

BERNALILLO COUNTY OPIOID INITIATIVE - TREATMENT IMPLEMENTATION TEAM PROGRESS ON RECOMMENDATIONS

What works or would work to "turn the curve" on this problem? RECOMMENDATIONS FOR ACTION	What needs to be done first? What is in process and/or most feasible? PRIORITY FOR ACTION & RATIONALE	Who has the influence or power to make this happen? DECISION-MAKER(S)	Who has a stake in making this happen and needs to be involved? PARTNERS	What has happened and what still needs to happen to make this a reality? STATUS & NEXT STEPS
1. Expand access to MAT				
<ul style="list-style-type: none"> ● Increase MD participation in prescribing <ul style="list-style-type: none"> ○ Remove preauthorization for prescribing buprenorphine ○ Address issues of stigma 				
<ul style="list-style-type: none"> ● Continue MAT for MDC inmates already in treatment when incarcerated 				
<ul style="list-style-type: none"> ● Offer pre-release MAT to MDC inmates not yet in treatment 				
<ul style="list-style-type: none"> ● Assure access for uninsured populations, including those not eligible for coverage 				
<ul style="list-style-type: none"> ● Expand buprenorphine beyond detox to ongoing maintenance treatment when appropriate (Turquoise Lodge and MATS)* 				
<ul style="list-style-type: none"> ● Address issue of drug courts excluding people on MAT* 				
<ul style="list-style-type: none"> ● Address BHSD guidelines allowing only psychiatrists to prescribe buprenorphine and no payment for methadone* 				
<ul style="list-style-type: none"> ● Address private insurance payment for methadone* 				
<ul style="list-style-type: none"> ● Address VA lack of provision and payment for methadone* 				
<ul style="list-style-type: none"> ● License mid-level practitioners to prescribe buprenorphine (issue of federal regulations)* 				

* Post-summit proposed recommendations

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<p>2. Expand full array of treatment services aligned with ASAM guidelines</p>				
<ul style="list-style-type: none"> Expand number and capacity of residential and inpatient programs <ul style="list-style-type: none"> Assure access for uninsured populations, including those not eligible for coverage* 				
<ul style="list-style-type: none"> Include wrap-around support services as integral part of treatment services, including assistance finding housing and jobs 				
<ul style="list-style-type: none"> Assure identification and treatment of co-occurring disorders 				
<p>3. Maximize coverage opportunities for treatment through Medicaid, Centennial Care MCOs and private insurance</p>				
<ul style="list-style-type: none"> COVERAGE: Work with Medicaid, Centennial Care MCOs and private insurance to provide coverage/ reimbursement for all levels of care, including wrap-around services 				
<ul style="list-style-type: none"> COVERAGE: Duration of coverage for specific levels of intervention should be flexible and tailored to patient needs 				
<ul style="list-style-type: none"> COVERAGE: Eliminate need for diagnosed co-occurring condition as a requirement for Medicaid funding of treatment of alcohol/drug dependency 				
<ul style="list-style-type: none"> ACCESS: Identify and offer enrollment to all persons who are drug users or at risk for opioid use and are eligible for Medicaid, especially persons being released from incarceration 				

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<p>4. <i>Develop comprehensive, coordinated and sustainable treatment system in Bernalillo County</i></p>				
<ul style="list-style-type: none"> • Develop a comprehensive inventory and mapping of current treatment services to determine gaps in capacity and levels of care as basis for an effective, coordinated system 				
<ul style="list-style-type: none"> • Develop current, consistently updated database of services accessible to providers and community (including eligibility criteria and program capacity)* 				
<ul style="list-style-type: none"> • Identify opportunities for enhanced linkages among different components of the system* 				
<ul style="list-style-type: none"> • Develop shared measurement criteria to allow for evaluation of system linkages and accurate cost reports* 				
<ul style="list-style-type: none"> • Propose realignment of resources in the county to support prioritized services in alignment with agreed-upon principles 				
<ul style="list-style-type: none"> • Explore feasibility and appropriately plan for expansion of County DSAP as part of a much-expanded integrated treatment system 				
<ul style="list-style-type: none"> • Assure integration of MDC into treatment system linked to community providers/resources* 				

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