Thank you for joining!

We will begin our webinar shortly.

Before we begin please check that the sound levels on your computer or phone are turned up to hear clearly.
Emerging Promising Practices for MAT using Telehealth

- Anxiety
- Depression
- Job loss
- Working remotely
Housekeeping Items

1. Today’s webinar is 1 hour including Q&A.
2. All participants will be muted during the webinar.
3. Polls will be used during the presentation. Please answer to be part of the discussion.
4. Please use the Q&A function. We will monitor questions throughout and answer as many as possible at the end.
5. This webinar is being recorded and will be posted within 24 hours at [www.beaconhealthoptions.com/coronavirus/](http://www.beaconhealthoptions.com/coronavirus/) so you have continued access to the information and resources.

**PLEASE NOTE:** This presentation provides some general information that is subject to change and updates. It should not be construed as including all information pertinent to your particular situation or as providing legal advice. We encourage you to consult with your legal counsel regarding the topics raised in this presentation.
Today’s speaker

Lisa Samuel, LMHC
Provider Quality Manager

Tildabeth Doscher MD, MPH
What we will discuss today…

What is Medication Assisted Treatment (MAT)?

Medication Assisted Treatment *and* COVID-19

Pros and cons of Medication Assisted Treatment and telehealth

Patient care on the frontlines via telehealth

Experiences from the field
Chapter 01

“We help people live their lives to the fullest potential.”

Our Commitment

Medication Assisted Treatment, Utilization of Telehealth and COVID-19
What is Medication Assisted Treatment?

Use of FDA approved medications¹ + Behavioral, cognitive and recovery oriented treatment programs = Shift in the treatment of substance use disorders

MAT includes Buprenorphine, Methadone and Naltrexone.
Why are we discussing this topic in relation to COVID-19?

MAT is evidenced based treatment

• Access to Medication Assisted Treatment (MAT) and adherence to MAT as an evidence-based best practice are key components to recovery.

COVID-19 has impacted how we deliver MAT

• The way we deliver care has changed as a result of the COVID-19 pandemic and this includes the way MAT is prescribed.

MAT can be successful via telehealth

• The use of telehealth and/or telephonic services to provide evaluation and treatment of patients can be used for initial evaluations, including consideration of the use of MAT to treat opioid and alcohol use disorder.

MAT increases adherence to treatment

• MAT reduces overdoses, increases adherence/retention in treatment and is effective as part of a holistic treatment program.
COVID-19’s impact on the opiate use disorder population

- Limited access to face to face services
- Increased isolation
- Lack of connection with supports from program
- Increase in overdoses
General considerations for implementing telehealth

What is telehealth?

“The use of electronic information and telecommunications technologies to support and promote long-distance clinical health care, patient and professional health-related education, public health and health administration…”

Communicate

Check-ins

Practice

Screening Tools

Back-up Plan
Chapter 2

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Overview of SAMHSA Guidance and Best Practices
The Drug Enforcement Administration (DEA) has provided flexibility in prescribing and dispensing of certain controlled substances. The DEA partnered with SAMHSA to ensure practitioners may admit and treat new patients with opioid use disorder (OUD) during COVID-19.

The DEA announced practitioners may prescribe controlled substances to patients using telemedicine without first conducting an in-person evaluation for select MAT meds.

The DEA notes that practitioners can prescribe buprenorphine to new and existing patients with OUD via telehealth.
If you already have a DATA 2000 waiver and are willing to increase your patient limit, a provider can complete the SAMHSA’s Online Request for a New Waiver or Patient Limit Increase.\textsuperscript{5}

Federal regulations grant practitioners who are not otherwise eligible the ability to request a temporary increase up to 275 patients.\textsuperscript{6}
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Chapter 03

Opioid Use Disorder: Patient Care on the Frontlines via Telehealth
Scope of the problem & opioid deaths

23 Million Americans meet criteria for a substance use disorder (SUD)

2.1 Million Americans have OUD

10% receive treatment

2014 OUD Deaths
- 6.3 to 11.0
- 13.6 to 16.0
- 18.6 to 21.0
- 11.1 to 13.5
- 16.1 to 18.5
- 21.0 to 35.5

2018 OUD Deaths
- 6.9 to 11.0
- 13.6 to 16.0
- 18.6 to 21.0
- 11.1 to 13.5
- 16.1 to 18.5
- 21.1 to 57.0

A silver lining presented by COVID-19

- Telehealth allowed by SAMHSA & DEA
- Reframing UDS testing
- Potentially less exposure to buying illicit drugs
- Increased ability for collaboration
- Increased access
Case examples and innovative service models

Client turned away from emergency room after overdose, quick access to treatment via telemedicine

Client overprescribed pain meds after surgery, then cut off by prescribing physician, unable to find help when turning to PCP

Client with recurrence of Benzodiazepine use, stated it was easier to admit to use on telemedicine visit

**Bright Heart Health** - 24/7 access via telehealth

**Project SHOUT (Support for Hospital Opioid Use Treatment)** through the California Health Care Foundation

**True North (Canada)** – Same day assessment and treatment. Clinics located in the pharmacy with instant access to a prescriber and medications.
Ideas for the future

- Technology for patients/Free access to internet
- Provider and payer collaboration
- Need group connectedness
- Urgent care/ED’s to offer telemedicine for SUD treatment
- Increase training to providers on SUD via telehealth
Resources & references
References

Resources


   *https://www.cdc.gov/drugoverdose/data/prescribing/overdose-death-maps.html*


6. Bright Heart Health *https://www.brighthearthealth.com/*

7. True North *https://www.truenorthmedical.com/*

Refer to Beacon’s COVID-19 webpage for the most up-to-date information

Beacon COVID-19 provider resources & webinars LINK
Questions?

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Thank You

This presentation will be posted at
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CONTACT US:
Beacon’s National Provider Services Line

800-397-1630 (Monday-Friday, 8 a.m.-8 p.m. ET) or contact your Provider Relations contact