

# Medication for Addiction Treatment (MAT)



## Options for Ongoing Treatment After Hospital Starts

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Starting treatment for substance use disorder (SUD) in the emergency department or hospital increases access to treatment in all communities at any time, day or night. Strong relationships with providers that offer ongoing treatment linkage boosts the effectiveness of a hospital start. Below is an overview of treatment options available in some communities suitable for ongoing treatment.

### Federally Qualified Health Centers and Community Health Centers

Community health centers (CHCs) and Federally Qualified Health Centers (FQHCs) are non-profit organizations that provide primary health care for individuals, families and communities. An increasing number of CHCs/FQHCs offer MAT. The number of x-waiver providers will vary from clinic to clinic, thus MAT may only be offered during limited hours.

#### BENEFITS

- FQHCs/CHCs accept a variety of insurances and also serve the uninsured.
- Because FQHCs/CHCs embed MAT within general primary care, patients may feel less stigma accessing these facilities.
- Patients can receive all of their medical care in one location.

#### CAUTIONS

- SUD treatment is a portion of services offered therefore clinics may have limited hours or policies that do not maximize access to MAT.
- Patients are often required to elect the FQHC/CHC as their primary care provider in order to receive MAT services.

### Primary Care Practices

Some primary care physicians offer treatment with buprenorphine as part of their general practice which can make access to treatment easy for patients who need it. When evaluating the strength of an office based opioid treatment prescriber, look for evidence of linkages within their communities for resources and/or medical subspecialties (e.g. behavioral health, infectious disease, job retraining, etc.)

#### BENEFITS

- Patients may feel less stigma accessing these services when MAT is embedded within general primary care
- Patients can discuss all medical needs with one provider.

#### CAUTIONS

- SUD treatment is a portion of primary care services and there may be limited hours or policies that do not maximize access to MAT.
- Primary care providers may not offer psychosocial or behavioral health services, but they should be able to provide referrals.

### Hospital Outpatient Clinic

Some hospitals offer MAT through a hospital outpatient clinic. Hospital-supported clinics may offer stand alone SUD services or operate within existing family health or primary care clinics. These clinics are most often located on the same campus as the hospital or in very close proximity, and are sometimes referred to as a “bridge clinic”.

#### BENEFITS

- Hospitals can create a treatment setting that best matches their patient populations needs.
- Hospital outpatient clinics are generally close to the ED which can support effective connections to on-going care.

#### CAUTIONS

- Offering MAT into a specialized hospital outpatient setting requires space, staffing, and may lead to sustainability challenges.
- Often hospital MAT clinics operate on a part-time basis.

### Urgent Care

Some urgent care centers are beginning to offer withdrawal management, lapse prevention, or on-going short term MAT. Services offered will vary from clinic to clinic, calling ahead is advised.

#### BENEFITS

- Most urgent care clinics accept patients on a walk-in basis and with no appointment required.

#### CAUTIONS

- Services offered vary from site to site depending on provider availability.

## Narcotic Treatment Programs / Opioid Treatment Programs

Narcotic treatment programs (NTPs) and opioid treatment programs (OTPs) are commonly known as methadone clinics but now all offer buprenorphine in addition to methadone. NTPs/OTPs are regulated and licensed by the federal and state governments and must adhere to strict clinical practices. Patients are required to participate in a comprehensive treatment program that includes counseling.

### BENEFITS

- Methadone is a good choice for some patients and is only available via NTPs.
- Daily dosing and structured visits are preferred by some patients as this builds a personal sense of accountability and provides access to services on a routine basis.

### CAUTIONS

- Participation in counseling is mandatory but not appropriate for all patients.
- Daily visits are required for methadone and for the first several weeks/months for buprenorphine.

## Medication Units

Medication Units (MUs) are satellite facilities of an NTP/OTPs where licensed private practitioners and/or community pharmacists dispense or administer OUD medications. Services are limited to administering or dispensing medications and collection of specimens for drug screening.

### BENEFITS

- Patients are able to access daily medications and complete required drug screening at locations closer to their primary residence.

### CAUTIONS

- Patients will need to travel to the sponsoring NTP/OTP for the remainder of treatment services such as counseling.

## Residential Treatment Programs

A residential treatment center is a live-in facility that provides therapy for up to one year addressing substance abuse, mental illness, and other behavioral problems. Residential treatment programs include sober living environments, dual diagnosis treatment programs, faith-based treatment programs, and other specialized models. Each facility has specific rules and expectations for residents and their families.

### BENEFITS

- The structured environment is free from temptations and distractions.
- Round-the-clock care and support is provided.
- Patients receiving MAT are eligible for programs that accept federal or state funding.

### CAUTIONS

- Cost of programs can be prohibitive when not covered by insurance.
- Private pay programs may refuse patients on MAT.
- Family and work obligations may prevent
- Programs are impacted and often have long wait lists.
- Many programs do not offer MAT, patients will need MAT providers.

## Telemedicine

Telemedicine is growing within the MAT treatment landscape. MAT is delivered by providers and counselors on a smartphone app or web browser supported platform. In the setting of COVID-19, telemedicine can be provided by phone without video. Some telemedicine providers have furnished EDs with tablets to facilitate access for these patients. An in-person intake appointment may be required.

### BENEFITS

- Televisits offer greater confidentiality and can be held where the patient is most comfortable, reducing stigma.
- Sessions take place at the convenience of the client providing flexibility and autonomy.

### CAUTIONS

- Access to a smart-phone or internet is required.
- Self motivation is required to continue treatment, which can be challenging for some patients.
- Not all health plans cover telemedicine.

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