LA County, Medications for Addiction Treatment, and the Substance Use Care Continuum

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No disclosures
For Alcohol:

- Screening: 82.2%
- Brief intervention: 56.2%
- Medication prescription: 5.5%

Margaret E. Mattson, Ph.D. and Sean Lynch, Ph.D., L.C.S.W. The CBHSQ Report: Medication Prescribing and Behavioral Treatment for Substance Use Disorders in Physician Office Settings. Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. Rockville, MD.
Core Components of Addiction Treatment

• Counseling*
• Support*
• Medications*

*When appropriate

Source: https://www.samhsa.gov/treatment
Medications for Addiction Treatment (MAT)
- Opioids
  - Methadone
  - Buprenorphine
  - Naltrexone

- Alcohol
  - Disulfiram
  - Naltrexone
  - Acamprosate

- Tobacco
  - Nicotine
  - Bupropion
  - Varenicline

- Others
  - No FDA-approved medications (yet)
• Opioids
  • Methadone
  • Buprenorphine
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A Primary Care Approach to Substance Misuse

<table>
<thead>
<tr>
<th>CLINICAL RECOMMENDATION</th>
<th>EVIDENCE RATING</th>
<th>REFERENCES</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rapid screening for substance misuse or substance use disorders can be performed in the primary care setting with a validated single-question screening tool.</td>
<td>C</td>
<td>11</td>
<td>The U.S. Preventive Services Task Force concludes that there is insufficient evidence to recommend screening for the use of substances other than alcohol and tobacco</td>
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<tr>
<td>Patients with hazardous substance use or substance use disorders may benefit from brief counseling by their primary care physician.</td>
<td>B</td>
<td>16–18</td>
<td>Systematic review for alcohol; randomized controlled trial and before-after study for other substance use</td>
</tr>
<tr>
<td>Office-based pharmacotherapy for opioid dependence using buprenorphine is safe and effective.</td>
<td>A</td>
<td>26, 27</td>
<td>Cochrane review and multiple randomized controlled trials</td>
</tr>
<tr>
<td>Patients with substance use disorders may benefit from identification and treatment of comorbid psychiatric disorders.</td>
<td>A</td>
<td>44–47</td>
<td>Systematic reviews and randomized controlled trials</td>
</tr>
</tbody>
</table>

In Opioid Use Disorder: Adding psychosocial support does not change the effectiveness of retention in treatment and opiate use during treatment.

Amato L, Minozzi S, Davoli M, Vecchi S. Psychosocial combined with agonist maintenance treatments versus agonist maintenance treatments alone for treatment of opioid dependence. Cochrane Database of Systematic Reviews 2011, Issue 10. Art. No.: CD004147. DOI: 10.1002/14651858.CD004147.pub4
Barriers to MAT Implementation

• **System Level**
  – Government and insurance policies, program characteristics (such as treatment philosophy), lack of pharmaceutical industry support, and logistical issues like lack of equipment or access to prescribing clinicians

• **Provider Level**
  – Informational Deficits / Perceptions and Concerns (Attitudes)

• **Patient Level**
  – Informational Deficits / Perceptions and Concerns (Attitudes)

Strategic Considerations

- SYSTEMIC FACILITATORS
- ORGANIZATIONAL CAPACITY
- PROVIDER READINESS
- PATIENT ACCEPTABILITY (DEMAND)


Evidence Based Models for Medications for Addiction Treatment

- Hub and Spoke Model
- Collaborative Opioid Prescribing (Co-OP) Model
- Office-Based Opioid Treatment (OBOT) (Yale)
- Massachusetts Nurse Care Manager Model
- Buprenorphine HIV Evaluation and Support (BHIVES) Collaborative Model
- One Stop Shop Model
- Project Extension for Community Healthcare Outcomes (ECHO)
- Medicaid Home Model for Those With OUD
- Southern Oregon Model
- Emergency Department Initiation of OBOT
- Inpatient Initiation of MAT
- Integrated Prenatal Care and MAT

Shared Components of MAT in Primary Care

- Pharmacological therapy
- Psychosocial services/interventions.
- Coordination/integration of substance use disorder treatment and other medical/psychological needs
- Provider and community education and outreach

Safe Med LA

Safe Med LA Steering Committee
1-2 lead members from each Action Team

CURES Action Team
Community Education Action Team
Data Collection Action Team
Medication-Assisted Addiction Treatment Action Team
Safe Drug Disposal Action Team
Safe Prescribing MEDICAL Practice Action Team
Safe Prescribing PHARMACY Practice Action Team
Law Enforcement Action Team
Naloxone Access Action Team

http://www.safemedla.org
CHCF Treating Addiction in the Primary Care Safety Net

- Project ECHO for Buprenorphine
- Coaching by experts
- Monthly CSAM webinars
- In-Person Learning Sessions
- Bup Waiver Trainings
- Site Visits

http://www.tapcprogram.com
DHS DMC-ODS Enrollment

Drug Medi-Cal Organized Delivery System

CALIFORNIA DEPARTMENT OF Health Care Services

Health Services LOS ANGELES COUNTY
Evolving Models of Behavioral Health Integration in Primary Care

http://www.chcf.org/~/media/MEDIA%20LIBRARY%20Files/PDF/PDF%20R/PDF%20RecoveryReachMAT.pdf
Incorporating Alcohol Pharmacotherapies Into Medical Practice

A Treatment Improvement Protocol

TIP 49


Medication-Assisted Treatment Models of Care for Opioid Use Disorder in Primary Care Settings


An organizational readiness intervention and randomized controlled trial to test strategies for implementing substance use disorder treatment into primary care: SUMMIT study protocol

Allison J Ober¹, Katherine E Watkins¹, Sarah B Hunter¹, Karen Lamp², Mimi Lind² and Claude M Setodji¹

Brief Treatment for Substance Use Disorders

A Guide for Behavioral Health Providers

Karen Chan Osilla, Elizabeth J. D’Amico, Mimi Lind,
Allison J. Ober, Katherine E. Watkins

https://www.rand.org/content/dam/rand/pubs/tools/TL100/TL147/RAND_TL147.pdf
Los Angeles County

• 12% of Medi-Cal patients have a SUD
• 13.6% newly covered Medi-Cal beneficiaries (since expansion) have a SUD.

⇒ ~400,000 Medi-Cal patients in Los Angeles County with SUD

Los Angeles County

•~47,000 annually receive publicly funded specialty SUD treatment:
  • 10,000 alcohol use disorder
  • 22,000 with heroin use disorder
  • 3,000 with Rx opioid use disorder (up from 1,000 in 2006)

http://www.publichealth.lacounty.gov/sapc/MDU/mdr.htm
Los Angeles County - SAPC

• Service & Bed Availability Tool (SBAT) and Substance Abuse Services Helpline (SASH)

http://sapccis.ph.lacounty.gov/sbat
Vision for Los Angeles County

• Expand addiction medicine capacity in primary care, mental health sites, and specialty SUD sites.
Questions / Feedback

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