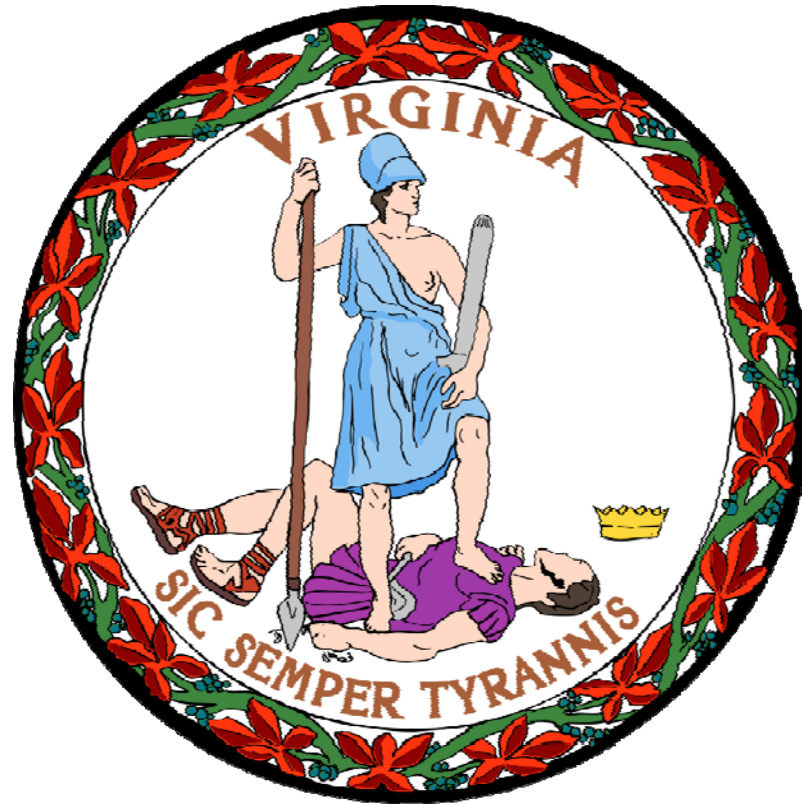




Governor's Taskforce on Prescription Drug & Heroin Abuse



Treatment Workgroup Recommendations

December 16, 2014

Treatment Workgroup Recommendations

Objectives:

- (1) Improve access to and availability of treatment services;
- (2) Foster best practices and adherence to standards for treatment of individuals addicted to opioids;
- (3) Strengthen and expand the capacity of Virginia's health workforce to respond to substance abuse treatment needs, including encouraging health professions schools and continuing education programs to provide more education about how to identify and treatment substance abuse.



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Medication Assisted Therapy (MAT)

- Opioid addiction is unique; brain does not manufacture alcohol, THC, cocaine
- Physical and lasting changes to the brain
- Medication treatment-methadone, buprenorphine, naltrexone- is most effective (with psychosocial treatment)
- Allows functionality, not “highs”
- Methadone Tx – clinics highly regulated; Less accountability office-based buprenorphine





Treatment Workgroup Recommendations

- Adopt and promote the practice of assessment for and access to MAT with counseling and case management as the standard of care for individuals addicted to opioids
- Barriers related to stigma, access, cost, quality



Treatment Workgroup Recommendations



1) To reduce stigma and increase access, provide education about addiction and MAT to:

- Health care providers and students
 - CSBs
 - Law enforcement
 - Communities
- **Coordinate with Education subgroup**



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2) Explore ways to enhance access to MAT through:

- Community service boards
- Drug treatment courts
- Jail-based treatment

- **Funding**
- **Education**
- **Explore public-private partnerships**



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3) Increase training opportunities for health care professionals, both in training and in practice, for:

- How to treat addiction
- How to diagnose and manage chronic pain



**Coordinate with Education
subgroup**



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Treatment Workgroup Recommendations

- 4) Enhance and enforce a standard of care for treatment with office-based buprenorphine
- Leverage federal efforts
 - Seek baseline data for Virginia



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- 5) Ensure health plans are complying with the Mental Health Parity and Addiction Equity Act by providing adequate coverage for treatment, including MAT



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- 6) Examine and enhance Medicaid reimbursement for substance abuse treatment services

- 7) Expand access to naloxone by lay rescuers and law enforcement to prevent death from overdose



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8) Explore and expand use of appropriate peer support services, with necessary oversight

9) Expand use of the Prescription Monitoring Program;

- Coordinate with Data/Monitoring and Enforcement workgroups



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Treatment Workgroup Recommendations



Short Term Actions:

- Coordinate with Education workgroup to enhance and increase training opportunities
 - Revisit Board of Medicine guidance on pain management
- Obtain baseline data on distribution of methadone clinics and quality of buprenorphine providers; barriers faced



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Short Term Actions:

- Obtain more info about health plan reimbursement and the Mental Health Parity Act
- Obtain more info about Medicaid reimbursement
- Explore best practices for treatment through CSBs



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Workgroup Recommendations

Legislative Items:

- Increase access to naloxone by expanding the pilot program statewide and providing immunity for administration
- Increase access to naloxone by allowing pharmacists to dispense naloxone under proper protocols



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Treatment Workgroup Recommendations

Questions & Comments?



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