



What is MAT? Where do you get it?

<u>Medicated-Assisted Treatment (MAT)</u> is the use of FDA-approved medications, in combination with counseling and behavioral therapies, to provide a "whole-patient" approach to the treatment of substance use disorders. Patients can get it from a clinic-based setting or more traditional office-based setting.

Opioid Treatment Programs (OTP) are the daily-dosing clinics that provide any type of MAT for people diagnosed with an opioid use disorder. OTP patients also must receive counseling, which can include different forms of behavioral therapy.

Office-Based Opioid Treatment (OBOT) is when buprenorphine and naltrexone are provided in a medical practice, like a primary care or OB/GYN provider. Methadone cannot be prescribed for OBOT.

What kinds of medications are used for MAT?

There are three FDA-approved medications that can be used to treat opiate addiction: Methadone, Buprenorphine, and Naltrexone

Each medication has multiple methods for administration

- Methadone can be a pill or liquid (OTPs use liquid)
- Buprenorphine can be a pill, a sublingual film, or 30-day injection
- Naltrexone can be a pill or a 30-day injection







| Product Name | Where do you get it? | Who can prescribe it? |
|--|--|---|
| Methadone (generic) | In specially licensed and regulated Opioid Treatment Programs (OTPs). There are 22 in Colorado currently. | Physicians |
| Buprenorphine Brands: Suboxone, Bunavail, Probuphine, Zubsolv Subutex, Sublocade, buprenorphine hydrochloride, buprenorphine- naloxone | OBOT. Unlike methadone treatment, which must be performed in a highly structured clinic, buprenorphine is permitted to be prescribed or dispensed in physician offices, significantly increasing treatment access. Colorado has 516 providers on the SAMHSA Buprenorphine Treatment Practitioner Locator | Physicians, Nurse Practitioners and Physicians' Assistants who complete additional training and apply for and receive an "X waiver" from the DEA. |
| Naltrexone Brands: ReVia, Depade, Vivitrol | Any healthcare provider. Additionally for Vivitrol, with a providers prescription, it is possible to receive the injection from a pharmacy through practice collaboration. | Anyone able to prescribe medicine in Colorado |



Effectiveness of MAT*

MAT has a recovery success rates of 60% or higher, compared to the 5-15% success rates for opioid detoxifications and other medication-free therapies.

Peer-reviewed studies of MAT effectiveness have shown that:

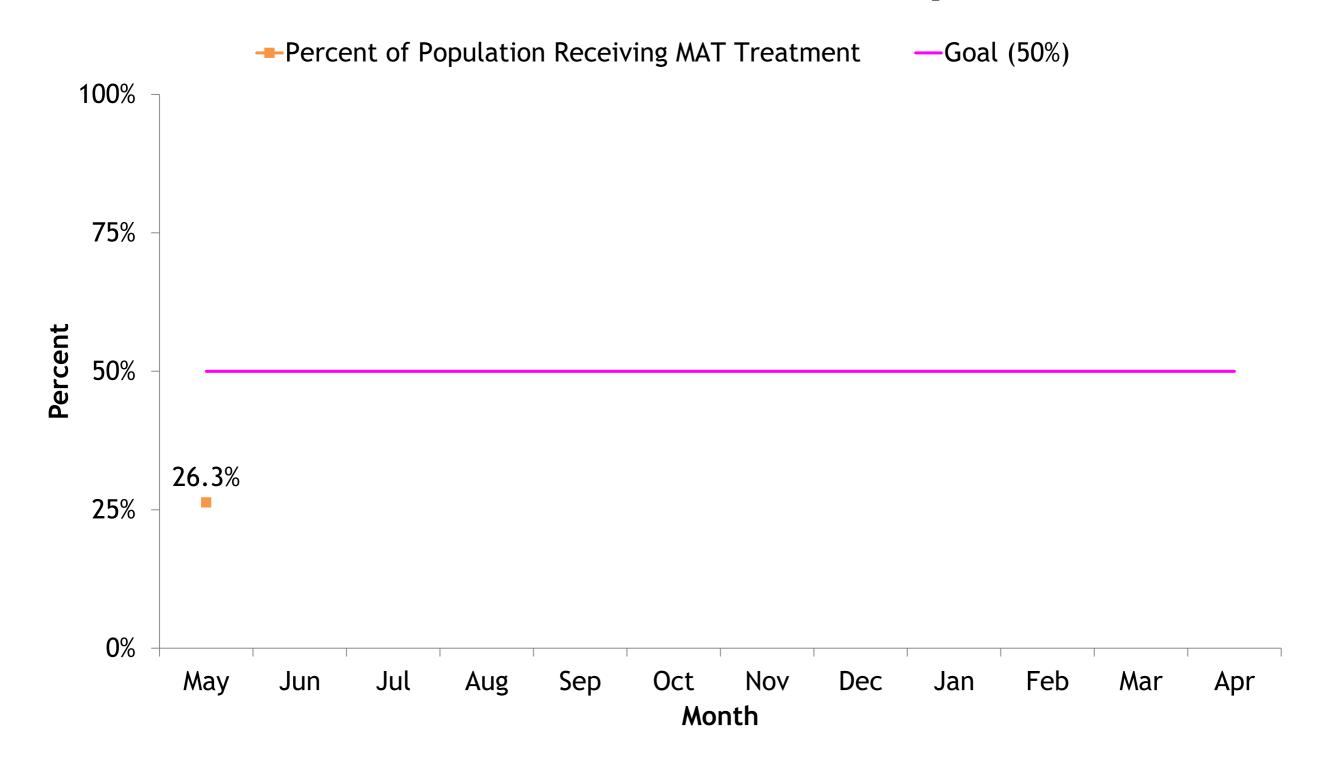
- . MAT is the most effective intervention for opioid use disorder
- Use of MAT reduces risk of overdose and reduces all-cause mortality
- Using MAT reduces illicit drug use and rates of illicit drug use get smaller the longer you take the medication.

MAT, like recovery, is a long-term treatment. Providers may recommend MAT maintenance for

*sources on slides 18-19



WIG Data/Treatment Gap



Colorado MAT Expansion Activity

OTP contract expansion (OBH and HCPF)

Reimbursement for uninsured clients

Training prescribers on buprenorphine

Anti-stigma campaign and education

In-reach and MAT in jails

ED buprenorphine induction pilot

Managed Service Organization expansion and SB 202

OTPs Contracts and Funding

- Five years ago, there were only 12 OTPs in the state.
- Today there are 22. Through federal and state funding, OBH contracts with all 22 to serve uninsured individuals whose income is at or below 300% of federal poverty.
- The RAEs are in the process of contracting with these providers to serve Medicaid patients. The BHOs were contracted with almost all.

The most recent daily census for individuals actively receiving treatment a Colorado OTP is 5,608.

Average daily census rates in Colorado, 2015 - 2018:

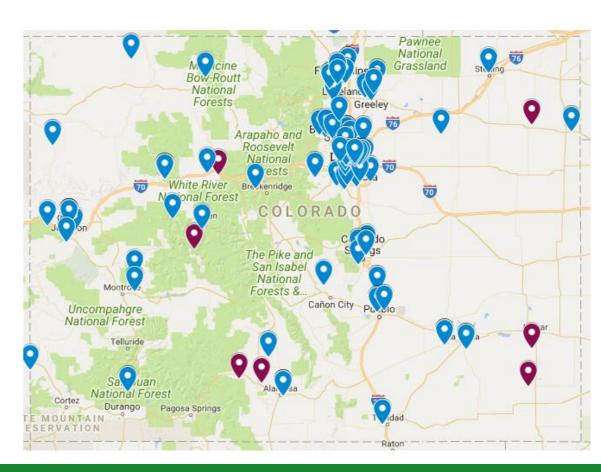
| January - May 2018 | 5,242 average daily census |
|--------------------|----------------------------|
| Calendar year 2017 | 4,161 average daily census |
| Calendar year 2016 | 2,866 average daily census |
| Calendar year 2015 | 1,967 average daily census |

It MATTTRs, Office-based MAT

- Training providers to prescribe buprenorphine in their offices
- Increases access in areas that are not near a substance use provider
- Almost doubled the number of doctors, nurses, and PAs that have completed training and applied for their waiver (from 279 to 508)
- Looking for greater footprint in FQHCs, CMHCs, and rural practices

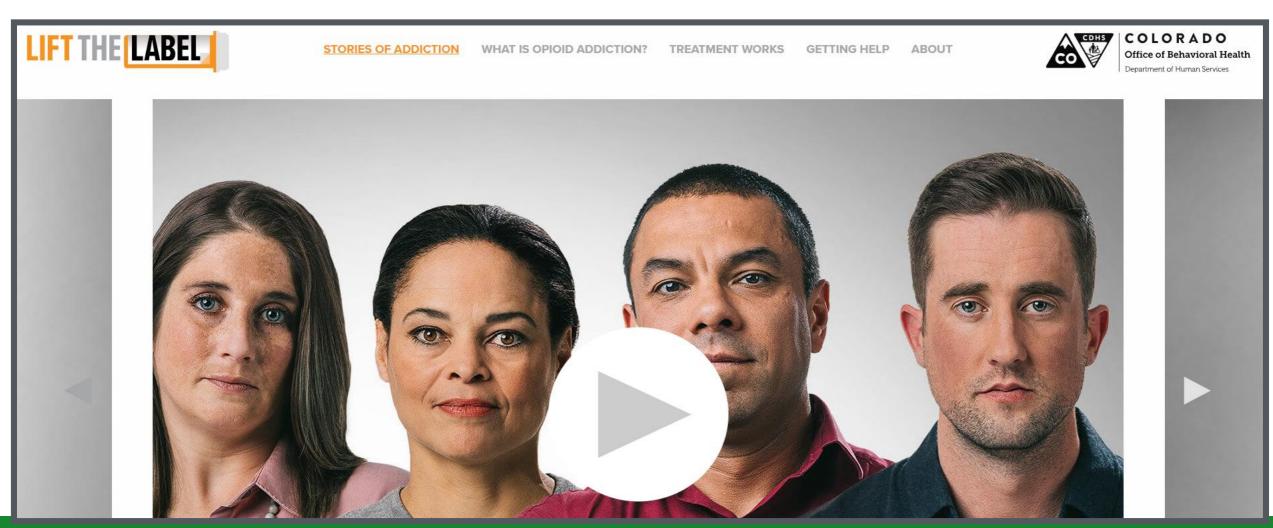
By the Numbers

- 330 completed waiver training
- 229 applied for DEA X waiver
- 66 practices have participated in the team training
- 6870 more patients can be prescribed MAT
- 800 new patients getting MAT



Lift the Label Campaign

- Statewide campaign to reduce stigma related to OUD and MAT
- Worked with 15 real Coloradoans sharing their stories of addiction and recovery. <u>PLAY VIDEO</u>, 2:30 min
- Creating an OUD/MAT curriculum for behavioral health, criminal justice, and medical professionals



MAT in community settings

Expanding "in-reach" to people with OUD in jails prior to release

- Over 50 inmates have been inducted on MAT prior to release
- Good candidates for depo-naltrexone
 - Jails: Pueblo, Denver, Boulder, Jefferson, and Douglas

ED Pilot projects for buprenorphine induction

- Awarded St. Anthony North Health Campus in Westminster and University of Colorado Hospital in Aurora over \$400,000 each
- For people who come in for overdose or OUD, start buprenorphine in the ED, then complete a warm-handoff to an MAT program

Managed Service Organizations (MSOs)

- Spent \$1.8M on expanding MAT
- \$2.4M to expand residential SUD capacity. 64% of clients identified opioids as one of their drugs of use on admission.

Expanding STR, New Federal Funds

- State Opioid Response Grant (SOR) Grant
- Follows Federal Fiscal Year: Oct 2018-Sept 2020
- Overlap of seven months with STR
- Double the annual funding: \$14.9M/year (\$29.8M total)
- Application due Aug 13, 2018 and includes more of what is working plus some new programs, with a focus on rural CO
- Strategies will focused on rural Colorado, plus the expansion of the successful STR programs.
- SAMHSA has prioritized MAT in this grant: restricted funding to detoxification services unless it is part of the transition to MAT; restricted funds for any agency that would deny any eligible client, patient or individual access to their program because of their use of MAT.

How can we improve?

Increase focus on rural areas in Colorado

Partner more with state/federally funded medical practices (FQHCs, CMHCs, SIM, etc.)

Better tracking and surveillance of MAT through the PDMP

Sustainable public support of MAT for indigent population through OBH/MSOs

But are there systematic reviews, randomized controlled trials and double blind studies that have strong validity and generalizability? YES!

- The American Society of Addiction Medicine (2015). National Practice Guideline for the Use of Medications in the
 Treatment of Addiction Involving Opioid Use. Retrieved from https://www.asam.org/docs/default-source/practice-guideline-supplement.pdf?sfvrsn=24
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- Robert P. Schwartz et al. "Opioid Agonist Treatments and Heroin Overdose Deaths in Baltimore, Maryland, 1995–2009", American Journal of Public Health 103, no. 5 (May 1, 2013): pp. 917-922.
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- Larochelle MR, Bernson D, Land T, Stopka TJ, Wang N, Xuan Z, et al. Medication for Opioid Use Disorder After Nonfatal Opioid Overdose and Association With Mortality: A Cohort Study. Ann Intern Med. [Epub ahead of print 19 June 2018] http://annals.org/aim/article-abstract/2684924/medication-opioid-use-disorder-after-nonfatal-opioid-overdose-association-mortality



Don't just take our word for it...

- Alcohol and Drug Abuse Institute Medication Assisted Treatment for Opioid Use Disorders:
 Overview of the Evidence http://adai.uw.edu/pubs/infobriefs/MAT.pdf
- Harvard Review of Psychiatry, Medication-Assisted Treatment of Opioid Use Disorder: Review of the Evidence and Future Directions https://journals.lww.com/hrpjournal/Fulltext/2015/03000/Medication_Assisted_Treatment_of_Opioid_Use.2.aspx
- Psychiatric Services, Assessing the Evidence Series Medication-Assisted Treatment With Buprenorphine: Assessing the Evidence https://ps.psychiatryonline.org/doi/full/10.1176/appi.ps.201300256
- Pew Charitable Trust, Medication-Assisted Treatment Improves Outcomes for Patients With Opioid Use Disorder http://www.pewtrusts.org/en/research-and-analysis/fact-sheets/2016/11/medication-assisted-treatment-improves-outcomes-for-patients-with-opioid-use-disorder
- National Institutes on Drug Abuse, Overview on MAT effectiveness
 https://www.drugabuse.gov/publications/effective-treatments-opioid-addiction/effective-treatments-opioid-addiction
- Agency for Healthcare Research and Quality, Guide to MAT in Primary care settings https://www.ncbi.nlm.nih.gov/books/NBK402343/
- SAMHSA Medication and Counseling Treatment Resource https://www.samhsa.gov/medication-assisted-treatment/treatment/medications-used-in-mat