



Governor's Office Opioid Response Seminar Series
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Approaches to SUD with Methadone

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Disclaimer

None of the planners or presenters for this activity have relevant financial relationships to disclose.

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Introductions

Peter F. Morris, Co-Founder/CEO - Everest Recovery Centers

- 29 years experience in the opioid use disorder treatment industry
- 2017 Invited Guest to White House Opioid Round Table
- 2013 & 2015 - Presented at AATOD Conference
- 2013 Panelist at SAMHSA Conference
- Served on the NABH Addiction Committee
- Bachelor of Science in Business Administration

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- ▶ Everest Recovery (<https://everest-recovery.com>) is an opioid treatment program (OTP) that provides medication assisted treatment to those suffering from opioid use disorder (OUD).
- ▶ An Opioid Treatment Program (OTP) is defined as "a program or practitioner engaged in opioid treatment of individuals with an opioid agonist medication".
- ▶ Mission - Everest Recovery is a new startup run by seasoned veterans in the substance abuse treatment field. Our mission is to provide comprehensive services for persons affected by addiction through community awareness, quality and holistic clinical services in an efficient, safe, and fiscally sound environment.
- ▶ We help people rebuild their self-esteem and reestablish their roles as productive family members through our services, which include all three FDA approved medications: methadone, buprenorphine and naltrexone; diagnostic assessment, relapse prevention and support groups, addiction education, counseling; and more.

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Quotes

- ▶ "Addiction is a chronic illness accompanied by significant changes in the brain."
- ▶ "Addiction does not occur because of moral weakness, a lack of willpower, or an unwillingness to stop."
- ▶ "The first-time individuals drink or take drugs, they do so voluntarily, and they believe they can control their use. With time, more and more alcohol or drugs are needed to achieve the same level of pleasure and satisfaction as when they first started. Seeking out and taking the substance becomes a near-constant activity, causing significant problems for them and their family and friends. At the same time, progressive changes in the brain drive the compulsive, uncontrollable drug use known as addiction."

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Three FDA Approved Medications

- ▶ **Methadone**
 - ▶ Schedule II controlled substance, used for 50+ years, can only be dispensed by SAMHSA-certified clinics to treat OUD
 - ▶ Rigorously researched, highly regulated, and considered the gold standard in treating opioid dependence
 - ▶ Blocks the effects of heroin and prescription drugs containing opiates
 - ▶ Eliminates withdrawal symptoms and relieves drug cravings from heroin and prescription opioid medications
 - ▶ Excellent medication when used properly (much higher retention), complications when used improperly (overdose)
- ▶ **Buprenorphine/Suboxone**
 - ▶ Schedule III controlled substance, FDA approved in 2002 for treating OUD, prescribed by physicians in the office setting and in some OTPs
 - ▶ Eliminates withdrawal symptoms and relieves drug cravings from heroin and prescription opioid medications
 - ▶ Limited research on long-term efficacy
 - ▶ High diversion rates in the physician office setting
- ▶ **Naltrexone/Mivitrol**
 - ▶ Non-opioid medication known to stop effect of opiates by blocking receptors, does not stop craving
 - ▶ Good if beyond withdrawal stage and patients are highly motivated
 - ▶ Comes in daily pill form or injection lasting approximately 30 days
 - ▶ Unlike methadone and buprenorphine, can be prescribed by any individual who is licensed to prescribe medicine

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Medication-Assisted Treatment

- ▶ MAT is the use of medications in combination with counseling and behavioral therapies (biopsychosocial). Simply prescribing medication alone is not MAT.
 - ▶ The medication stabilizes patients so they can benefit from counseling to address the issues that drove them to illicit drug use in the first place.
 - ▶ SAMHSA TIPs and accreditation guidelines require medication and counseling together.
- ▶ Studies have found that those who receive MAT are 75% less likely to have an addiction-related death than those who do not receive MAT.
- ▶ MAT has been shown to improve patient survival, increase retention in treatment, decrease illicit opiate use and other criminal activity; increase patients' ability to gain and maintain employment, improve birth outcomes among women who have substance use disorders and are pregnant, and lower a person's risk of contracting HIV or hepatitis C by reducing the potential for relapse.
- ▶ Greatly underutilized

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OTP Outcomes

- ▶ NIH: "the safety and efficacy of MAT has been unequivocally established. ...**methadone maintenance coupled with relevant social, medical and psychological services has the highest probability of being the most effective of all treatments for opioid addiction.**"
- ▶ 90 percent of patients receiving treatment at an OTP for more than one year tested negative for opioids in their most recent drug screen.
- ▶ 73 percent of patients in treatment more than one year are currently employed, enrolled in school, or disabled.

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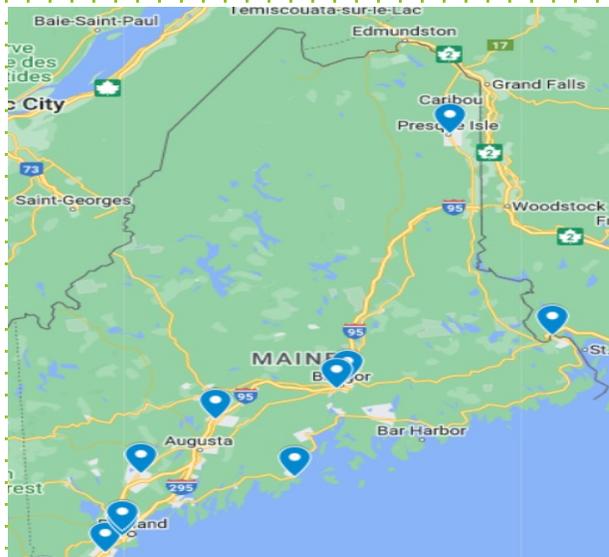
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OTP Industry - National Level

- ▶ There are approximately 1,900 operating OTPs in 49 states, the District of Columbia, Puerto Rico and the Virgin Islands. Notably, Wyoming is the only state that has no OTP's.
- ▶ The OTPs have expanded over the course of the past five years, but the expansion has not been significant enough to meet the increasing needs of people with opioid use disorders (OUDs), requiring access to comprehensive treatment services, which are provided through OTPs. This is the result of restrictive zoning ordinances, which prevent OTPs from opening in addition to limitations of third-party reimbursement.
- ▶ Collected data from State Opioid Treatment Authorities (SOTAs) findings indicate that approximately 550,000 - 600,000 patients are in treatment in OTP's.

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Maine OTP Footprint



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Maine OTP Footprint

- ▶ Acadia Healthcare - Bangor, Calais, Presque Isle, South Portland & Waterville
- ▶ Baymark Health Services - Lewiston & Portland
- ▶ CAP Quality Care - Westbrook
- ▶ Everest Recovery Centers - Saco
- ▶ New Season - Bangor & Rockland
- ▶ Northern Light Health - Bangor

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New Initiatives DEA Mobile Van Regulations

- ▶ Three broad applications in using such vans:
 - ▶ The first pertains to the more standard use of such vans, which extends the reach of OTPs in surrounding communities. The DEA has simplified the process of developing such vans, although other issues must be considered, including the purchase price of these mobile vans.
 - ▶ The second broad application is how such vans could work with the justice system. In this case, the OTPs would work with the SOTAs as well as the Departments of Corrections.
 - ▶ The third application would be to use such vans to provide, expand, and enhance access to care for people with opioid use disorder in residential settings. These settings could include recovery homes, which are classified as medication free facilities, skilled nursing facilities and nursing homes, in addition to many other site needs.

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New Initiatives – Medication Units

- ▶ Medication Units (non-mobile medication units) work in conjunction with licensed OTPs. The use of telehealth services to assess patients enhances the ability of such medication units to treat patients in rural areas. Unlike mobile vans, the medication unit is a brick-and-mortar facility, which can be located in the general vicinity of the OTP, or some distance away, depending on the treatment gaps in the county or region of the state.

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New Initiatives – Telehealth Services

- ▶ Telehealth services have expanded in OTPs, and it was learned that many patients did not have the technology for visual/two-way exchange, leaving them with audio-only opportunities. This experience has compelled a review of how such services can be incorporated into updated OTP policy. AATOD is recommending to SAMHSA to change the ability of OTPs to admit new patients to treatment with methadone via telehealth. Currently, only buprenorphine admissions can be done via telehealth.

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Challenges Facing OTP's

- ▶ Workforce
- ▶ Funding
- ▶ Educating stakeholders around the components of MAT - medication AND clinical
- ▶ Stigma surrounding folks with opioid use disorder and OTP's as a form of treatment

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