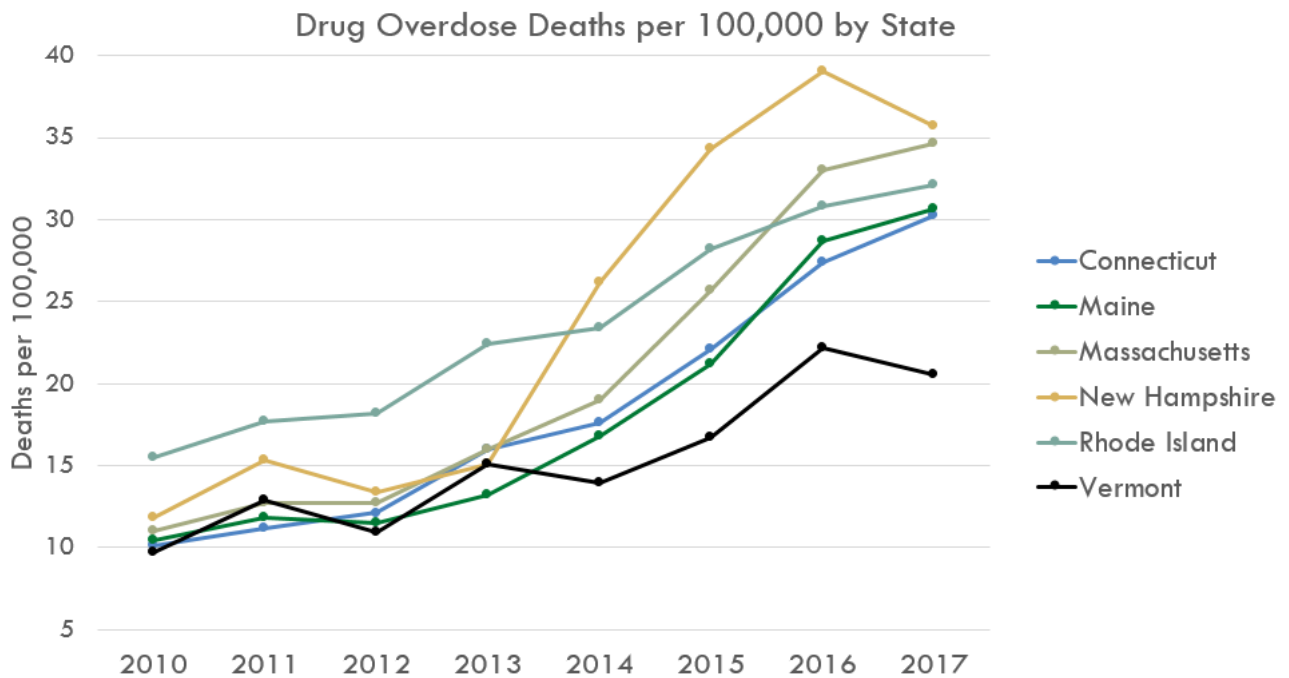


Department of Vermont Health Access
Vermont Blueprint for Health
 NOB 1 South, 280 State Dr.
 Waterbury, VT 05671-1010
www.blueprintforhealth.vermont.gov
 [phone] 802-241-0231

Testimony for House Human Services
 Opioid Use Disorder and the Hub & Spoke System of Care
 January 14, 2019

New England - Any Drug Overdose Deaths



2017 Data are provisional – Fatalities (NCHS data accessed 8/1/18), Population (Census Bureau 2017 accessed 8/1/18)

Two out of three Overdose deaths nationally involve opioids. Overdose deaths from opioids including prescription opioids, heroin, and synthetic opioids (like fentanyl) have increased almost six times since 1999. Prescription opioids are used to treat chronic and acute pain, and when used appropriately, can be an important component of

treatment. Since the 1990s the amount of opioids prescribed began to dramatically increase. This exposed more of the population to opioids and therefore to the risk of addiction.

“Even so we prescribe too much, too often, and for too long. In 2016 Vermonters were prescribed three times as much opioids as were prescribed opioids as in 1999”. Mark Levine, MD Commissioner of Health.

Vermont Hub & Spoke Program

Three partnering entities – the Blueprint for Health, the Department of Vermont Health Access (DVHA) and the Vermont Department of Health (VDH) Division of Alcohol and Drug Abuse Programs (ADAP) have implemented a statewide treatment program for opioid use disorder. Grounded in the principles of Medication Assisted Treatment (MAT), the Health Home concept in the Federal Affordable Care Act, and the Blueprint service delivery framework, the partners created the Vermont Hub and Spoke program. This initiative:

- *Expands access to Methadone treatment* by opening new programs (Hubs) in underserved regions and supports providers to serve all clinically appropriate patients
- *Enhances Methadone treatment programs (Hubs)* by augmenting the programming to include Health Home Services to link with the primary care and community services, provide buprenorphine for clinically complex patients, offer Vivitrol, and provide consultation support to primary care and specialists prescribing buprenorphine
- *Embeds new clinical staff (a nurse and a master's prepared, licensed clinician) in physician practices that prescribe buprenorphine or Vivitrol (Spokes)* through the Blueprint Community Health Teams to provide Health Home services, including clinical and care coordination supports.

What Does Success Look Like?

- 1) Rapid Access to Treatment
- 2) Lower Health Care Costs
- 3) Less Incarceration

Vermont currently serves 3,657 people in Hubs and 2,900 Medicaid Members in Spokes. There are an estimated 1,500 Vermonters receiving Spoke services who have insurance through Medicare and Commercial plans.

Vermont HUBs

1. Northwestern Hub

HowardCenter Chittenden Clinic

Chittenden, Addison & Grand Isle

2. Farwestern Hub

BAART Behavioral Health Services

Franklin & Grand Isle

3. Northeastern Hub

BAART Behavioral Health Services

Essex, Orleans & Caledonia

4. Central Vermont Hub

BAART/Central Vermont Addiction Medicine

Washington, Lamoille & Orange

5. Southwestern Hub

Rutland Regional Medical Center

Rutland & Bennington

6. Southeastern Hub

Southeast Regional Comprehensive Addictions Treatment Center (Habit

OPCO & Brattleboro Retreat)

Windsor and Windham

Service Regions



CAPACITY for MEDICATION ASSISTED TREATMENT (MAT) in GENERAL MEDICAL SETTINGS: "SPOKES" October 2018

ADDISON

Medicaid Beneficiaries: 122
Total # Prescribers: 8
Prescribing to ≥ 10 pts: 4
Practices with MAT "Spokes": 3

BENNINGTON

Medicaid Beneficiaries: 247
Total # Prescribers: 9
Prescribing to ≥ 10 pts: 5
Practices with MAT "Spokes": 5

CHITTENDEN

Medicaid Beneficiaries: 624
Total # Prescribers: 82
Prescribing to ≥ 10 pts: 16
Practices with MAT "Spokes": 29

ESSEX/ORLEANS/CALEDONIA

Medicaid Beneficiaries: 104
Total # Prescribers: 11
Prescribing to ≥ 10 pts: 2
Practices with MAT "Spokes": 6

FRANKLIN/GRAND ISLE

Medicaid Beneficiaries: 428
Total # Prescribers: 24
Prescribing to ≥ 10 pts: 10
Practices with MAT "Spokes": 8

LAMOILLE

Medicaid Beneficiaries: 131
Total # Prescribers: 12
Prescribing to ≥ 10 pts: 6
Practices with MAT "Spokes": 6

ORANGE

Medicaid Beneficiaries: 120
Total # Prescribers: 5
Prescribing to ≥ 10 pts: 4
Practices with MAT "Spokes": 4

RUTLAND

Medicaid Beneficiaries: 343
Total # Prescribers: 20
Prescribing to ≥ 10 pts: 8
Practices with MAT "Spokes": 6

Springfield

Medicaid Beneficiaries: 47
Total # Prescribers: 9
Prescribing to ≥ 10 pts: 2
Practices with MAT "Spokes": 3

WINDSOR

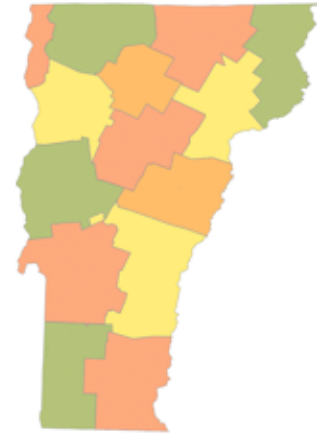
Medicaid Beneficiaries: 258
Total # Prescribers: 10
MD Prescribing to ≥ 10 pts: 5
Practices with MAT "Spokes": 5

WASHINGTON

Medicaid Beneficiaries: 308
Total # Prescribers: 23
Prescribing to ≥ 10 pts: 5
Practices with MAT "Spokes": 10

BRATTLEBORO

Medicaid Beneficiaries: 135
Total # Prescribers: 13
Prescribing to ≥ 10 pts: 5
Practices with MAT "Spokes": 3



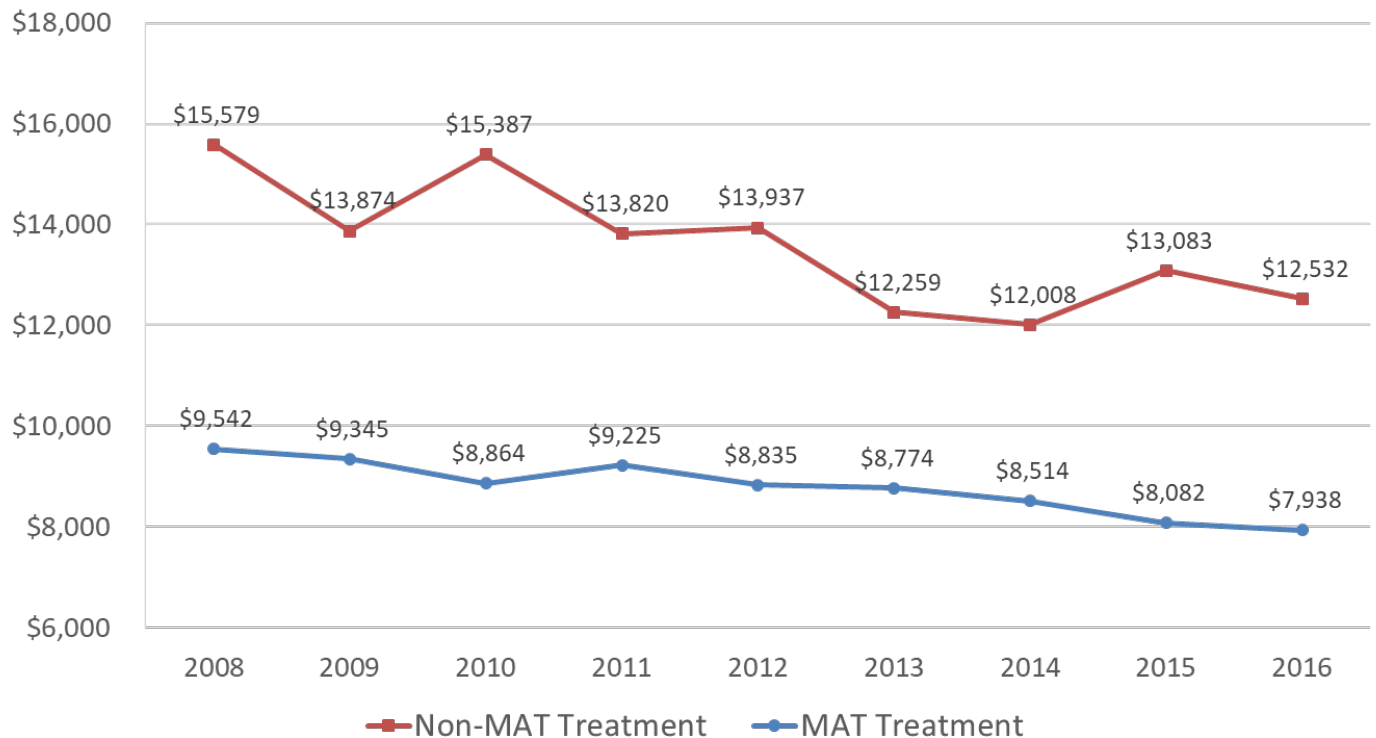
TOTAL STATEWIDE

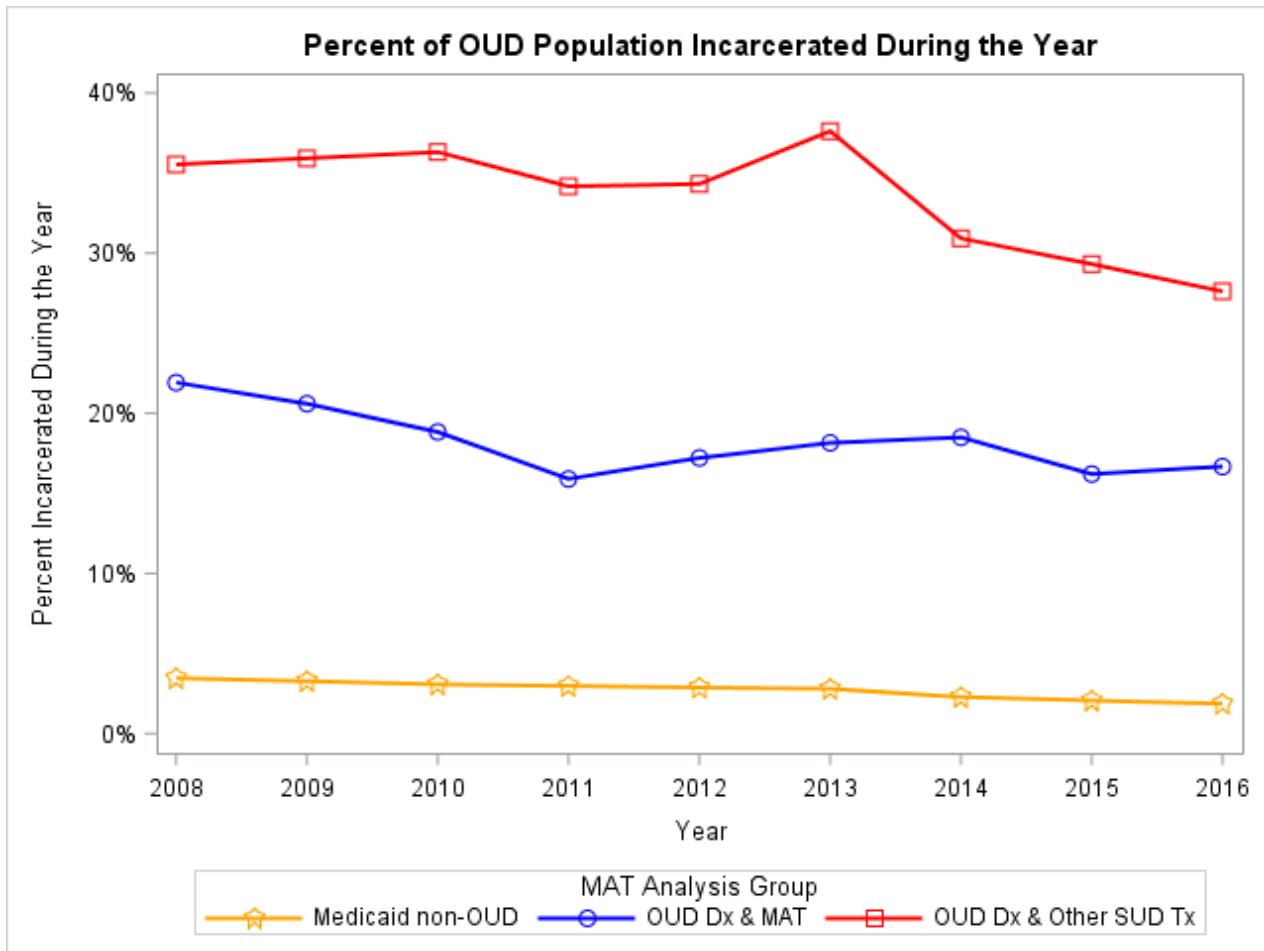
Medicaid Beneficiaries: 2,887
Total # Prescribers: 226*
Prescribing to ≥ 10 pts: 72*
Practices with MAT "Spokes": 88

Table Notes: Patient counts are unique Medicaid beneficiaries with pharmacy claims for buprenorphine or vivotrol July 2018 – Sept 2018.
An additional 306 Vermont Medicaid beneficiaries are served by out-of-state providers.
*6 VT providers prescribe in more than one county.



MAT and Non-MAT per Capita Rate of Health Care Expenditures, Excluding OUD Treatment Costs: Medicaid Members





Background

Opioid Use Disorder & Addiction

Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry. This is reflected in an individual pathologically pursuing reward and /or relief by substance use and other behaviors. Addiction is characterized by inability to consistently abstain, impairment in behavioral control, craving, diminished recognition of recognition of significant problems with one’s behaviors and interpersonal relationships, and a dysfunctional emotional response. Like other chronic diseases, addiction often involves cycles of relapse and remission. Without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death.

American Society of Addiction Medicine Definition of Addiction

<https://www.asam.org/resources/definition-of-addiction>

Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Substance Abuse and Mental Health Services Administration Working Definition

<https://store.samhsa.gov/product/SAMHSA-s-Working-Definition-of-Recovery/PEP12-RECDEF>

Medication Assisted Treatment for Opioid Use Disorder

Medication Assisted Treatment (MAT) is the use of medications in combination with counseling and behavioral therapies for the treatment of opioid use disorder (OUD). The Federal Food and Drug Administration (FDA) has approved three medications for the treatment of OUD: Methadone, Buprenorphine, and Naltrexone (in the extended release and injectable format called Vivitrol).

Regulatory Framework for Medication Assisted Treatment for Opioid Use Disorder

Methadone treatment for opioid addiction is highly regulated and can only be provided through specialty **Opioid Treatment Programs (OTP)**. OTPs adhere to specific regulations for providing comprehensive methadone addictions treatment. The OTP programs are managed by the Division of Alcohol and Substance Abuse Programs of the Vermont Department of Health. Vermont has nine OTP programs. We call these programs “Hubs”.

Physicians, Nurse Practitioners, and Physicians Assistants may prescribe **Buprenorphine** for the medical treatment of Opioid Use disorder in a general medical office referred to as **Office-Based Opioid Treatment (OBOT)**. The prescribers must complete online training and must obtain an X-DEA license by demonstrating their qualifications. The federal regulations governing OBOTs restrict the case load size providers may see. Naltrexone and Vivitrol (injection) are not regulated. The Blueprint for Health / Department of Vermont Health Access manage the Spokes. Vermont currently has eighty-eight different OBOT practices or programs. We call these practices “Spokes”.