

The 60-day notice required in 5 CFR 1320.8(d) to solicit public comments was published in the *Federal Register* on February 13, 2020 (85 FR 8305). Substantive comments were provided by Héctor Hernández-Delgado, on behalf of the National Health Law Program (see Attachment C). The comments are summarized below:

- 1) The survey should assess the extent to which states are using medication assisted treatment (MAT) at all levels of care.
- 2) The survey should assess the extent to which states prioritize community-based services and guard against harmful practices, such as seclusion and restraint, in residential facilities.
- 3) The survey should assess the criteria used by states for children and adolescents, and whether there are differences between adult and adolescent placement criteria.

ASPE agrees that the issues raised in the first two comments, the use of MAT, the use of community-based services, and protections against harmful practices such as seclusion and restraint are very important issues, but believes that they are beyond the scope of the current survey. However, ASPE has elected to make modifications to the survey to address the third issue raised by the National Health Law Program. ASPE has modified the survey to include an additional response category that will allow states to report if placement criteria apply specifically to adolescent populations.

9. Payment or gifts

No payments or gifts will be provided to respondents.

10. Assurance of confidentiality

We will not collect any identifying information (e.g., name, email, or title) of the respondent filling out the survey. The respondent will only be asked to mark his or her state and state government organization. The contact information of potential respondents used for fielding the survey will be kept separate from the actual survey responses, and that information will only be shared with ASPE and its contractors on this project. In the final report we will not specify the names of the individuals we contacted for participating in this survey. The survey will clearly notify participants that their organization's responses will be kept private to the extent provided by law.

11. Questions of a sensitive nature

The survey does not include any questions of a sensitive nature. Sixteen of the 17 questions are fact-based rather than opinion-based; the single exception is a question as to whether the respondent believes state data could be shared under the right circumstances. Therefore, the answers are unlikely to compromise the respondent in a personal or professional capacity.

12. Estimates of annualized hour burden

The estimated annualized burden for this data collection is presented in Table 1. The survey will be filled out by two respondents in each of the 50 states and the District of Columbia, and each will take approximately 10 minutes to complete. This estimate is based on contractor staff responding to the survey questions as part of a timed exercise and based on input from state personnel who reviewed the survey. We assume we will achieve an 85% response rate resulting in a total of 14.5 hours of burden in the year that the survey is fielded.

Table A.1: Estimates	of Annua	lized Hour	[.] Burde	'n
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Tool	Number of Respondents ¹	Responses per Respondent	Total Number of Responses	Burden Hours per Response	Total Burden Hours	Hourly Wage ²	Total Hour Cost
Survey on SUD Patient Placement Criteria	87	1	87	10/60	14.5	\$54.68	\$792.86

¹ The estimated number of respondents is 85% of the number who will be invited to participate (n = 102), rounded to the nearest whole number.

13. Estimates of annualized cost burden to respondents

There will be no capital, start-up, operation, maintenance, or purchase costs incurred by the sites participating in data collection for the evaluation.

² The hourly wage estimate of \$54.68 is based on the Occupational Employment and Wages, Mean Hourly Wage Rate for 11-9111 Medical and Health Services Managers = \$54.68 as of May 2018. https://www.bls.gov/oes/current/oes119111.htm Accessed on January 10, 2020.

14. Estimates of annualized cost to the government

We estimate that one ASPE employee will be involved for 6% percent of her time. Annual costs of ASPE staff time are estimated to be \$7,969. Additional costs are \$44,623 as part of the contract awarded by ASPE in FY 2020. The total estimated average cost to the government per year is \$52,592.

15. Changes in burden

This information collection request is new.

16. Time schedule, publication, and analysis plans

The results from the survey will be analyzed and summarized in a final report that will be submitted to ASPE. ASPE may incorporate the results into a journal article, scholarly presentations, or on the ASPE website. Table A.2 summarizes the timeline for the collection of data and development of this report.

Table A.2 Project timeline

Ducinet Timeline	Months Following OMB Approval				
Project Timeline	1	2	3	4	
Field survey to Single State Authority (SSA) and Medicaid contacts	Х				
Send follow-up reminders		X			
Send survey to second SSA and Medicaid contact if the first one did not respond			Х		
Analyze survey results				X	
Write summary report				Х	

17. Display of expiration date

The expiration date will be displayed.

18. Exceptions to certification statement

This collection of information involves no exceptions to the Certification for Paperwork Reduction Act Submissions.