

Advancing Medication Assisted Treatment (MAT) Services in Corrections

*Making our Communities Safer by Reducing Harm through Supportive
Intervention, Empowering Change and Restoring Lives.*

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MDOC Treatment Needs

- MDOC's population has reflected a similar surge in OUD and other impacts of the epidemic as the broader state of Maine population
- MDOC:
 - 76% of population needing SUD treatment
 - 39% needing OUD treatment
 - 47% (237) of overdose deaths in Maine (2020) were previously involved with MDOC (636 Overall Overdose Deaths in 2021)
 - MDOC Released 2021 787 Males, 95 Females

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MDOC's Opioid Response

- Formal prioritization of MAT under Governor Mills
 - Executive Order #2 (2019)
 - Established Opioid Response, statewide
 - Specifically referenced need for MAT in corrections
 - Support to MDOC for creation and rollout of MAT services inside corrections
 - MDOC established MAT Steering Committee to do this work
 - MAT work began with little framework or best practices in corrections – MDOC had to develop this

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MDOC's Opioid Response

- 2022 - MDOC is pleased to offer broad access to MAT services, along with other comprehensive SUD treatment
 - More than 400 adult residents are actively receiving MAT services inside our facilities on a daily basis
 - More than 675 adult residents have participated in MAT services and transitioned to the community
- Universal access has become available since August 2021

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Importance of Continuity of Care

- MaineCare expansion and partnership GRT and MPRN
- Continuity of care partners/treatment providers
 - Harm reduction efforts
 - Problem-solve Maine's geography and provider issues
- Intended outcome:
 - Sustainable transition to community treatment, focused recovery, and high rates of treatment retention



Importance of Normalization

- MDOC's Culture of Wellness – Maine Model
- Language Matters
 - Need to de-stigmatize incarceration, SUD/ODU, and treatment
- Philosophical shift for MDOC
 - Normalization and humanization are important elements needed in corrections to properly prepare residents for life in the community
 - Impact on approach to diversion and corrections
 - Enhanced Outcomes



Universal Access to MAT

- Timeframes for Expansion - 2021
 - Feb 15th – Opened eligibility window to 1 year from ERD*
 - May 12th – Opened eligibility window to 2 years from ERD, and began inducting residents with OUD who are actively receiving treatment for Hep C regardless of sentence length
 - Aug 1st – Opened eligibility to any appropriate resident regardless of sentence length
- Active MAT Participants
 - Prior to expansion: Steady state of ~200
 - Current: >400
 - Anticipated: >600

*ERD = Earliest Release Date

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Education for Residents

- Initial MAT Visit
 - Review of medications available and shared decision making to determine best option for each resident
- Prior to Induction
 - Nursing review of how to take medication properly – particularly important for sublingual formulations
 - What symptoms/side effects to look out for and report
- Prior to Release
 - Narcan indications and administration
- In Process
 - Creation of shared decision making tool and MAT overview guide to be given to residents prior to their initial MAT visit

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Medications

- **Buprenorphine (Subutex):** Daily sublingual tablet
- **Buprenorphine – Naloxone (Suboxone):** Daily sublingual film or tablet
- **Long-acting Buprenorphine Injection (Sublocade):** Monthly subcutaneous injection

- **Naltrexone:** Tablet that can be swallowed
- **Vivitrol:** Monthly intramuscular injection of Naltrexone microspheres
 - Naltrexone and Vivitrol are used to treat both opioid and alcohol use disorders

- **Methadone:** Liquid medication that is swallowed
 - Currently only maintenance is available at MDOC, but actively planning for full availability in the near future

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Weekly MAT Release Planning Calls

- **Topics Covered**
 - Housing* Leading the Way (Bangor) Potential Cumberland County facility
 - Medical appointments (PCP, MH, other as appropriate)
 - MAT community appointment - within 7-10 days of release
 - Release medications needed
 - Connections to recovery community
 - Employment and/or education needs

- **Participants**
 - Wellpath: Director of MAT, MAT Nurse and/or Pharmacy Nurse
 - DOC: Director of Evidence Based Practices, Correctional Care and Treatment Workers (CCTWs)
 - Groups Recover Together or Day One (site dependent): Care Navigators
 - Portland Recovery Community Center: Program Coordinator

*Housing tends to be the most challenging piece of the release planning process

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MDOC Continuity of Care Data

- Percent of those releasing with secured community appointments for MAT:
 - 2019- 89%
 - 2020- 99%
 - 2021- 100%
- 68% of releasing clients attend first community appointment
 - Average retention in treatment is 149 days
- Releases per month still actively prescribed MAT:
 - 2019- Avg 19 (6 months)
 - 2020- Avg 35 (12 months)
 - 2021- Avg 36 (6 months)
- Majority of releases go to Penobscot(2,253), Cumberland (3,065) and Kennebec (1597) counties. Total County Releases 2020 (20,893) 2021 (16,600)

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Education for Staff

- Key Points
 - Addiction as a chronic disease
 - Symptoms of opioid use disorder
 - Medications for treatment
 - Language matters and the impact stigma can have on treatment trajectories
 - Key to our success is collaboration, Sense of Urgency 636
- Formats
 - Staff orientation and Post-School
 - Memos, emails, and webinars
 - Staff meetings and ongoing “just-in-time” education
 - Coming soon: Newsletter

“Education is the most powerful weapon which you can use to change the world.”
 – Nelson Mandela

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Thank you

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