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**Advanced Practice Medication Assisted Treatment:
Program Development and Evaluation**

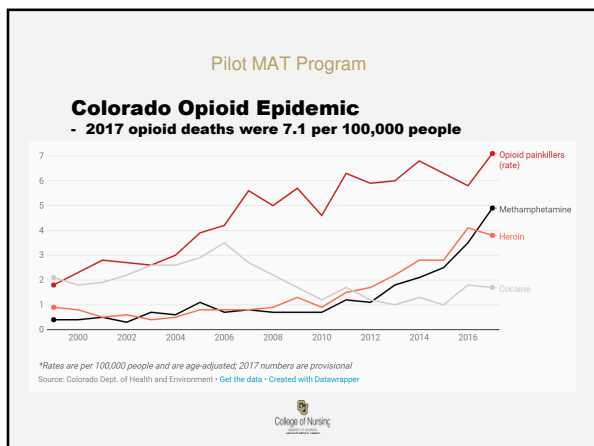
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Pilot MAT Program

Objectives

- Review program planning needs for Medication Assisted Treatment programs with Advanced Practice Providers
- Discuss methods in program development, implementation, best practices, and evaluation for MAT programs in rural settings
- Understand program and participant evaluation methods and preliminary data for the Colorado Pilot MAT program
- Outline Successes and challenges in the first year of the Pilot MAT program sites
- Discuss future expansion areas based on research and current trends in MAT service provision.


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Pilot MAT Program

Development of Pilot MAT bill/program


- Monies from Colorado Cannabis Fund
- Colorado Consortium recommended pilot
- Attorney General and CON developed proposal
- CON testified for House and Senate Bills
- Final Bill SB-074 approved and signed by governor
- Community Advisory Board to govern CON and the three organizations funded by the program



SB-074
Pilot MAT Program

To increase access to Medication Assisted Treatment (MAT) and expand the MAT workforce to treat opioid use disorder; specifically, to increase the number of trained and licensed Nurse Practitioner (NP) and Physicians' Assistant (PA) providers of MAT.
Total of \$500,000 per year for 2 years, \$123,000 per organization/year

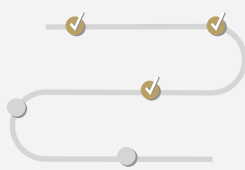

- 1 **Goal One**
To increase the number of MAT trained NP's and PA's in 2 rural counties in Colorado
- 2 **Goal Two**
To increase access to MAT and other evidence-based treatment/behavior therapies for individuals with opioid use disorder (OUD) in the pilot program areas.



Pilot MAT Program

Every 6 months

- Written review of progress made in the program
 - NPs/PAs trained and practicing
 - Number Clients admitted to program
 - Outcomes measure uploading and analysis done by CON
- Once reviewed and approved by Advisory Board, continuance
- Continued funding based on review of CO legislature expenditure programming.

Pilot MAT Program

Program Planning Needs Assessment

- Adding Buprenorphine/Naltrexone products to standalone Methadone program
- Adding Buprenorphine/Naltrexone to a Community Mental Health center
- Start-up Buprenorphine/Naltrexone program




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Program Planning Needs Assessment

Adding Buprenorphine/Naltrexone to standalone Methadone program

- Specific training in MAT and client/provider education
- Highlighting MAT options in shared decision making
- Collaboration with Harm Reduction Center/EMT programs
- Marketing for new and change-over clients
- Incentive Program for maintenance
- Multiple therapy options




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Program Planning Needs Assessment

Adding Buprenorphine/Naltrexone to a Community Mental Health center

- MAT development and marketing
- Specific training in MAT and client/provider education
- Physicians for induction, AP-MAT for maintenance
- Screening current and new clients
- Marketing for community and referral sources/collaboration
- Same day appointments/transportation for jail release client



Pilot MAT Program

Program Planning Needs Assessment

Start-up Buprenorphine program


- Specific training in MAT and education
- MAT program development and marketing
- Community/Provider MAT education, engagement, and trainings
- Marketing for community and referral sources/collaboration
- Jail release referrals and Drug Court referrals



Pilot MAT Program

Adding Buprenorphine to standalone Methadone program


1. Successes
 - Hired 2 NP Providers
 - Initiated Suboxone with Medicaid reimbursement
 - Increased numbers of Methadone/Buprenorphine/Naltrexone clients
 - Using Behavioral Reinforcement/Incentives for adherence
2. Barriers Overcome
 - Obtaining Medicaid payment for behavioral therapy/care
 - non-BHO provider agreements
 - Current protocols support Methadone maintenance
 - Introducing population to new MAT option



Pilot MAT Program

Adding Buprenorphine to a Community Mental Health center


- Successes
 - Same day MAT assessments and inductions
 - Referrals from ER discharge planners- Uber to assessment
 - Agreement with County jail for release referrals
 - Fast growing MAT provider numbers and services
 - In-house pharmacy-
- Barriers Overcome
 - Provider stigma in ER, so encouraging discharge referrals
 - Developing referrals through EMT networks

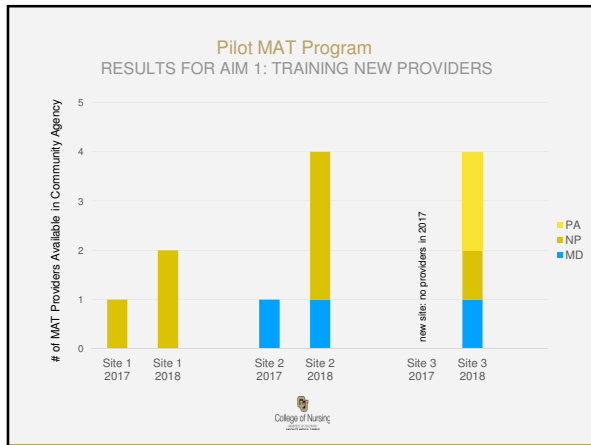


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Start-up Buprenorphine program

- Successes
 - Onboarding 4 NP/PA/MD providers in 6 months
 - Jail/Court diversion program for MAT services on release
- Barriers
 - Significant Provider stigma- especially ED
 - Provider/Community engagement and education
 - Discharge Planning/EMT Referrals for ER interventions
 - Medicaid/Private Insurance Coverage needs- single case agreements
 - Long-acting Buprenorphine pharmacy reimbursement






Pilot MAT Program
Staff Training Completed

- State MAT Waiver training (medication management)
- Grand rounds on "MAT: A piece of the puzzle"
- Heroin addiction and the opioid epidemic
- "It Matters" training from CU School of Pharmacy opioid collaborative
- SAMHSA convention on substance use disorders
- National certified addiction counselor (CAC) training
- Winter symposium on addictive disorders, behavioral health, & mental health
- "ThinkTank" on the latest behavioral therapies
- Seminar on back pain
- Colorado pain society conference
- Steamboat Family Medicine training
- Person-centered treatment services training
- UC Health provider training

Themes: MAT and opioids, substance use more broadly, behavioral health treatments, pain management, primary care



Pilot MAT Program Policy and Procedure Changes

Sites with Existing Services	New Start-Up Clinic
<ol style="list-style-type: none"> 1. Buprenorphine/Naltrexone induction 2. Buprenorphine protocol 3. Missed doses 4. Long acting BUP/NAL 	<ol style="list-style-type: none"> 1. Buprenorphine/Naltrexone induction 2. Billing and coding for MAT services 3. Confidentiality 4. Toxicology 5. Documentation of MAT services

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Pilot MAT Program MAT Modalities and Behavioral Therapies Available

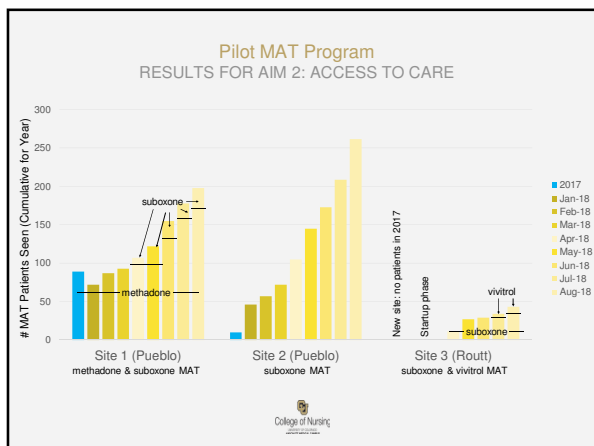
Medication Assisted Treatment

- Methadone
- Buprenorphine
- Naltrexone

Other Behavioral Therapies

- Cognitive-behavioral (group or individual)
- Dialectical behavior therapy
- Motivational interviewing, relapse prevention, or solution-focused therapy
- Family therapy
- Residential Treatment
- Vocational Services
- Case Management
- Crisis Services

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Patient Marketing Activities

Advertising

- Flyers distributed via service agencies
- Poster in organization's own lobby
- Direct mail to county residents
- Direct mail to community providers
- Billboard advertising

Social Media

- Website banner ads (with help from media company)
- Facebook advertising

Word-of-Mouth

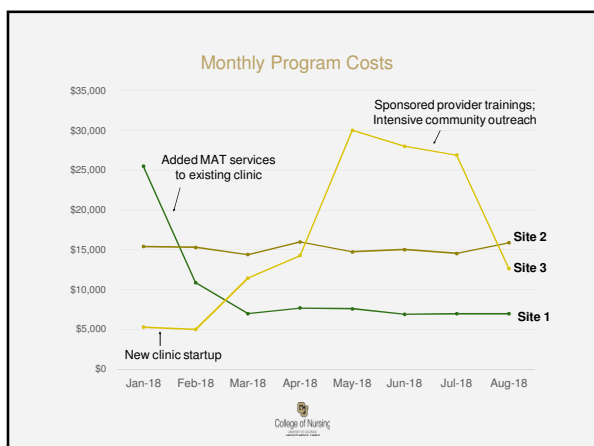
- Presence at local health fair
- Meetings with jails, police departments, hospitals
- Educational seminars for community providers

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Pilot MAT Program Community Outreach Activities

Hospitals	<ul style="list-style-type: none"> • Emergency department outreach • Open slots for hospital discharge planners to schedule patients
Clinics	<ul style="list-style-type: none"> • Cold calls to providers • Advertising to providers • Educational seminars for providers
Corrections	<ul style="list-style-type: none"> • Met with local police department • Met with local judge • Met with parole officers • Open slots for discharge from local jail • Telehealth session for inmate at local jail

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Pilot MAT Program
Next Steps for Year 2


Start-up APRN MAT program

- Increase availability to daily MAT Inductions
- Train additional Addiction Counselors
- Increase community outreach, education, and advertising
- Sites experimenting with innovative service delivery methods – Zoom with inmates, home administration, “standby” appointments



Pilot MAT Program
Overall Program Comments

- **Successes**
 - Overall Improvements in MAT service provision
 - Jail/ER Discharge interventions for both counties
 - Medicaid funding for reimbursement- single case
 - Daily Available access to Suboxone Induction Services
- **Barriers to Overcome**
 - Medicaid reimbursement and payer concerns for non-BHO
 - Provider Barriers
 - Emergency Room- move to discharge planning/EMT
 - Rural Education Groundwork needs
 - Perceived lack of access to MAT in both counties
 - increased Awareness, Education, Insurance coverage info



Pilot MAT Program

Advisory Group Review and Approvals


- Approval vote for Year 2 funding for organizations
- CON will submit disbursement request and Year 2 budgets in collaboration with Colorado Legislature and Mr. Esquibel's office
- CON will provide summary report in June for Colorado Legislature
- Next Advisory Group Meeting- January 23/30th, 2019 4pm




Pilot MAT Program

Future Goals

- **Extending APRN prescription privileges for CNS, midwives**
- **Increasing APRN prescribing numbers, currently capped at 100**
- **Increasing Naloxone kit availability**





Questions?

