Blue Distinction® Centers for Substance Use Treatment and Recovery
2020 Evaluation Components

Blue Distinction

Blue Distinction is a national designation awarded by Blue Cross Blue Shield (BCBS) Plans to recognize providers that demonstrate expertise in delivering quality specialty care — safely, effectively, and cost-efficiently. The goal of the program is to help patients find both quality and value for their specialty care needs, while providing a credible foundation on which employers may customize their employee benefits.

Blue Distinction Centers for Substance Use Treatment and Recovery

The Blue Distinction Centers for Substance Use Treatment and Recovery program aims to improve patient outcomes and value by addressing the fragmented delivery of substance use disorder treatment. Initially, this program will be offered to facilities delivering substance use treatment programs in one or more of the following settings: residential, inpatient, intensive outpatient, or partial hospitalization services.

All providers must offer programs for opioid use disorder treatment within the broader substance use disorder diagnosis. Additionally, when an opioid use disorder is treated, at a minimum, medication-assisted treatment must be available to all patients admitted to the treatment program, with the provider coordinating the transition of care to appropriate treatment settings (e.g., transition from residential to outpatient services), including medication-assisted treatment services.

Designation as a Blue Distinction Center (BDC) for Substance Use Treatment and Recovery differentiates providers locally, as well as nationally. This highly respected designation acknowledges the expertise providers have demonstrated and their commitment to improving quality and affordability. Designations are awarded based on quality criteria that support delivery of timely, coordinated, multidisciplinary, evidence-based care with a focus on quality improvement and patient-centered care. To be considered for the Blue Distinction Centers for Substance Use Treatment and Recovery designation, a provider must:

- meet Quality Criteria,
- meet Business Criteria,
- meet Value Criteria; and
- meet Local Blue Plan Criteria, if applicable.

The following information explains how quality, business, and value evaluation components will be used to evaluate an applicant provider. Final selection criteria for quality, business, and value, including specific scoring thresholds required for eligibility as a Blue Distinction Center for Substance Use Treatment and Recovery, will be determined separately after data analytics is completed and will be posted publicly at www.bcbs.com.
Quality Criteria

Blue Distinction Specialty Care approached the development of the quality criteria by using a framework that aligns with a chronic care treatment model, addressing the delivery, quality, utility, and affordability of care. Providers are evaluated for quality in the following categories for the Blue Distinction Centers for Substance Use Treatment and Recovery program by the responses they submit in the Provider Survey, and through evaluation of certain objective claims data submitted by their local Blue Plan.

<table>
<thead>
<tr>
<th>Quality Criteria Category</th>
<th>Description</th>
<th>Selection Criteria</th>
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</table>
| General Program Information | Program structure and program offerings                                      | 1. Program Structure  
  - National Hospital Accreditation  
  - Behavioral Health Accreditation/Certification  
  - Federal Opioid Treatment Program (OTP) Certification  
  - Licensure Status  
  2. Program Offerings  
  - Level(s) of Care Offered  
  - Type of Treatment(s) Available |
| Delivery                  | Access to timely, multi-disciplinary, coordinated substance use treatment    | 3. Delivers coordinated multidisciplinary care to patients requiring clinically managed care, and facilitates timely access to quality medical and psychosocial care in all phases of substance use treatment, including withdrawal/detox management through long-term maintenance/support.  
  4. Executes an industry standard assessment (e.g., CONTINUUM, The American Society of Addiction Medicine [ASAM] Criteria Decision Engine™) on all patients to determine the appropriate level of care prior to admitting patients to that provider’s facility.  
  5. Delivers efficient, appropriate, and effective flow of necessary patient care information to providers and patients (e.g., through use of Electronic Health Records and/or patient portal).  
  6. Delivers individualized care planning, by managing patients from diagnosis through all stages of substance use treatment, including withdrawal/detox through long-term maintenance/support (e.g., treatment plan).  
  7. Facilitates multidisciplinary care (either within an integrated delivery system or through coordination within a virtually organized delivery system of a medical neighborhood) to ensure that the patient has access to all of the following disciplines:  
  - Medical (addiction medicine and primary care);  
  - Counselling Services;  
  - Psychotherapy;  
  - Case Management;  
  - Rehabilitation; and  
  - Referral to Specialists/Centers with expertise in treating substance use disorders, as appropriate. |
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| **Delivery**              | Access to timely, multi-disciplinary, coordinated substance use treatment | 8. Begins discharge and transition planning for each patient upon admission, with involvement of applicable physicians/ staff and the patient (and family/caregiver, if indicated).  
9. Prior to discharge, outpatient providers and services are identified within that organization and the patient's local community.  
10. For all patients admitted for opioid use disorders (OUD), medication-assisted treatment (MAT) is available and the provider coordinates follow-up care (including MAT services) as part of discharge planning. |
| **Quality**               | Commitment to providing safe, evidence-based, patient-centered care | 11. Implements evidence-based care aligned with established guidelines/clinical pathways, as appropriate.  
12. Implements patient-centered care by including patient/family in long-term treatment planning and goal setting, as well as managing patients with dual diagnoses (e.g., substance abuse combined with other mental health issues), with the goal to improve the quality of life for both patient and family.  
13. Commits monitoring and reporting of quality measures throughout provider’s entire system of care.  
14. Incorporates quality measurement results into feedback and improvement of provider’s entire system of care. |
| **Utility**               | Focus on patient experience and patient engagement in shared decision-making | 15. Engages patient (and family/caregiver, if indicated) in shared decision-making (SDM) process for goal-setting and treatment planning that provides information on realistic expectations and impacts of treatment options, through the use of appropriate SDM tools, so that care delivers utility to the patient (and family/caregiver, if indicated).  

*Local Blue Plan Quality Criteria may consist of additional criteria beyond the national criteria, at the discretion of the local Blue Plan.*

**Business Criteria**

Applicant facilities are evaluated in the following business categories for the Blue Distinction Centers for Substance Use Treatment and Recovery program:
Blue Distinction Centers for Substance Use Treatment and Recovery

<table>
<thead>
<tr>
<th>Business Criteria Category</th>
<th>Selection Criteria</th>
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<tbody>
<tr>
<td>Facility Participation</td>
<td>All facilities are required to participate in the local Blue Plan’s BlueCard Preferred Provider Organization (PPO) Network.</td>
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<tr>
<td>Related Provider Participation</td>
<td>Participation by related providers who may bill separately from your facility’s billed charges for any product/services for substance use treatment and/or recovery (e.g., including but not limited to, doctors, nurses, assistants, coaches, laboratory services, drug testing services, clinical therapies, professional providers, and pharmacy charges, etc.) are in the local Blue Plan’s BlueCard PPO network.</td>
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<tr>
<td>Blue Brands Criteria</td>
<td>Provider and its corporate family meet BCBSA criteria for avoiding conflicts with BCBSA logos and trademarks.</td>
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<tr>
<td>Local Blue Plan Business Criteria* (if applicable)</td>
<td>An individual Blue Plan, at its own independent discretion, may establish and apply local business requirements as additional Selection Criteria for eligibility in a Blue Distinction Centers program, for providers located within its Service Area.</td>
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</tbody>
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*Local Blue Plan Business Criteria may consist of additional criteria beyond the national criteria, at the discretion of the local Blue Plan.

Value Criteria

In addition to meeting quality and business criteria, each provider is required to demonstrate its commitment to cost-effective care. The initial BDC designation will include a cost of care evaluation. A Blue Distinction Center+ (BDC+) designation will not be offered initially, but may be added in a future designation enhancement.

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<tbody>
<tr>
<td><strong>Value Criteria Category</strong></td>
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<tr>
<td>Local Blue Plan Value Criteria* (if applicable)</td>
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